

Title: Determining Patients' Preferences: Educating Health Care Providers About Completing Medical Scope of Treatment (MOLST) and eMOLST Forms in Seriously Ill Persons

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Problem Statement: Many persons with serious illness have not had discussions with health care providers (HCPs) regarding goals of care and preferences. HCPs often document incompatible and incomplete MOLST orders, and have difficulty accessing a MOLST form when patients transition across various care settings.

Background: A search for relevant evidence from 2000-2020 using Google Scholar and PubMed, revealed limited research on MOLST and eMOLST use in the Emergency Department, outpatient, and inpatient settings.

Purpose: This quality improvement project determined if an educational intervention increased the percentage of patients/residents with a correctly documented MOLST and eMOLST in their electronic health record.

Methods: A one-hour session, presented in August 2021, educated 10 hospitalists in MOLST and eMOLST completion. Eleven-item pre/post education surveys about ACP, feelings of comfort and confidence completing a MOLST were distributed. 20 MOLSTs pre and 30 MOLSTs post intervention completed by the hospitalists were randomly selected and reviewed.

Results: Of 10 hospitalists surveyed, none had received formal education on MOLST completion, 70% were confident completing a MOLST; none were confident documenting an eMOLST. Hospitalists (100%) believed that an incompatible order (FULL/DNI) was appropriate. Post-intervention, 90% felt confident in MOLST completion; one still believed the conversation itself was difficult. All understood that FULL code and DNI were contradictory orders. Of 20 MOLST forms randomly reviewed pre-intervention, 10% were completed correctly. Of thirty MOLST forms reviewed post-intervention, 83% were completed correctly. While 100% of respondents were comfortable completing the eMOLST, they questioned its usefulness if outpatient clinicians could not access it.

Conclusion: A one-hour educational session can improve competent MOLST completion; providing a 30-minute review 6 months later is helpful in maintaining competency. eMOLST implementation requires all healthcare system settings to integrate for improved form access. Future directions include the education of all HCPs in this healthcare system to ensure success.