



Completing Medical Orders for Scope of Treatment Forms in Persons with Advanced Cancer During Hospitalization

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Statement of the Problem

- Many persons with advanced cancer have not had discussions about advance directives (AD) during the course of their illness¹
- Having a discussion and completing the Medical Orders for Scope of Treatment (MOST) form is a way patients can participate and have control over their care, treatment, and preferences before a catastrophic event

Background/Literature Review

- Patients believe that end-of-life discussions and advance care planning (ACP) are an “important part of their cancer care;”² yet, in one review those conversations occurred with their primary oncologist only 10% of the time³
- Discussions about treatment preference should be held at key intervals (e.g., initial advanced cancer diagnosis and during any hospital admission)

Purpose: Quality Improvement

- To increase the percentage of completed MOST forms by time of discharge for patients admitted to the University of CO Hospital medical oncology unit
- To increase provider confidence in having discussions regarding MOST forms



Methods

Education session

Pre/post survey

Weekly reminders

- 23-minute narrated PowerPoint
• <https://youtu.be/Peov44SV05M>
- Pre/post 7-question knowledge survey about MOST forms
- Weekly reminders to providers to complete MOST forms with patients
- Number of MOST forms completed by medical oncology patients pre-/post-intervention compiled via UCHealth Analytics Report Directory

Findings

- 51 providers were emailed education link and pre/post survey
 - 18 completed pre-education survey
 - 17 viewed the narrated PowerPoint
 - 8 completed post-education survey
- **Providers who completed education were more confident and prepared to discuss MOST forms with patients**
- **Respondents (88%) believed a hospital admission was a good opportunity to complete a MOST form**
 - Pre-education MOST form completion rate (3/19-9/19): 13.7%
 - Post-education MOST form completion rate (10/19-9/20): 15.5%
 - **Not statistically significant**

Implications for Practice

- Education helps providers feel more confident completing MOST forms with patients
- Provider confidence level does not necessarily translate to an increase in MOST forms
- A busy inpatient setting makes it difficult to complete MOST forms
- Future direction could include a standardized approach during the discharge process to complete MOST forms



Limitations

- Education session was >20 minutes
- Busy clinical service requires triaging of tasks
- Lack of relationship formed between patient and provider during hospitalization
- Discharge planning is already complex and time consuming

Acknowledgements/References

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