

Regular Session, 2010

HOUSE BILL NO. 1485 (Substitute for House Bill No. 635 by Representative Mills)

BY REPRESENTATIVE MILLS

1 AN ACT

2 To enact Part XXIV-C of Chapter 5 of Title 40 of the Louisiana Revised Statutes of 1950,  
3 to be comprised of R.S. 40:1299.64.1 through 1299.64.6, relative to Louisiana  
4 Physician Order for Scope of Treatment; to provide for the Louisiana Physician  
5 Order for Scope of Treatment program and form; to provide for definitions; to  
6 provide for the promulgation of rules and regulations; and to provide for related  
7 matters.

8 Be it enacted by the Legislature of Louisiana:

9 Section 1. Part XXIV-C of Chapter 5 of Title 40 of the Louisiana Revised Statutes  
10 of 1950, comprised of R.S. 40:1299.64.1 through 1299.64.6 is hereby enacted to read as  
11 follows:

12 PART XXIV-C. Louisiana Physician Order for Scope of Treatment

13 §1299.64.1. Legislative purpose, findings, and intent

14 A. The legislature finds and declares all of the following:

15 (1) It is important for people to make health care decisions before a medical  
16 crisis presents itself.

17 (2) Health care planning is a process, rather than a single decision, that helps  
18 individuals to consider the kind of care they would want if they become seriously ill  
19 or incapacitated, and encourages them to talk to their family members or legal  
20 representative about such issues.

21 (3) The Louisiana Physician Order for Scope of Treatment "LaPOST" form  
22 documents the wishes of a qualified patient in a physician order.

23 (4) The hallmarks of the LaPOST form are the following:

24 (a) Immediately actionable, signed physician orders on a standardized form.

1                   **(b) Orders that address a range of life-sustaining interventions as well as the**  
2                   **patient's preferred treatment for each intervention.**

3                   **(c) A brightly colored, clearly identifiable form.**

4                   **(d) A form that is recognized, adopted, and honored across treatment settings.**

5                   **B.(1) The legislature intends that the provisions of this Part are permissive**  
6                   **and voluntary. The legislature further intends that the completion of the Louisiana**  
7                   **Physician Order for Scope of Treatment form merely illustrates a means of**  
8                   **documenting a decision of a patient relative to withholding or withdrawal of medical**  
9                   **treatment or life-sustaining procedures.**

10                   **(2) It is the intent of the legislature that nothing in this Part shall be**  
11                   **construed to require the completion of a Louisiana Physician Order for Scope of**  
12                   **Treatment form pursuant to this Part.**

13                   **(3) It is the intent of the legislature that nothing in this Part shall be**  
14                   **construed to be the exclusive means by which life-sustaining procedures may be**  
15                   **withheld or withdrawn, nor shall this Part be construed to require the application of**  
16                   **medically inappropriate treatment or life-sustaining procedures to any patient.**

17                   **§1299.64.2. Definitions**

18                   **As used in this Part, the following terms shall have the meanings ascribed to**  
19                   **them unless the context clearly states otherwise:**

20                   **(1) "Attending physician" means the physician who has primary**  
21                   **responsibility for the treatment and care of the patient.**

22                   **(2) "Certified emergency medical technician" means a certified emergency**  
23                   **medical technician as defined in R.S. 40:1231.**

24                   **(3) "Certified first responder" means any person who has successfully**  
25                   **completed a training course developed and promulgated by the United States**  
26                   **Department of Transportation and adopted by the bureau of emergency medical**  
27                   **services of the Department of Health and Hospitals and who is certified by the**  
28                   **bureau.**

29                   **(4) "Health care provider" means any home health agency, hospice, hospital,**  
30                   **or nursing facility.**

1           (5) "LaPOST" means Louisiana Physician Order for Scope of Treatment.

2           (6) "Life-limiting and irreversible condition" means a continual profound  
3 comatose state with no reasonable chance of recovery or a condition caused by  
4 injury, disease, or illness which within reasonable medical judgment would usually  
5 produce death within six months, for which the application of life-sustaining  
6 procedures would serve only to postpone the moment of death and for which the life-  
7 sustaining procedures would be a burden and not a benefit to the qualified patient,  
8 except as provided in the definition of "life-sustaining procedure" herein.

9           (7) "Life-sustaining procedure" means any medical procedure or intervention  
10 which, within reasonable medical judgment, would serve only to prolong the dying  
11 process of a qualified patient, including such procedures as the invasive  
12 administration of nutrition and hydration and the administration of cardiopulmonary  
13 resuscitation when the benefits of the procedure do not outweigh the burdens thereof.  
14 A "life-sustaining procedure" shall not include any measure deemed as comfort care.  
15 Notwithstanding any other provision of this Part, the administration of nutrition and  
16 hydration, whether orally or by invasive means, shall always occur except in the  
17 event another condition arises which is life-limiting and irreversible and in which  
18 nutrition and hydration by any means becomes a greater burden than benefit to the  
19 qualified patient.

20           (8) "Louisiana Physician Order for Scope of Treatment" means a form which  
21 documents the wishes of a qualified patient in a physician order. The following  
22 statements shall appear at the bottom of each page of the form: "Send form with  
23 person whenever transferred or discharged. Use of original form is strongly  
24 encouraged. Photocopies and faxes of signed LaPOST forms are legal and valid".  
25 The form shall include certain fields which provide information, instructions, and  
26 areas to record information. The fields shall include but not be limited to the  
27 following:

28           (a) A field stating "HIPAA permits disclosure of LaPOST to other health  
29 care providers as necessary".

1                   **(b) A field identifying the form as "Louisiana Physician Orders for Scope of**  
2                   **Treatment"**.

3                   **(c) A field providing an instruction which reads: "First follow these orders,**  
4                   **then contact physician. This is a physician order sheet based on the person's medical**  
5                   **condition and wishes. Any section not completed implies full treatment for that**  
6                   **section. Everyone shall be treated with dignity and respect. Please see**  
7                   **www.La-POST.org for information regarding "what my cultural/religious heritage**  
8                   **tells me about end of life care"**.

9                   **(d) Fields for recording the last name, first name, middle initial, and date of**  
10                  **birth of a qualified patient.**

11                  **(e) A field titled "Patient's diagnosis of life-limiting disease and irreversible**  
12                  **condition" with an area below to record information.**

13                  **(f) A field titled "A. Cardiopulmonary resuscitation (CPR): person has no**  
14                  **pulse and is not breathing". This field shall provide an instruction which reads**  
15                  **"check one" and shall further provide two options for selection. The two options**  
16                  **shall be labeled as follows:**

17                       **(i) "CPR / attempt resuscitation (requires full treatment in section B)".**

18                       **(ii) "DNR / do not attempt resuscitation (allow natural death)".**

19                  **(g) A field titled "B. Medical interventions: person has pulse or is breathing".**  
20                  **This field shall provide an instruction which reads "check one" and shall further**  
21                  **provide three options for selection and one area to record additional orders. The four**  
22                  **items shall be labeled as follows:**

23                       **(i) "Comfort measures only: Use medication by any route, positioning,**  
24                       **wound care and other measures to relieve pain and suffering. Use oxygen, oral**  
25                       **suction and manual treatment of airway obstruction as needed for comfort. Patient**  
26                       **prefers no transfer: EMS contact medical control to determine if transport indicated".**

27                       **(ii) "Limited additional interventions: Includes care described above. Use**  
28                       **medical treatment, IV fluids and cardiac monitor as indicated. Do not use**  
29                       **intubations, advanced airway interventions, or mechanical ventilation. Transfer to**  
30                       **hospital if indicated. Avoid intensive care unit if possible".**

1                    (iii) "Full treatment: Includes care described above. Use intubation,  
 2                    advanced airway interventions, mechanical ventilation. Transfer to hospital if  
 3                    indicated, includes intensive care unit".

4                    (iv) "Additional orders (e.g. dialysis, etc.)"

5                    (h) A field titled "C. Antibiotics". This field shall provide an instruction  
 6                    which reads "check one" and shall further provide three options for selection and one  
 7                    area to record additional orders. The four items shall be labeled as follows:

8                    (i) "No antibiotics. Use other measures to relieve symptoms".

9                    (ii) "Use antibiotics if life can be prolonged".

10                   (iii) "Determine use or limitation of antibiotics when infection occurs, with  
 11                   comfort as goal. (Benefit of treatment should outweigh burden of treatment)".

12                   (iv) "Additional orders:"

13                   (i) A field titled "D. Artificially administered fluids and nutrition: (Always  
 14                   offer food / fluids by mouth as tolerated)". This field shall contain the statement  
 15                   "The administration of nutrition and hydration, whether orally or by invasive means,  
 16                   shall always occur except in the event another condition arises, which is life-limiting  
 17                   or irreversible in which the nutrition or hydration becomes a greater burden than  
 18                   benefit to patient". This field shall provide an instruction which reads "check one in  
 19                   each column" and shall further provide a column listing three options for selection,  
 20                   a column listing two options for selection, and one area to record additional orders.

21                   The six items shall be labeled as follows and contain the following text, respectively:

22                   (i) A column shall list:

23                   (aa) "No artificial nutrition by tube".

24                   (bb) "Trial period of artificial nutrition by tube (Goal: \_\_\_\_\_)".

25                   (cc) "Long-term artificial nutrition by tube (if needed)".

26                   (ii) A column shall list:

27                   (aa) "IV fluids (Goal: \_\_\_\_\_)".

28                   (bb) "No IV fluids".

29                   (iii) "Additional orders:"

1                   (j) A field titled "E. Other instructions: (May include additional guidelines  
2                   for starting or stopping treatments in sections above or other directions not addressed  
3                   elsewhere)".

4                   (k) A field titled "F. Summary of goals" which shall comprise the following  
5                   two parts:

6                   (i) An area providing an instruction which reads "check one" and further  
7                   providing the text "Discussed with" and the following two options for selection:

8                   (aa) "Patient".

9                   (bb) "Personal health care representative".

10                  (ii) An area providing an instruction which reads "check all that apply" and  
11                  further providing the text "The basis for these orders is:" and the following four  
12                  items for selection:

13                  (aa) "Patient's declaration (can be oral or nonverbal)".

14                  (bb) "Patient's personal health care representative (qualified patient without  
15                  capacity)."

16                  (cc) "Patient's advance directive, if indicated, patient has completed an  
17                  additional document that provides guidance for treatment measures if he/she loses  
18                  medical decision-making capacity".

19                  (dd) "Resuscitation would be medically non-beneficial".

20                  (l) Fields for recording the name, signature, and phone number of a  
21                  physician.

22                  (m) Fields, labeled "Mandatory," for recording the signature of the patient  
23                  or personal health care representative and the date of such signature.

24                  (n) A field stating "If personal health care representative, state relationship  
25                  and authority to act on behalf of patient".

26                  (o) A field titled "Directions for health care professionals" which shall  
27                  consist of three sections, labeled as follows, and state the following information,  
28                  respectively:

29                  (i) A section labeled "Completing LaPOST" which shall state the following:

1           ~~(aa) "Must be completed by a physician based on patient preferences and~~  
2           ~~medical indications".~~

3           ~~(bb) "LaPOST must be signed by a physician to be valid. Verbal physician~~  
4           ~~orders are acceptable with follow-up signature by physician in accordance with~~  
5           ~~Louisiana law".~~

6           ~~(cc) "Use of original form is strongly encouraged. Photocopies and faxes of~~  
7           ~~signed LaPOST are legal and valid".~~

8           ~~(ii) A section labeled "Using LaPOST" which shall state the following:~~

9           ~~(aa) "Any section of LaPOST not completed implies full treatment for that~~  
10          ~~section".~~

11          ~~(bb) "A semi-automatic external defibrillator (AED) should not be used on~~  
12          ~~a person who has chosen "do not attempt resuscitation"".~~

13          ~~(cc) "Even if a patient chooses "no artificial nutrition by tube" or "no IV~~  
14          ~~fluids" or "trial period of artificial nutrition by tube," the administration of nutrition~~  
15          ~~and hydration, whether orally or by invasive means, shall always occur except in the~~  
16          ~~event another condition arises which is life-limiting and irreversible in which~~  
17          ~~nutrition and hydration by any means becomes a greater burden than benefit to~~  
18          ~~patient".~~

19          ~~(dd) "When comfort cannot be achieved in the current setting, the person,~~  
20          ~~including someone with "comfort measures only," should be transferred to a setting~~  
21          ~~able to provide comfort (e.g. pinning of a hip fracture)".~~

22          ~~(ee) "A person who chooses either "comfort measures only" or "limited~~  
23          ~~additional interventions" should not be entered into a Level I trauma system".~~

24          ~~(ff) "A parenteral (IV/Subcutaneous) medication to enhance comfort may be~~  
25          ~~appropriate for a person who has chosen "comfort measures only"".~~

26          ~~(gg) "Treatment of dehydration is a measure which may prolong life. A~~  
27          ~~person who desires IV fluids should indicate "limited interventions" or "full~~  
28          ~~treatment"".~~

29          ~~(hh) "A person with capacity or the personal representative (if the patient~~  
30          ~~lacks capacity) can revoke the LaPOST at any time and request alternative treatment~~

1 based on the known desires of the individual; or, if unknown, the individual's best  
 2 interests".

3 (ii) "Please see links on www.La-POST.org for "what my cultural/religious  
 4 heritage tells me about end of life care"".

5 (jj) "The duty of medicine is to care for patients even when they cannot be  
 6 cured. Physicians and their patients must evaluate the use of technology available for  
 7 their personal medical situation. Moral judgments about the use of technology to  
 8 maintain life must reflect the inherent dignity of human life and the purpose of  
 9 medical care".

10 (iii) A section labeled "Reviewing LaPOST" which shall provide the  
 11 following:

12 (aa) The statement: "This LaPOST should be reviewed periodically such as  
 13 when the person is transferred from one care setting or care level to another, or there  
 14 is a substantial change in the person's health status. A new LaPOST should be  
 15 completed if the patient wishes to make a substantive change to their treatment goal  
 16 (e.g. reversal of prior directive). When completing a new form, the old form must be  
 17 properly voided and retained in the medical chart. To void the LaPOST form, draw  
 18 a line through "Physician Orders" and write "void" in large letters. This should be  
 19 signed and dated".

20 (bb) A chart titled "Review of this LaPOST form" consisting of four columns  
 21 which are titled as follows:

22 (I) "Review date and time".

23 (II) "Reviewer".

24 (III) "Location of review".

25 (IV) "Review outcome". Each row in this column shall contain the  
 26 following two options for selection:

27 (aaa) "No change".

28 (bbb) "Form voided and new form completed".

29 (9) "Personal health care representative" means a person who has authority  
 30 in accordance with Louisiana law to act on behalf of an individual who is an adult



1 or an emancipated minor in making decisions related to health care because of  
 2 incapacity.

3 (10) "Physician" means a physician or surgeon licensed by the Louisiana  
 4 State Board of Medical Examiners or by the official licensing authority of another  
 5 state.

6 (11) "Qualified patient" means a patient diagnosed and certified in writing  
 7 as having a life-limiting and irreversible condition by the attending physician or  
 8 personal physician of the patient.

9 §1299.64.3. Louisiana Physician Order for Scope of Treatment

10 A. The secretary of the Department of Health and Hospitals is hereby  
 11 authorized and directed to promulgate and publish rules, regulations, and standards,  
 12 in accordance with the Administrative Procedure Act, to provide for the Louisiana  
 13 Physician Order for Scope of Treatment "LaPOST" program.

14 B. The rules and regulations shall include the following:

15 (1) Promulgation of the LaPOST form.

16 (2) Requirements that shall be met in order for a LaPOST form to be valid,  
 17 including but not limited to situations in which the personal health care  
 18 representative of a patient may execute the LaPOST form.

19 (3) Methods for revocation.

20 (4) Requirements which relate to a patient's informed consent upon  
 21 executing a LaPOST form.

22 (5) Requirements for periodic review of the LaPOST form by the patient and  
 23 his physician.

24 C. Nothing in this Part shall be construed in any manner to prevent the  
 25 withholding or the withdrawal of life-sustaining procedures from an adult person  
 26 who is comatose, incompetent, or otherwise physically or mentally incapable of  
 27 communication and has not executed a prior LaPOST form in accordance with this  
 28 Part.

29 D. The Louisiana Physician Order for Scope of Treatment or LaPOST form  
 30 is not a declaration concerning life-sustaining procedures and therefore shall not

1 have to comply with the provisions of R.S. 40:1299.58.1 through 1299.58.10 in order  
 2 to be valid and enforceable.

3 §1299.64.4. Physician, health care provider, certified emergency technician, and  
 4 certified first responder responsibility

5 A. Any attending physician who refuses to comply with the provisions of a  
 6 duly executed LaPOST form executed pursuant to this Part shall make a reasonable  
 7 effort to transfer the patient to another physician.

8 B. No provision of this Part imposes a duty upon the physician or health care  
 9 provider to make a search of whether a patient has executed a LaPOST form.

10 C. If the policies of a health care provider preclude compliance with the  
 11 LaPOST form executed under this Part or preclude compliance with the provisions  
 12 pertaining to a representative acting on behalf of a patient, then the health care  
 13 provider shall take all reasonable steps to transfer the patient to a health care  
 14 provider with which the provisions of this Part can be effectuated.

15 D. Certified emergency medical technicians and certified first responders  
 16 shall make a reasonable effort to detect the presence of an executed LaPOST form.

17 §1299.64.5. Immunity from liability

18 A.(1) Any health care provider, physician, or other person acting under the  
 19 direction of a physician shall not be subject to criminal prosecution or civil liability  
 20 or be deemed to have engaged in unprofessional conduct as a result of the  
 21 withholding or withdrawal of life-sustaining procedures from a patient who has duly  
 22 executed a LaPOST form in accordance with the provisions of this Part, or as a result  
 23 of transferring a patient to a provider with which the provisions of this Part can be  
 24 effectuated.

25 (2) Any person, health care provider, physician, or other person acting under  
 26 the direction of a physician who authorizes the withholding or withdrawal of life-  
 27 sustaining procedures in accordance with a duly executed LaPOST form, or as  
 28 otherwise provided in this Part, shall not be subject to criminal prosecution or civil  
 29 liability for such action.

1                   (3) A duly executed LaPOST form made in accordance with this Part shall  
2                   be presumed to have been made voluntarily.

3                   B.(1) A certified emergency medical technician or a certified first responder  
4                   shall not be subject to criminal prosecution or civil liability for withholding life-  
5                   sustaining procedures from a patient who has duly executed a LaPOST form.

6                   (2) A certified emergency medical technician or a certified first responder  
7                   shall not be subject to criminal prosecution or civil liability for administering life-  
8                   sustaining procedures to a patient who has duly executed a LaPOST form when there  
9                   is no reasonable means by which the certified emergency medical technician or  
10                  certified first responder could know or should have known that the patient had  
11                  executed such LaPOST form, or as a result of transferring a patient to a provider with  
12                  which the provisions of this Part can be effectuated.

13                  §1299.64.6. General application

14                  A. Nothing in this Part shall be construed to condone, authorize, or approve  
15                  mercy killing or euthanasia or to permit any affirmative or deliberate act or omission  
16                  to end life other than to permit the natural process of dying.

17                  B.(1) The withholding or withdrawal of life-sustaining procedures from a  
18                  patient who has duly executed a LaPOST form in accordance with the provisions of  
19                  this Part shall not, for any purpose, constitute a suicide.

20                  (2) The execution of a LaPOST form pursuant to this Part shall not affect  
21                  the sale, procurement, or issuance of any life insurance policy, nor shall it be deemed  
22                  to modify the terms of an existing policy.

23                  (3) No policy shall be legally impaired or invalidated by the withholding or  
24                  withdrawal of life-sustaining procedures from an insured who has duly executed a  
25                  LaPOST form, notwithstanding any term of the policy to the contrary.

26                  (4) A person shall not be required to execute a LaPOST form as a condition  
27                  for being insured or for receiving health care services.

28                  (5) The removal of life support systems or the failure to administer cardio-  
29                  pulmonary resuscitation under this Part shall not be deemed the cause of death for  
30                  purposes of insurance coverage or the denial of insurance coverage.

1                    C. The provisions of this Part are cumulative with existing law pertaining to  
2                    an individual's right to consent or refuse to consent to medical or surgical treatment.

3                    D. It is the policy of the state of Louisiana that human life is of the highest  
4                    and inestimable value through natural death. When interpreting this Part, any  
5                    ambiguity shall be interpreted to preserve human life.

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SPEAKER OF THE HOUSE OF REPRESENTATIVES

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PRESIDENT OF THE SENATE

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GOVERNOR OF THE STATE OF LOUISIANA

APPROVED: \_\_\_\_\_