

SB2227

LATE

TESTIMONY



S.B. 2227

RELATING TO PROVIDER ORDERS FOR LIFE SUSTAINING TREATMENT

Senate Committee on Judiciary and Labor

February 25, 2014; 10:30 a.m.

The Queen's Health Systems strongly supports SB 2227. Competent adults have a right to plan ahead for health care decisions through the execution of advance medical directives, and to have the wishes expressed in those documents respected. Provider orders for life sustaining treatment complements an advance medical directive by converting a person's wishes regarding life-sustaining treatment, such as those set forth in an advance medical directive, into a medical order. The use of POLST medical orders can overcome many of the problems associated with advance directives, which are often locked away in file drawers or safe deposit boxes and unavailable to health care providers when the need arises to ensure that the patient's wishes are followed.

A completed provider order for life-sustaining is signed by the patient's attending physician or, if SB 2227 is passed, an APRN and provides a specific and detailed set of instructions for a health care professional or health care institution to follow in regard to the patient's preference for the use of various medical interventions. POLST medical order helps ensure that patients' health care preferences are honored by health care providers.

Thank you for the opportunity to provide testimony in strong support of SB 2227.

Aloha Senators Green, Baker, and members of the Committee on Health,

As an advance practice registered nurse (APRN) with The Pain and Palliative Care Department at The Queen's Medical Center, discussions related to patient choices and end-of-life care are a routine part of the care I provide to palliative care patients and families. As these patients transition toward discharge from the hospital, I include in my discussions, when appropriate, the POLST document. It only makes sense that as a practitioner qualified in having end-of-life care discussions with patients and families, I should also be authorized to sign the document. I am in support of renaming the POLST to mean "provider orders for life-sustaining treatment."

I oppose however, the amendment to the House bill that proposes the Department of Health produce a sample form. We currently have a form that was created with Department of Health input and is based on national POLST standards. This amendment would add an unnecessary expense to a process that has been working well since 2009 as well as create confusion for practitioners and patients.

Mahalo,

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