

MOLST



In New York State, the Medical Orders for Life-Sustaining Treatment (MOLST), provides details of the patient's wishes for end of life care, particularly regarding cardiopulmonary resuscitation (CPR) and other life-sustaining treatment.

MOLST is another form of a living will and is specifically intended for patients with serious health conditions who:

- ◆ Want to avoid or receive any or all life-sustaining treatment;
- ◆ Reside in a long-term care facility or require long-term care services;
- ◆ Might die within the next year.

The MOLST form encourages a discussion between the patient, their Agent and a qualified, trained health care professional. The form defines the patient's goals for care, reviews possible treatment options on the entire MOLST form, and ensures shared, informed medical decision-making.

IMPORTANT

MOLST is the only authorized form in New York State for documenting non-hospital Do Not Resuscitate (DNR) orders.

Family Health Care Decisions Act

In 2010, a new law was enacted in New York State to allow a family member or friend to make decisions on your behalf if a Health Care Proxy form has not been completed. The law fills a gap in terms of making a determination of those who are given preference to act on behalf of an incapacitated person. The list of persons who may act as a surrogate are in order of priority:

- ◆ A court-appointed guardian
- ◆ The spouse or domestic partner
- ◆ A child older than 18
- ◆ A parent, a sibling or a close adult friend or relative familiar with the patient's personal, religious and moral views regarding Health Care.

Excluded:

Administrators, employees and independent contractors of the Health Care facility caring for the patient cannot act as a surrogate unless they are related to or were a close friend of the patient before their admission to the facility.

Patient's Rights Medicare Helpline
1-800-333-4374

Advance Directives for Health Care



STATE  **WIDE**

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Advance Directives



In order to have your wishes respected should you become no longer mentally capable to make decisions for yourself, you must complete state

approved forms with instructions regarding:

- ◆ Who you would appoint to make Health Care decisions for you.
- ◆ What care you would want to receive or not receive.

An advance directive is a legal document which allows people to indicate treatment preferences and designate someone to make decisions on their behalf if they are unable to do so. Two specific forms in New York State that serve as advance directives are the **Health Care Proxy** form and the **MOLST** form (Medical Orders for Life Sustaining Treatment).

Download a Health Care Proxy form at:

www.health.ny.gov/forms/doh-1430.pdf

Download a MOLST form at:

www.health.ny.gov/forms/doh-5003.pdf



A living will is a document that contains specific instructions by the patient for end of life treatment. It does not include a designation of an individual to act on your behalf.

Health Care Proxy



The legal form to indicate your wishes in New York State is a Health Care Proxy form.

Lawyers, doctors, hospitals and other providers have these forms which allow you to designate a person or Health Care Agent to act on your behalf should you not be capable of making health care decisions. The Agent would have the power to make all Health Care decisions for you once a doctor determines that you are unable to do so. Here are a few things to note when filling out the Proxy form:

- ◆ Anyone 18 years of age or older can be designated as your Health Care Agent.
- ◆ The form should be completed with two adult witnesses, other than the Agent and **does not** need to be notarized.
- ◆ Should you be able to resume making your own decisions, the Agent's authority to make decision for you ends.
- ◆ You can designate an alternate Agent should the primary Agent be unavailable.
- ◆ You can change your New York State Health Care Proxy form or appoint a new Health Care Agent at any point by filling out a new form.

Health Care Proxy

- ◆ It is important to discuss your wishes with your appointed Agent regarding treatments for life-threatening illness or whether or not you wish to be on life support systems. If your wishes are unknown, the Agent can act to serve your best interests.
- ◆ The Agent cannot make decisions in regard to artificial nutrition and hydration unless he/she knows your wishes or you have provided written instructions. An Agent cannot go against any decisions and instructions which you have clearly detailed.
- ◆ Doctors, hospitals, and nursing homes are legally required to provide your Agent with the same health information about your condition as they would provide you.
- ◆ An Agent has the power to act on your behalf after your death but only regarding whether to donate your organs or tissue. You can also make your donation wishes known on your Health Care Proxy form.

