

residents with traditional advance directives. There were no differences between residents with or without POLST forms on symptom assessment or management measures. POLST was more effective than traditional advance planning at limiting unwanted life-sustaining treatments. The study suggests that POLST offers significant advantages over traditional advance directives in nursing facilities.^{15,16}

In summary, more than a decade of research has shown that the POLST Paradigm Program serves as an emerging national model for implementing shared, informed medical decision-making. Furthermore, POLST more accurately conveys end-of-life care preferences for patients with advanced chronic illness and for dying patients than traditional advance directives and yields higher adherence by medical professionals.

CLINICAL CASE REVISITED

Let's consider if the physician for our 89-year-old woman with dementia had completed a POLST form with orders indicating "do not attempt resuscitation (DNR/no CPR)" and "comfort measures only, do not transfer to hospital for life-sustaining treatment and transfer if comfort needs cannot be met in current location."

The patient's respiratory distress and fever would have been treated at her nursing home with medication and oxygen. She would have been transferred to the hospital only if her comfort needs would not have been met at the nursing home. Unwanted life-sustaining treatment would have been avoided. The wishes of the patient, based on her values and careful consideration of options, would have been respected. ■

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CORRECTION

In the June 2012 issue, on page 384 of the Clinical Picture article by Álvarez-Twose et al (Álvarez-Twose I, Vañó-Galván S, Sanchez-Muñoz L, Fernandez-Zapardiel S, Escribano L. The Clinical Picture: anemia, leukocytosis, [doi:10.3949/cjm.79a.c7464](https://doi.org/10.3949/cjm.79a.c7464)

abdominal pain, flushing, and bone and skin lesions. *Cleve Clin J Med* 2012; 79:384–386), Dr. Alvarez-Twose's first name was spelled incorrectly. The correct spelling is Iván. This error has been corrected in the online version.