

# DC MOST FORM

## Frequently Asked Questions

### What does MOST stand for?

MOST stands for Medical Orders for Scope of Treatment. These medical orders outline a patient's preferred method of treatment for End-of-Life care.

### What is the DC Department of Health MOST form?

The MOST form was established under The Health-Care Decisions Amendment Act of 2015 (D.C Official Code § 21-2221) to create a form to document patients' wishes for End-of-Life medical intervention. The MOST form must be kept in a prominent manner in a patient's medical records in paper and/or in electronic form, ultimately replacing the Comfort Care forms. The law also outlines who is authorized to give consent to a MOST form and is limited to DC licensed physicians and Advance Practice Nurses.

### How does one qualify for MOST?

MOST is 100% voluntary and is intended to allow a patient with an advanced or terminal illness, to develop a comprehensive plan for their End-of-Life treatment.

### Who completes a MOST form?

The MOST form must be completed and signed off by an authorized DC-licensed healthcare professional (Physician (MD/DO) or Advanced Practice Registered Nurse (APRN)-only) and in consultation with the patient or the patient's authorized representative.

### How do I obtain a MOST form?

MOST forms are available online at [dchealth.dc.gov](https://dchealth.dc.gov) or through one's Physician (MD/DO) or Advance Practice Registered Nurse (APRN) or go to CRISP DC Advance Care Plan at [crispdc.org/acp/](https://crispdc.org/acp/).



## What is the new eMOST form?

Through an initiative led by the DC Department of Health Care Finance and DC Health, CRISP DC collaborated with A|D Vault to embed its advance care planning platform, called **MyDirectives for Clinicians**, in the HIE. This platform ([crispdc.org/acp/](https://crispdc.org/acp/)) allows providers and any CRISP DC HIE user to create, upload, and view advance care plans, including the **eMOST form**, whenever and wherever it is needed across multiple care teams.

- Patients can scan and upload existing advance care planning documents like paper DC MOST forms by creating a free account at [advaultinc.com/how-we-help/mydirectives](https://advaultinc.com/how-we-help/mydirectives)
- The new form ensures other care teams, such as ambulatory providers and DC Fire and EMS responders, can easily access this information to honor the patient's care decisions.

## What if my physician signs the MOST form and I change my mind?

If you change your mind, you should draw a line through "Medical Orders" at the top of the page, and write "VOID" in large letters. If you wish to make changes to your MOST, you must complete a new form.

## What costs are associated with completing or submitting a MOST form?

There is no cost associated in participating in the MOST program.

## Who receives a copy of the MOST form?

The original, completed MOST form must be kept in the patient's medical record, copies should be given to the patient. Health care facilities must provide a copy of the MOST form if the patient is being transferred to another facility (i.e. hospital, hospice, and skilled nursing facility).

If your Physician or Advance Practice Registered Nurse creates an electronic version, the eMOST form, on

[crispdc.org/acp/](https://crispdc.org/acp/) or if the patient creates a free account in AD Vault, Inc My Directives and/or uploads an existing MOST form, then the MOST information will be available to all CRISP DC HIE users including healthcare providers/facilities and first responders.

## What happens if a section of the MOST form is incomplete, but has required signatures?

Any incomplete section (A–C) of the MOST form implies full treatment as defined in that section. In order to make changes, a new MOST form must be completed.

## What is the difference between MOST and DC Comfort Care Order/Do Not Resuscitate?

MOST is a set of medical orders, which means that it can be followed by any healthcare provider in any setting. MOST allows for patients to be more specific regarding their wishes for End-of-Life care.

The DC Comfort Care Order/Do Not Resuscitate only allows a patient to forgo cardiopulmonary resuscitation (CPR) and honor the patient's wish to have a natural death. It does not allow for patients to indicate preferences regarding medical interventions, when one has a pulse or breathing. The ability to choose one's treatment options conveys the dignity and respect to those at the end-of-their life.



## If I require additional information on the MOST program, who should I contact?