

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

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**Statement of the Problem:** Completing Medical Orders for Scope of Treatment (MOST) forms during hospitalization allows persons with advanced cancer control over treatment and preferences before a catastrophic event.

**Background:** When Advance Care Planning (ACP) discussions occur, patients' values and end-of-life care preferences are not always addressed. In Colorado, the MOST form is an Advance Directive for people with serious illness that addresses preferences regarding life-sustaining interventions. Ideally, ACP would be initiated in the outpatient setting. However, persons with cancer should talk about ACP at key intervals along their illness trajectory, especially upon initial diagnosis of advanced cancer and any hospital admission.

**Purpose:** This quality improvement project aimed to increase the percentage of completed MOST forms by time of discharge for patients admitted to the University of Colorado Hospital (UCH) medical oncology unit.

**Methods/Measures:** Medical oncology providers were educated regarding how to complete MOST forms and the benefits patients receive from these discussions. Fifty-one providers were emailed a link to the narrated PowerPoint and pre-/post-education surveys asking about comfort and preparation discussing MOST forms. Eighteen providers completed a seven-item pre-education survey; 8 the post-education survey. Weekly emails reminded providers to complete MOST forms with patients. Number of MOST forms were obtained from the UCH Health Analytics Report Directory pre (March, 2019 – September, 2019) and post-education (October, 2019 – September, 2020)

**Findings:** Providers who participated in MOST form education felt more comfortable and prepared to discuss MOST forms. Although not statistically significant, completed MOST forms scanned into medical records post-education increased from 13.7% to 15.5%.

**Implications for Practice:** Education may help increase provider comfort with MOST form discussions, though a busy inpatient setting does not necessarily translate to an increase in forms being completed. Future directions could include a formal discharge process that includes completion of MOST forms.