

IL POLST Training Post-Presentation Quiz

| Training Location: | | Training Date: |
|--------------------|------|---|
| Please answer | True | (T) or False (F) to the following questions: |
| Circle one | | |
| T or F | 1. | A patient with decision-making capacity may change his/her POLST choices and complete a new POLST form. |
| T or F | 2. | In order for a form to be valid, the only signatures that are required on the form are those of the doctor and that of the patient or his/her decision-maker. |
| T or F | 3. | CPR is performed when a person is unconscious, and their heart and breathing have stopped. |
| T or F | 4. | POLST gives instructions for care that all health care providers are legally required to follow. |
| T or F | 5. | If a patient has an older "IDPH Uniform DNR Advance Directive" and then completes an "IDPH Uniform DNR Advance Directive/POLST form, instructions on both forms should be considered. |
| T or F | 6. | Every adult should have a POLST form. |
| T or F | 7. | A person who has chosen Do Not Attempt Resuscitation in Section A of the IDPH Uniform DNR Advance Directive/ POLST form may not select Full Treatment, such as intubation or mechanical ventilation, in Section B. |
| T or F | 8. | A person who has chosen CPR in Section A of IDPH Uniform DNR Advance Directive/POLST form will receive all medically indicated treatments in a pre-arrest emergency, i.e. Full Treatment in Section B, even if Comfort Care or Limited Additional Interventions are selected on the form. |
| T or F | 9. | CPR is equally effective in all people. |
| T or F | 10. | For ease of locating it, especially at home or in nursing homes, it is recommended that POLST forms be printed on "Ultra Pink" paper, but a POLST on any color paper is valid. |
| T or F | 11. | A patient has an old IDPH Uniform DNR Advance Directive dated 3/2/2006 indicating "I wish life prolonging measures" completed and signed IDPH Uniform DNR Advance Directive/ POLST form dated 6/11/2013 indicating DNR in section A. The IDPH DNR Advance Directive/ POLST form is the document you follow because it is more up to date. |
| T or F | 12. | The IDPH POLST form is best used for patients with advanced illness or with the frail elderly. |
| T or F | 13. | Selection of Do Not Attempt Resuscitation in section A implies that the patient also does not want aggressive treatments in case of a pre-arrest emergency, and would not want artificial nutrition by tube under any circumstances. |
| T or F | 14. | POLST does not replace a Power of Attorney for Health Care document. |

T or F | 15. POLST is an evidence-based model that is being enacted in almost every other state.