R432. Health and Human Services, Health Facility Licensing.
R432-31. Order for Life-Sustaining Treatment.
R432-31-1. Authority and Purpose.

(1) This rule is authorized by Sections 26B-2-202 and 75A-3-106.

(2) This rule establishes the forms and systems for Order for Life-Sustaining Treatment (OLST).

R432-31-2. Definitions.

(1) The definitions found in Sections 26B-2-201, 75A-3-101, and Rule R380-600 apply to this rule. Additionally:

(2) "OL" means the Office of Licensing in the Division of Licensing and Background Checks under the Department of Health and Human Services (department).

(3) "Qualified provider" is a provider as outlined in Subsection 75A-3-106(2).

R432-31-3. Order for Life-Sustaining Treatment Forms.

(1) An individual who desires to execute an OLST shall use a form or electronic format approved by OL. The form may not be altered in layout or style, including font style and size, without the express written permission of OL.

(2) Any person, health care provider, or health care facility licensee may obtain a form from the OL website.

(3) A health care provider, licensee, or Emergency Medical Services (EMS) provider shall act upon a copy of an OLST as if it were the original.

R432-31-4. Facility Policies and Procedures.

(1) A licensee shall establish and implement policies and procedures that comply with Section 75A-3-106.

(2) A licensee shall ensure policies and procedures address the licensee's responsibility to:

(a) determine upon admission whether each individual has an OLST;

(b) ensure an OLST is done in accordance with Subsection 75A-3-106(3);

(c) identify circumstances when an individual with an OLST is offered the opportunity to change the order;

(d) identify circumstances when the facility would not follow an OLST;

(e) identify any individual who may be offered the opportunity to complete an OLST, including an individual who has:

(i) a serious illness and is likely to face a life-threatening health crisis;

(ii) declining cognitive abilities and lacks a surrogate or guardian to make decisions for them; or

(iii) specific preferences for end-of-life treatments;

(f) make a referral to the primary health care provider to create, replace, or change an OLST, if the licensee's services do not include the supervision of a physician, APRN, or physician assistant;

(g) maintain the OLST in the individual's medical record;

(h) only permit a qualified provider to assist with the completion of an OLST; and

(i) outline that they are not required to offer each individual the opportunity to complete an OLST.

R432-31-5. Training.

A licensee shall appropriately train relevant health care, quality improvement, and record keeping staff on the requirements of Section 75A-3-106, this rule, and the facility's policies and procedures established in accordance with this rule.

R432-31-6. Transferability of OLST.

(1) An OLST is fully transferable among any licensed health care facility.

(2) Any health care provider assuming an individual's care at the receiving licensed health care facility shall read the individual's OLST.

(3) The receiving health care provider shall have policies and procedures to address any circumstance under which the health care provider will not follow the instructions contained in the OLST.

(4)(a) A licensee that discharges a resident, shall provide a copy of the resident's OLST to the individual upon discharge.

(b) If the individual lacks the capacity to make health care decisions, as defined in Section 75A-3-201, the licensee shall also provide a copy to the individual's surrogate or guardian.

(5) A licensee that transfers an individual with an OLST to another licensed health care facility shall provide a copy of the OLST to the receiving facility.

(6) A licensee shall allow an individual to complete, amend, or revoke an OLST at any time upon request.

R432-31-7. Presentation of OLST to EMS Personnel.

(1) Except for home health, personal care, and home-based hospice agencies, a licensee in possession of an OLST shall present the individual's OLST to EMS personnel upon arrival to treat or transport the individual.

(2) For an individual who resides at home, if the home health, personal care, or home-based hospice agency personnel are present when EMS personnel arrive at the home, the personnel shall present the individual's OLST to the EMS personnel.

R432-31-8. Home Placement of OLST.

(1) If an individual under the care of a home health, personal care, or hospice agency possesses an OLST, the agency shall ensure that a copy of the OLST is left at the individual's place of residence.

(2) For an individual adult or emancipated minor who resides at home the licensee shall ensure that a copy of the OLST is posted on the front of the refrigerator or over the individual's bed.

(3) For a minor who resides at home, it is recommended that a copy of the OLST be placed in a container and placed on the top shelf of the door inside the refrigerator.

R432-31-9. Prior Orders and Out of State Orders.

(1)(a) EMS and other health care providers may recognize as valid any prior or out of state OLST forms or medical orders for life-sustaining treatment, including the national OLST form.

(b) This may also include a bracelet or necklace, unless superseded by a subsequent OLST.

(2)(a) A physician shall complete and sign a new OLST for an individual with prior forms who no longer has the capacity to complete a new order and who does not have a surrogate or guardian to authorize the new order.

(b) The physician shall state on the new order that the individual's preferences from a prior order is still applicable.

(3) A form that an individual executed while in another state may be honored as if it were executed in compliance with this rule and Section 75A-3-106 if it:

(a) is substantially similar to an OLST or a medical order for life-sustaining treatment; and

(b) was executed according to the laws of that state.

R432-31-10. Signature Requirement.

(1) The patient or surrogate or guardian decision maker and a medical health care provider, including an MD, DO, PA, or APRN, shall sign the OLST for it to be valid.

(2) For pediatric patients, two different medical health care providers shall sign the OLST to make it valid.

(3) Electronic signatures are acceptable for OLST forms.

(4) In the event the surrogate or guardian decision maker cannot sign in-person or electronically, a verbal signature may be noted if confirmed by two medical professionals caring for the patient.

(5) Photocopies and faxes of signed OLST forms are legal and valid.

R432-31-11. Compliance.

Any person who violates this rule may be subject to the penalties in Rule R380-600 and Title 26B, Chapter 2, Part 7, Penalties and Investigations.

KEY: POLST, do not resuscitate, DNR, Life with Dignity Order, order for life-sustaining treatment
Date of Last Change: February 18, 2025
Notice of Continuation: January 24, 2022
Authorizing, and Implemented or Interpreted Law: 26B-2-202; 75a-3-106