



MOST

Medical Orders for Scope of Treatment

COALITION

MOST Fact Sheet

The Medical Orders for Scope of Treatment (MOST) is an advance care planning tool, based on POLST: Portable Medical Orders, designed for those facing advanced and life-limiting illnesses. The MOST form was signed into Kentucky law in 2015 and became operational in 2016.

MISSION:

The Kentucky MOST Coalition promotes the education, acceptance, and implementation of the Kentucky “Medical Orders for Scope of Treatment” (MOST) form as a vital component of advance care planning for all Kentuckians.

OVERVIEW:

The Kentucky MOST document gives patients with life-limiting diseases the ability to state their own preferences for medical care if they become unable to communicate. The Kentucky MOST form is a document that is transferable among health care settings and enhances communication among health care professionals with the patient at the center. It is voluntary and is not biased for or against treatment.

An advance directive, also known as a “living will,” provides instructions that specify what kind of treatment should be given to a person when that individual is unable to make decisions or speak for him/herself and is sometimes completed in advance of any known illness. It can be specific or vague. A health care power of attorney allows a patient to authorize another person to make medical decisions on his/her behalf when the patient is no longer able to do so.

The Kentucky MOST document is more than an advance directive or living will. It is a physician order that outlines a patient’s wishes for medical treatment and goals of care when the patient has a known serious, advanced illness. It can also be used to translate an advance directive (Living Will or Five Wishes) into a physician order. When completed, the Kentucky MOST document must be honored by all health care professionals, serving as a road map for those providing medical care to patients with advanced, life-limiting illnesses.

QUICK FACTS ABOUT THE MOST DOCUMENT:

- It is completed for a patient regardless of age.
- It is intended to be used by patients who are already chronically or seriously ill with limited life expectancies.
- It must be signed by a physician and the patient or patient’s surrogate to be valid.
- It can be printed on any color paper (effective July 1, 2022, formerly pink only).
- It can be revoked or changed at any time by the patient or patient’s surrogate.
- It must be reviewed annually, when the patient is transferred, or when there is new knowledge of a change in the patient’s condition or medical wishes.
- It can be completed and signed electronically (effective July 1, 2022).