MEDICAL ORDERS FOR SCOPE OF TREATMENT (MOST)

Online Module

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About MOST

- The Medical Order for Scope of Treatment (MOST) form is completed as an outcome of Advance Care Planning conversations with a capable adult patient.

- If the patient is not able to provide consent, the MOST form is completed as an outcome of Advance Care Planning conversations with their substitute decision makers (SDMs).

- MOST documents and specifies code status, MOST designations, specific interventions and the process in which decisions were reached.

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About MOST

A MOST form should be completed only after:

- The patient (or SDM) has been given the opportunity to think through and discuss options regarding life sustaining treatments.
- The health care professional(s) has discussed current medical conditions, prognosis and treatment options including life sustaining treatments with the patient and SDMs.
- The patient or (SDM) has communicated his/her personal preferences regarding life sustaining treatment with the physician.

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About MOST

The Most Responsible Physician (MRP) is ultimately responsible for the discussion and documentation of the clinically appropriate and relevant MOST.

- All members of the clinical team have responsibilities to engage in Advance Care Planning conversations.
- If a MOST is not documented for a patient, then life support interventions will be provided by health care providers, unless the patient has specifically refused such interventions or if the intervention is deemed to be futile / not beneficial.

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MOST Form

The MOST form has four sections:

SECTION 1	**CODE OF STATUS**
SECTION 2	MOST DESIGNATION
SECTION 3	SPECIFIC INTERVENTIONS
SECTION 4	MOST ORDER ENTERED AS A RESULT OF

The completed MOST form provides information to health care team members about the recommended procedures to be administered to a patient, based on their expressed wishes and/or instructions.

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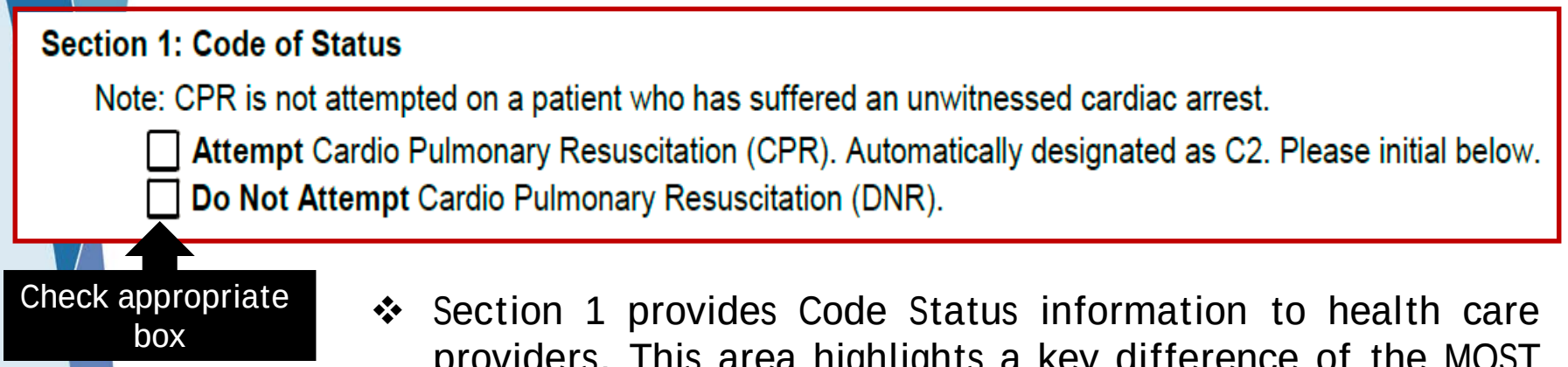
MOST Form

SECTION 1: CODE OF STATUS



- Section 1 provides Code Status information to health care providers. This area highlights a key difference of the MOST form from the previous acute care Do Not Resuscitate (DNR) form. The MOST form is NOT always a DNR order.

- It is important for patients and families to know that:

i. CPR will not be attempted on a patient who has suffered an unwitnessed cardiac arrest, unless observed within minutes of the event.

ii. Resuscitation is not recommended in most cases of advanced medical illness - cases where it is clearly not beneficial.

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MOST Form

SECTION 2: MOST DESIGNATION

Section 2: Most Designation based on document conversations. (Initial appropriate level.)

Medical Treatments Excluding Critical Care Intervention and Resuscitation	
M1: _____	**Supportive care, symptom management and comfort measures. Allow natural death.** Transfer to higher level of care only if patient's comfort needs not met in current location.
M2: _____	**Medical treatments available within location of care. Current location:** _____ Transfer to a higher level of care only if patient's comfort needs not met in current location.
M3: _____	**Full medical treatments excluding critical care.**
Critical Care Interventions Requested. Note: consultation will be required prior to admission.	
C1: _____	**Critical Care Interventions excluding intubation.**
C2: _____	**Critical Care Interventions including intubation.**

Initial one designation

- The selections in Section 2 must be the result of conversations with the patient or Substitute Decision Maker (SDM) if the patient is not capable and must align with the patient's wishes or instructions expressed in any advance care planning documents.

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SECTION 2: MOST DESIGNATION (cont'd)

- Physicians must initial the appropriate level for Medical Treatments excluding Critical Care Interventions and Resuscitation (M1, M2, or M3) or Critical Care (C1 or C2).

- Note that because treatment options available differs from one location of care to another, patients and Substitute Decision Makers (SDM) must be fully aware of what the treatment options are at the patient's current location of care. M2 is most pertinent to Residential Care and smaller hospitals without critical care units.

- In addition, consultation will be required prior to admission for Critical Care intervention. Should a patient wish critical care involvement – with or without intubation – they must be fully informed that critical care will not be automatically provided. A Critical Care Consult will be requested and the Critical Care Consultant will determine the most appropriate medical management.

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SECTION 3: SPECIFIC INTERVENTIONS

Section 3: Specific Interventions (Optional. Complete consent forms as appropriate)

Blood Products: ☐ Yes ☐ No Dialysis: ☐ Yes ☐ No

Enteral Nutrition: ☐ Yes ☐ No Non-invasive Ventilation: ☐ Yes ☐ No

Other Directions: _____

Surgical Resuscitation Order

☐ WAIVE DNR for duration of procedure and per-operative period. Attempt CPR as indicated.

☐ **Do not attempt resuscitation** during procedure.

Check all that apply. Add specific directions. Link with Care Plan

- This section is informed by health care instructions from Advance Care Planning conversations or from an Advance Directive. Patients may indicate they have a durable intent to refuse certain treatments (e.g. Dialysis). In these cases the health care procedure must not be offered, or must be withdrawn if already started.

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SECTION 3: SPECIFIC INTERVENTIONS (cont'd)

- Instructions must also be linked with an appropriate care plan. For example, if a decision is made not to insert a feeding tube ("provide Enteral nutrition") then a care plan needs to be developed to clarify what will be done when a patient who eats and is at risk, aspirates.

- The Surgical Resuscitation Order indicates what approach to take regarding DNR orders during a surgical procedure. For those patients with a DNR Code Status undergoing a surgical procedure, clarify with the patient whether or not DNR will be waived during the procedure. Complete a new MOST with this section completed. Void the old MOST by drawing a line through it.

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SECTION 4: MOST ORDER ENTERED AS A RESULT OF

Section 4: MOST Order Entered as a Result of (check all that apply)

- ☐ **Conversations/Consensus**
  - ☐ Capable Adult — Name: _____ Date: _____
  - ☐ Representative — Name: _____ Date: _____
  - ☐ Temporary Substitute Decision Maker — Name: _____ Date: _____
- ☐ **Physician Assessment:** ☐ Adult/SDM informed and aware ☐ Adult not capable/SDM not available
- ☐ **Supporting Documentation** (Copies place on patient chart and sent with patient on discharge)
  - ☐ Previous Scope of Treatment Medical Orders
  - ☐ Provincial No CPR
  - ☐ Representation Agreement:
    - ☐ Section 7 ☐ Section 9
  - ☐ NH ACP Record
  - ☐ Advance Directive
  - ☐ Other: _____

Check all that apply. Add specific directions. Link with Care Plan

- In this section you can document who participated in your MOST conversations and when the conversations occurred.

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SECTION 3: MOST ORDER ENTERED AS A RESULT OF (cont'd)

- Completing the "Conversations/Consensus" fields indicates that you had conversations with the capable adult or Substitute Decision Maker resulting in a consensus based decision on the scope of treatment.

- Tick the "Physician Assessment" box if the patient is not capable of having a conversation regarding the MOST form and the Substitute Decision Maker is not available.

  In situations where, based on the physician assessment, resuscitation is not clinically appropriate for the patient, and a physician recommends Level M1 care, the patient and SDM should still be informed of these decisions.

- If there is no agreement, decision support should be enlisted.

- Use the "Supporting Documentation" section to indicate what supporting documentation is available regarding your patient. Place copies of documents on the patient chart and provide this to the patient on discharge

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MOST Scenarios

INSTRUCTIONS

Select any one of six MOST scenarios. Read the patient history and goals, then answer the MOST questions.

- View the MOST form at any time by clicking the **MOST** button.
- Select a new scenario by clicking the **Menu** button.

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MOST Scenarios

CHOOSE A SCENARIO

Scenario 1: Community

Scenario 2: Emergency

Scenario 3: Renal

Scenario 4: Emergency

Scenario 5: GP Office

Scenario 6: Residential Care

Instructions **MOST Form**

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MOST Scenarios: Scenario 1

HISTORY

78 year-old widow with moderate to advanced dementia is moving in to residential care. She is coming from home where she was living with her only daughter. She is not capable of making medical decisions.

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MOST Scenarios: Scenario 1

GOALS

She has an Advance Care Plan written one year ago that states she values independence, family, and nature. She also states, "Should I become incapable of caring for myself or make decisions for myself, I would not want my life prolonged should any medical complications arise. I want to be made comfortable and be allowed to die naturally." You discuss this with the daughter and she is aware of and in agreement with the statements her mother made in her Advance Care Plan. She understands that her mother will be supported to die in the facility.

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Scenario 1: Code Status

How would you complete Section 1: Code Status

A. Attempt Cardio Pulmonary Resuscitation (CPR)

B. Do Not Attempt Cardio Pulmonary Resuscitation (DNR)

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Scenario 1: Code Status

INCORRECT

A. Attempt Cardio Pulmonary Resuscitation (CPR)

CPR should not be performed as the adult requested to die naturally and it is not medically indicated.

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Reveal correct answer

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Scenario 1: Code Status

CORRECT

B. Do Not Attempt Cardio Pulmonary Resuscitation (DNR)

The adult indicated that CPR not be performed and is not medically indicated. Check this box.

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Scenario 1: Medical Interventions

How would you complete Section 2: Medical Interventions

MI: Supportive care, symptom management and comfort Measures. Allow natural death

M2: Medical treatments available within the location of care. Specify location:

M3: Full medical treatments excluding critical care

C1: Critical care interventions excluding intubation

C2: Critical care interventions including intubation

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Scenario 1: Medical Interventions

CORRECT

MI: Supportive care, symptom management and comfort Measures. Allow natural death

Initial this level as this is consistent with her Advance Care Plan and no additional medical interventions would be recommended.

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Scenario 1: Medical Interventions

INCORRECT

M2: Medical treatments available within the location of care. Specify location:

Not be recommended according to her Advance Care Plan. Leave blank.

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Reveal correct answer

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Scenario 1: Medical Interventions

INCORRECT

M3: Full medical treatments excluding critical care

Not be recommended according to her Advance Care Plan. Leave blank.

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Reveal correct answer

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Scenario 1: Medical Interventions

INCORRECT

C1: Critical care interventions excluding intubation

Critical care interventions are not recommended. Leave blank.

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Reveal correct answer

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Scenario 1: Medical Interventions

INCORRECT

C2: Critical care interventions including intubation

Critical care interventions are not recommended. Leave blank.

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Reveal correct answer

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Scenario 1: Specific Interventions

How would you complete Section 3: Specific Interventions

A. None indicated

B. Blood products

C. Dialysis

D. Enteral nutrition

E. Other directions for specific interventions indicated

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Scenario 1: Specific Interventions

CORRECT

None indicated

No need to complete unless there are specific interventions that the adult would not want indicated in her Advance Care Plan, and confirmed with the daughter. Strike a link through this section.

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Scenario 1: Specific Interventions

INCORRECT

Blood products

No need to complete unless there are specific interventions that the adult would not want indicated in her Advance Care Plan, and confirmed with the daughter. Strike a link through this section.

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Reveal correct answer

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Scenario 1: Specific Interventions

INCORRECT

Dialysis

No need to complete unless there are specific interventions that the adult would not want indicated in her Advance Care Plan, and confirmed with the daughter. Strike a link through this section.

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Reveal correct answer

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Scenario 1: Specific Interventions

INCORRECT

Enteral nutrition

No need to complete unless there are specific interventions that the adult would not want indicated in her Advance Care Plan, and confirmed with the daughter. Strike a link through this section.

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Reveal correct answer

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Scenario 1: Specific Interventions

INCORRECT

Other directions for specific interventions indicated

No need to complete unless there are specific interventions that the adult would not want indicated in her Advance Care Plan, and confirmed with the daughter. Strike a link through this section.

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Reveal correct answer

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Scenario 1: MOST Order Written as a Result of

How would you complete Section 4: MOST Order Written as a Result of

A. Conversations / Consensus

B. Physician Assessment

C. Supporting Documentation

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Scenario 1: Specific Interventions

CORRECT

A. Conversations / Consensus

B. Physician Assessment

C. Supporting Documentation

This MOST is written as the result of a conversation with the patient.

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Scenario 1: Additional Care Planning

Additional care planning issues

Additional issues for the team to address include discussion of a Care Plan in the event of pneumonia, or aspiration. It may also be appropriate to discuss with the patient the interventions available at this facility to ensure appropriate orders are given.

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MOST Scenarios: Scenario 2

HISTORY

A 35 year-old man who self identifies as a Jehovah's Witness is admitted to acute care through the emergency room with a right compound tibial fracture from a ski accident. He is in significant pain, but remains alert and oriented.

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MOST Scenarios: Scenario 2

GOALS

As he is being assessed and then informed that he requires surgery, he keeps stating, “Do not give me any blood products.” He is accompanied by his friend who confirms that the patient is a Jehovah’s Witness. He indicates that he does not have an Advance Directive.

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Scenario 2: Code Status

How would you complete Section 1: Code Status

A. Attempt Cardio Pulmonary Resuscitation (CPR)

B. Do Not Attempt Cardio Pulmonary Resuscitation (DNR)

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Scenario 2: Code Status

CORRECT

A. Attempt Cardio Pulmonary Resuscitation (CPR)

CPR should be performed as it is medically indicated. Check this box. This is an automatic C2. Initial the C2 box in Section 2.

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Scenario 2: Code Status

INCORRECT

B. Do Not Attempt Cardio Pulmonary Resuscitation (DNR)

Your patient did not request any DNR orders in the conversation and this is not medically indicated.

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Reveal correct answer

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Scenario 2: Medical Interventions

How would you complete Section 2: Medical Interventions

MI: Supportive care, symptom management and comfort Measures. Allow natural death

M2: Medical treatments available within the location of care. Specify location:

M3: Full medical treatments excluding critical care

C1: Critical care interventions excluding intubation

C2: Critical care interventions including intubation

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Scenario 2: Medical Interventions

INCORRECT

MI: Supportive care, symptom management and comfort Measures. Allow natural death

If CPR is ordered then it is automatically C2. All critical care interventions would be administered to this patient. Leave blank.

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Reveal correct answer

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Scenario 2: Medical Interventions

INCORRECT

M2: Medical treatments available within the location of care. Specify location:

If CPR is ordered then it is automatically C2. Leave blank.

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Reveal correct answer

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Scenario 2: Medical Interventions

INCORRECT

M3: Full medical treatments excluding critical care

All critical care interventions would be administered to this patient. Leave blank.

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Reveal correct answer

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Scenario 2: Medical Interventions

INCORRECT

C1: Critical care interventions excluding intubation

Your patient did not rule out intubation during conversations. Leave blank.

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Reveal correct answer

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Scenario 2: Medical Interventions

CORRECT

C2: Critical care interventions including intubation

All critical care interventions would be administered to this patient. Initial in this box.

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Scenario 2: Specific Interventions

How would you complete Section 3: Specific Interventions

A. None indicated

B. Blood products

C. Dialysis

D. Enteral nutrition

E. Other directions for specific interventions indicated

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Scenario 2: Specific Interventions

INCORRECT

None indicated

Your MOST form should reflect that your patient does not want blood products administered.

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Reveal correct answer

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Scenario 2: Specific Interventions

CORRECT

Blood products

Your MOST form should reflect that your patient does not want blood products administered.

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Scenario 2: Specific Interventions

INCORRECT

Dialysis

Your MOST form should reflect that your patient does not want blood products administered.

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Reveal correct answer

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Scenario 2: Specific Interventions

INCORRECT

Enteral nutrition

No need to complete unless there are specific interventions that the adult would not want indicated in her Advance Care Plan, and confirmed with the daughter. Strike a link through this section.

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Reveal correct answer

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Scenario 2: Specific Interventions

INCORRECT

Other directions for specific interventions indicated

Your MOST form should reflect that your patient does not want blood products administered.

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Reveal correct answer

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Scenario 2: MOST Order Written as a Result of

How would you complete Section 4: MOST Order Written as a Result of

A. Conversations / Consensus

B. Physician Assessment

C. Supporting Documentation

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Scenario 2: MOST Order Written as a Result of

CORRECT

A. Conversations / Consensus

B. Physician Assessment

This MOST is written as the result of a conversation with the patient. Check "Adult/SDM informed and aware".

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Scenario 2: Additional Care Planning

Additional care planning issues

The patient should be referred to Social Work to discuss Advance Care Planning options. Completion of Advance Directive is recommended for patients with a durable intent to refuse specific treatments.

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MOST Scenarios: Scenario 3

HISTORY

You work in the hemo-dialysis unit and a 75 year-old man with severe type 2 diabetes, hypertension, and end stage kidney failure who has been on hemo-dialysis for 2 years asked to meet with the doctor. He was recently discharged from hospital after an episode of pulmonary edema due to congestive heart failure and was referred to Home Health. His renal function has since worsened.

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MOST Scenarios: Scenario 3

GOALS

A family meeting took place with the patient, his wife (who has early dementia), and one of his daughters, who has been the main caregiver for the past 5 years. The patient clearly indicates that his main wish now is to be more comfortable. He wants to be discontinued dialysis and to allow natural progression of his disease and understands that he will die as an outcome of his decision.

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Scenario 3: Code Status

How would you complete Section 1: Code Status

A. Attempt Cardio Pulmonary Resuscitation (CPR)

B. Do Not Attempt Cardio Pulmonary Resuscitation (DNR)

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Scenario 3: Code Status

INCORRECT

A. Attempt Cardio Pulmonary Resuscitation (CPR)

CPR would not be performed. It is not medically indicated and does not support the patient's wishes.

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Reveal correct answer

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Scenario 3: Code Status

CORRECT

B. Do Not Attempt Cardio Pulmonary Resuscitation (DNR)

CPR would not be performed. Check this box.

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Scenario 3: Medical Interventions

How would you complete Section 2: Medical Interventions

MI: Supportive care, symptom management and comfort Measures. Allow natural death

M2: Medical treatments available within the location of care. Specify location:

M3: Full medical treatments excluding critical care

C1: Critical care interventions excluding intubation

C2: Critical care interventions including intubation

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Scenario 3: Medical Interventions

CORRECT

MI: Supportive care, symptom management and comfort Measures. Allow natural death

This is medically indicated and supports the patient's wishes. Initial this box.

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Scenario 3: Medical Interventions

INCORRECT

M2: Medical treatments available within the location of care. Specify location:

This is not medically indicated and does not support the patient's wishes. Leave blank.

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Reveal correct answer

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Scenario 3: Medical Interventions

INCORRECT

M3: Full medical treatments excluding critical care

This is not medically indicated and does not support the patient's wishes. Leave blank.

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Reveal correct answer

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Scenario 3: Medical Interventions

INCORRECT

C1: Critical care interventions excluding intubation

This is not medically indicated and does not support the patient's wishes. Leave blank.

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Reveal correct answer

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Scenario 3: Medical Interventions

INCORRECT

C2: Critical care interventions including intubation

This is not medically indicated and does not support the patient's wishes. Leave blank.

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Reveal correct answer

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Scenario 3: Specific Interventions

How would you complete Section 3: Specific Interventions

A. None indicated

B. Blood products

C. Dialysis

D. Enteral nutrition

E. Other directions for specific interventions indicated

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Scenario 3: Specific Interventions

INCORRECT

None indicated

The patient has stated he does not wish dialysis. Check "No".

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Reveal correct answer

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Scenario 3: Specific Interventions

INCORRECT

Blood products

The patient has stated he does not wish dialysis. Check "No".

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Reveal correct answer

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Scenario 3: Specific Interventions

CORRECT

Dialysis

The patient has stated he does not wish dialysis. Check "No".

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Scenario 3: Specific Interventions

INCORRECT

Enteral nutrition

The patient has stated he does not wish dialysis. Check "No".

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Reveal correct answer

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Scenario 3: Specific Interventions

INCORRECT

Other directions for specific interventions indicated

The patient has stated he does not wish dialysis. Check "No".

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Reveal correct answer

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Scenario 3: MOST Order Written as a Result of

How would you complete Section 4: MOST Order Written as a Result of

A. Conversations / Consensus

B. Physician Assessment

C. Supporting Documentation

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Scenario 3: MOST Order Written as a Result of

CORRECT

A. Conversations / Consensus

B. Physician Assessment

This MOST is written as the result of a conversation with the patient. Check "Adult/SDM informed and aware".

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Scenario 3: Additional Care Planning

Additional care planning issues

The next day the patient's son arrives. He lives out of town and has not seen his father in 6 months. He is alarmed to see that his father has decreased level of consciousness. When he is informed his father chose to discontinue dialysis, he is irate and demands that the doctor restart the dialysis. He also insists that he is the decision maker as he is the eldest son and that his wishes are to be followed.

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Scenario 3: Additional Care Planning

Additional care planning issues

This is a common issue and several things are important to note:

i. The Care Plan is an outcome of a decision made by a capable patient about his health care and needs to be respected and followed. This is supported by the law.

ii. The MOST order does not change and dialysis is not restarted.

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Scenario 3: Additional Care Planning

Additional care planning issues

The son needs to be supported to come to terms with the reality of his father's imminent death. Appropriate referrals to Home Health and Social Work will provide the support needed by this family.

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MOST Scenarios: Scenario 4

HISTORY

A 53 year-old single woman, known to have malignant melanoma with metastasis to the lungs, presents to the Emergency Room with worsening shortness of breath and a swollen right lower leg. You suspect that she has developed a DVT and pulmonary embolus. She was discharged home from hospital 20 days ago after having been treated for severe nausea and vomiting. She is being treated with single agent chemotherapy which from all reports has significantly improved her functional status over the past weeks. She is too short of breath to engage in conversation and on a 10 liter re-breathe mask. Oxygen saturation is at 90%.

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MOST Scenarios: Scenario 4

GOALS

Her mother accompanies her and she tells you, “My daughter wants all medical treatments including CPR. She is not ready to give up yet.” Her mother has been part of all medical decision making since diagnosis. Her MOST from her previous admission, dated 4 weeks ago, states: CPR C2. You read the notes from her chart from the previous admission. They state that they patient has full understanding of the potential trauma and low likelihood of success with cardio-pulmonary resuscitation. She is willing to undergo all treatments necessary to attempt to prolong her life “even if I end up dying in the ICU on a breathing machine.”

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MOST Scenario: Scenario 4

How would you approach this patient's Advance Care Planning needs? Would you create a new MOST?

A. Yes

B. No

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MOST Scenario: Scenario 4

INCORRECT

A. Yes

You do not need to complete a new MOST form. Simply update the current form.

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Reveal correct answer

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MOST Scenario: Scenario 4

CORRECT

A. No

You do not need to complete a new MOST form. Simply update the current form.

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Scenario 4: Additional Care Planning

Additional care planning issues

In this scenario, a new MOST is not warranted. Conversations should be documented in the patient's chart. An urgent critical care consultation should be initiated to determine if critical care would be prepared to admit the patient.

A referral to Social Work should also be initiated. This will ensure the patient and team are engaged in Advance Care Planning conversations including clarification of substitute decision maker roles and responsibilities, and the patient values and beliefs.

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MOST Scenarios: Scenario 5

HISTORY

A 78 year-old man comes to your office for a follow-up visit after a recent admission to acute care for acute bowel obstruction. He is known to have colon cancer and metastasis to the liver with involvement of the retroperitoneal lymph nodes. This was his second admission to acute care in 2 months and a surgical consult indicated that surgery was not an option due to extensive intra-peritoneal disease with multiple sites of obstruction. He also has COPD and CHF.

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MOST Scenarios: Scenario 5

GOALS

His chart indicates that the family has been unable to make a decision regarding how to manage their father's care and therefore a palliative care referral was not initiated. Further documentation from the hospital indicates the patient had a MOST form completed indicating DNR C2. You have been asked to review this status with the patient and family. His wife and eldest son are with him.

You identify that critical care interventions are not appropriate for this patient with advanced metastatic disease and multiple co-morbidities. After providing information that will help the patient and his family understand the palliative status with a prognosis of less than 2 months, they agree to DNR M3.

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Scenario 5: Code Status

How would you complete Section 1: Code Status

A. Attempt Cardio Pulmonary Resuscitation (CPR)

B. Do Not Attempt Cardio Pulmonary Resuscitation (DNR)

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Scenario 5: Code Status

INCORRECT

A. Attempt Cardio Pulmonary Resuscitation (CPR)

CPR would not be performed on this patient.

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Reveal correct answer

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Scenario 5: Code Status

CORRECT

B. Do Not Attempt Cardio Pulmonary Resuscitation (DNR)

CPR would not be performed on this patient.

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Scenario 5: Medical Interventions

How would you complete Section 2: Medical Interventions

MI: Supportive care, symptom management and comfort Measures. Allow natural death

M2: Medical treatments available within the location of care. Specify location:

M3: Full medical treatments excluding critical care

C1: Critical care interventions excluding intubation

C2: Critical care interventions including intubation

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Scenario 5: Medical Interventions

INCORRECT

MI: Supportive care, symptom management and comfort Measures. Allow natural death

Leave blank.

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Reveal correct answer

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Scenario 5: Medical Interventions

INCORRECT

M2: Medical treatments available within the location of care. Specify location:

Leave blank.

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Reveal correct answer

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Scenario 5: Medical Interventions

CORRECT

M3: Full medical treatments excluding critical care

This level of intervention is medically indicated. Initial this box.

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Scenario 5: Medical Interventions

INCORRECT

C1: Critical care interventions excluding intubation

This is not medically indicated. Leave blank.

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Reveal correct answer

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Scenario 5: Medical Interventions

INCORRECT

C2: Critical care interventions including intubation

This is not medically indicated. Leave blank.

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Reveal correct answer

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Scenario 5: Specific Interventions

How would you complete Section 3: Specific Interventions

A. None indicated

B. Blood products

C. Dialysis

D. Enteral nutrition

E. Other directions for specific interventions indicated

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Scenario 5: Specific Interventions

CORRECT

None indicated

No need to complete. Strike a line through this section.

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Scenario 5: Specific Interventions

INCORRECT

Blood products

No need to complete. Strike a line through this section.

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Reveal correct answer

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Scenario 5: Specific Interventions

INCORRECT

Dialysis

No need to complete. Strike a line through this section.

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Reveal correct answer

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Scenario 5: Specific Interventions

INCORRECT

Enteral nutrition

No need to complete. Strike a line through this section.

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Reveal correct answer

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Scenario 5: Specific Interventions

INCORRECT

Other directions for specific interventions indicated

No need to complete. Strike a line through this section.

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Reveal correct answer

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Scenario 5: MOST Order Written as a Result of

How would you complete Section 4: MOST Order Written as a Result of

A. Conversations / Consensus

B. Physician Assessment

C. Supporting Documentation

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Scenario 5: MOST Order Written as a Result of

CORRECT

A. Conversations / Consensus

B. Physician Assessment

C. Supporting Documentation

This MOST is written as the result of a conversation with the patient and SDM. Check "Adult/SDM informed and aware" and keep copies of the previous and new MOST form in the patient's chart.

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Scenario 5: Additional Care Planning

Additional care planning issues

A palliative care referral to allow for optimal control of symptoms should also be placed. As well, a copy of the new MOST should be provided to Home Health with this referral, and provided to the patient and family.

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MOST Scenarios: Scenario 6

HISTORY

While on call for a colleague, you receive a call from a residential care facility clinician regarding your colleague's patient, a 73 year-old male resident. The patient has a history of multiple CVA's and left hemiplegia. He is not capable of making health care decisions. The patient has fallen and has a compound fracture of his hip. He is in a lot of pain but is unresponsive to opioids. The residential care facility clinician informs you that the patient's MOST, dated 11 months earlier, states: Do Not Attempt CPR, M1. A substitute decision maker is listed and you have contact information.

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MOST Scenario: Scenario 6

How would you approach this patient's Advance Care Planning needs? Would you create a new MOST?

A. Yes

B. No

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MOST Scenario: Scenario 6

INCORRECT

A. Yes

You do not need to complete a new MOST form as his current MOST is still valid (less than 12 months).

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Reveal correct answer

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MOST Scenario: Scenario 6

CORRECT

B. No

You do not need to complete a new MOST form.

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Scenario 6: Additional Care Planning

Additional care planning issues

What would be the next step for this resident?

As you cannot meet the patient's comfort goals in his current location, you will need to discuss a recommended transfer to acute care with his substitute decision maker.

Your next step is to contact the resident's substitute decision maker (SDM) to discuss the current medical situation and recommendation to transfer to acute care.

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Scenario 6: Additional Care Planning

Additional care planning issues

If the SDM consents, you can arrange to send the patient to the hospital for emergency medical assessment and treatment and confirm intent to continue DNR during surgical procedure.

It is best to ensure the team provides written documentation to the hospital including the MOST (with clear record of discussion regarding DNR during surgery) and other Advance Care Planning documentation.

On admission to acute care the MOST order would be written as DNR M1 with "Do Not Attempt Resuscitation During Procedure" indicated in Section 3.

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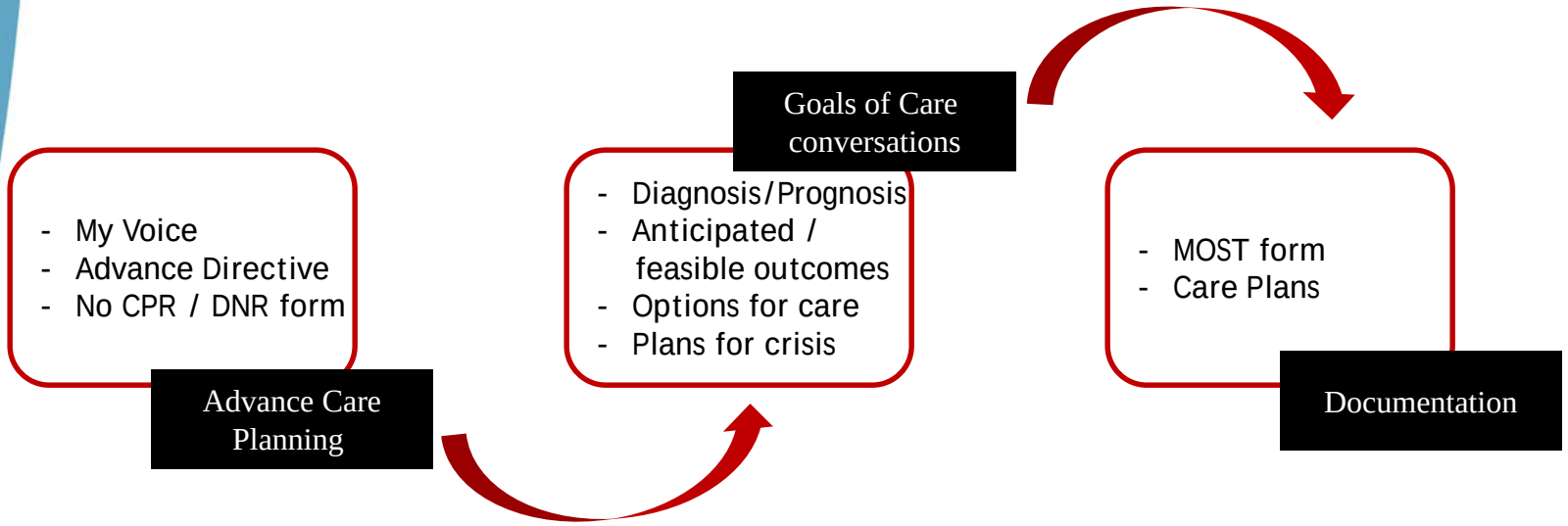
MOST Summary



The MOST form is a physician order and outcome of Advance Care Planning conversations. Physicians play an integral role in facilitating these conversations, particularly in discussing diagnosis, prognosis, possible outcomes of treatments and planning for a medical crisis.

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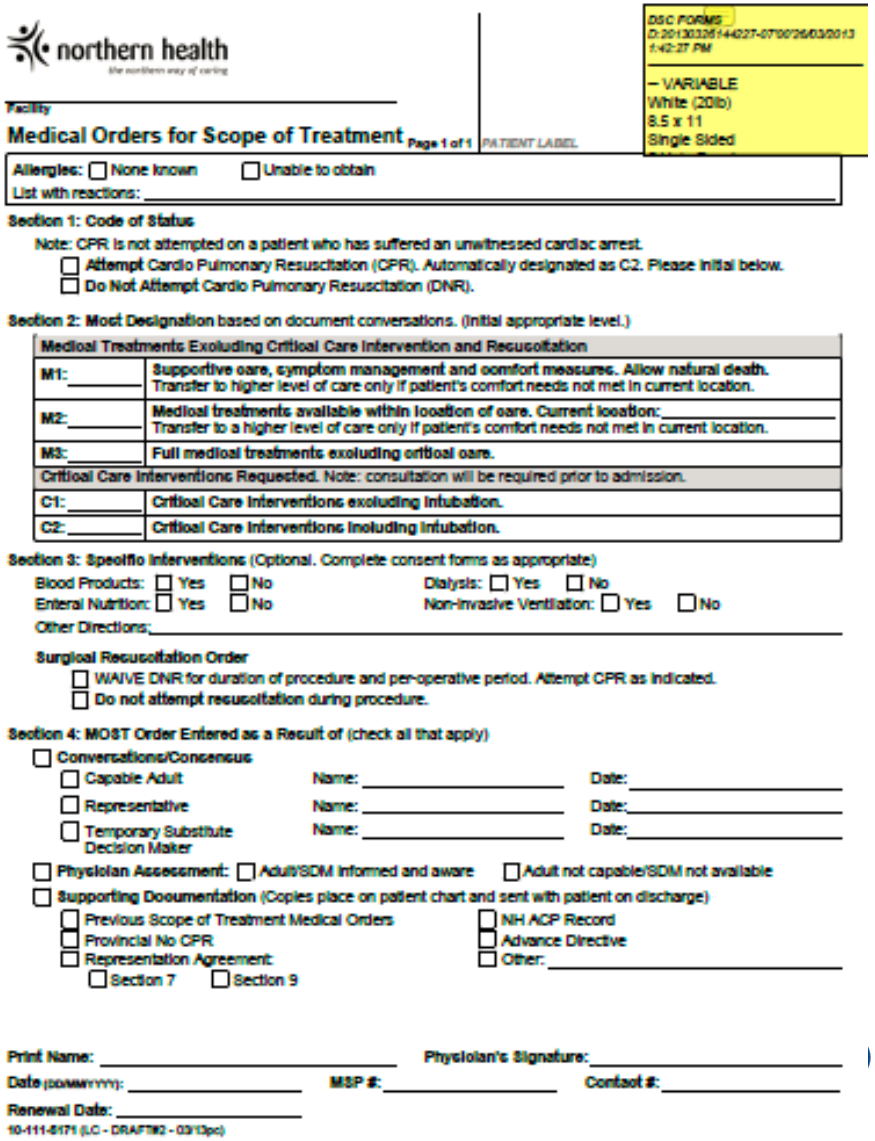
MOST Form



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Facility

Medical Orders for Scope of Treatment Page 1 of 1 | PATIENT LABEL

DSC FORMS
D:20130326144027-07'00'26/03/2013 1:42:27 PM
– VARIABLE
White (20lb)
8.5 x 11
Single Sided

Allergies: ☐ None known ☐ Unable to obtain
List with reactions: _____

Section 1: Code of Status

Note: CPR is not attempted on a patient who has suffered an unwitnessed cardiac arrest.

☐ **Attempt** Cardio Pulmonary Resuscitation (CPR). Automatically designated as C2. Please initial below.
☐ **Do Not Attempt** Cardio Pulmonary Resuscitation (DNR).

Section 2: Most Designation based on document conversations. (Initial appropriate level.)

Medical Treatments Excluding Critical Care Intervention and Resuscitation	
M1: _____	**Supportive care, symptom management and comfort measures. Allow natural death.** Transfer to higher level of care only if patient's comfort needs not met in current location.
M2: _____	**Medical treatments available within location of care. Current location:** _____ Transfer to a higher level of care only if patient's comfort needs not met in current location.
M3: _____	**Full medical treatments excluding critical care.**
Critical Care Interventions Requested. Note: consultation will be required prior to admission.	
C1: _____	**Critical Care Interventions excluding intubation.**
C2: _____	**Critical Care Interventions including intubation.**

Section 3: Specific Interventions (Optional. Complete consent forms as appropriate)

Blood Products: ☐ Yes ☐ No Dialysis: ☐ Yes ☐ No
Enteral Nutrition: ☐ Yes ☐ No Non-invasive Ventilation: ☐ Yes ☐ No
Other Directions: _____

Surgical Resuscitation Order

☐ WAIVE DNR for duration of procedure and per-operative period. Attempt CPR as indicated.
☐ **Do not attempt resuscitation during procedure.**

Section 4: MOST Order Entered as a Result of (check all that apply)

☐ **Conversations/Consensus**
- ☐ Capable Adult — Name: _____ Date: _____
- ☐ Representative — Name: _____ Date: _____
- ☐ Temporary Substitute Decision Maker — Name: _____ Date: _____

☐ **Physician Assessment:** ☐ Adult/SDM informed and aware ☐ Adult not capable/SDM not available

☐ **Supporting Documentation** (Copies place on patient chart and sent with patient on discharge)
- ☐ Previous Scope of Treatment Medical Orders
- ☐ Provincial No CPR
- ☐ Representation Agreement: ☐ Section 7 ☐ Section 9
- ☐ NH ACP Record
- ☐ Advance Directive
- ☐ Other: _____

Print Name: _____ **Physician's Signature:** _____
Date (DD/MM/YYYY): _____ **MSP #:** _____ **Contact #:** _____
Renewal Date: _____

10-111-6171 (LC - DRAFT#2 - 03/13pc)

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Acknowledgement

Fraser Health
http://www.fraserhealth.ca/

http://physicians.fraserhealth.ca/news/medical-orders-for-scope-of-treatment--most----advance-care-planning

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