

Helpful language for translating patient values, goals, and preferences into the Massachusetts MOLST Form

“Based on our conversation, I recommend we complete a MOLST form together. MOLST helps us translate the conversation we just had into medical orders, to ensure that, if something happens, you get the treatments you want and don’t get treatments you don’t want. Can we proceed?”

“I heard you say that ___ is really important to you. Given what you told me, and what we know about your current health, I would recommend that we...” **[CHOOSE A, B, or C]**

A. “Do everything we can to keep you alive. That means we would use intensive care if necessary, including CPR or breathing machines. If something changes to make us worry that these treatments are not likely to help, we will talk again. Does that sound right?”

- For MA MOLST this corresponds to Attempt Resuscitation, Intubate and ventilate, and Transfer to hospital.

B. “Provide all treatments that we think will help you get better and return to your current state of health. This means that we would not do intensive care, CPR, or breathing machines, but would hospitalize you to provide all other available treatments to help you recover and be comfortable. Does that sound right?”

- For MA MOLST, this corresponds to Do Not Resuscitate, Do Not Intubate and Ventilate, Transfer to Hospital

C. “Focus on treatments that we think will help you maintain your comfort and quality of life.” This means that if you got sicker, we’d do everything we could to help you be comfortable and remain at home, like home hospice care, instead of putting you in the hospital to try to make you better. Does that sound right?”

- For MA MOLST, this corresponds to Do Not Resuscitate, Do Not Intubate and Ventilate, Do not transfer to hospital (unless needed for comfort). Write “Comfort Measures Only” on page 2.
- Encourage Hospice enrollment with this level of care if patient has ≤ 6 month prognosis.

“We can revisit this at any time.”