

How does the TPOPP/POLST Form compare to the Missouri OHDNR Purple Form?

See below for a comparison.

Document Features	Missouri OHDNR Purple Form	TPOPP/POLST - Medical Order
Governed By	Statutory citation 190.600-190.621 RSMo (9/07)	Scope of Practice, Standard of Care and clinical consensus (Any valid DNR orders may be honored per MO DHSS guidance Long-term Care Bulletin [Summer 2010] and EMS Bureau Memo July 10, 2018)
Target groups	Capacitated adults or those represented by an agent for whom the individual has granted authority to decline CPR in the event of cardiac or respiratory arrest.	Persons with or without capacity living with advanced illness or frailty who: 1) by advance health care directives indicate treatment preferences for all, certain types or no CPR interventions (or meet CPR medical criteria for no benefit/harm*), 2) have elected a comfort care plan, or 3) have a representative to speak on their behalf in accordance with state law to concur with a provider authorized to write CPR medical orders.
Settings	All outside hospital settings.	All settings—including inpatient, outside- and pre-hospital, home and community dwellings, residential and long term care facilities.
Initiated by	Patient with capacity or agent with powers granted in notarized appointment.	Physician or authorized licensed professional on behalf of patients with advanced illness/frailty in compliance with scope of practice, law/regulations.
Health Status of Patient	Not required for declaration.	Serious illness and/or advanced frailty (see POLST Intended Population)
Requirements to execute/validate	Capacitated Patient must authorize, or grant agent power via advance directive. Physician signature required.	Signature of physician/authorized licensed professional required. Signature of patient or representative required for validity to acknowledge/concur with medical order.
Adherence to Form	Must be in the form prescribed by statute for immunity protection.	Standardized TPOPP/POLST form adopted by consensus for transportability across settings. Acceptable per MO EMS Bureau Memo, July 10, 2018.
Immunity protections	Immunity from liability subject to 190.606 RSMo (9/07)	Governed by Standard of Care and Scope of Practice. Proposed language for immunity under consideration.
Range of Treatments Addressed	Addresses only Full or No CPR attempt	Addresses complete range of treatments from Full Treatment to DNAR in guiding responders and providers. Based on patient current condition, directives, and goals of care. Medically assisted nutrition and other treatments included.

* See Integrated 2010, 2015, 2020 American Heart Association Guidelines for CPR and Emergency Cardiovascular Care <https://cpr.heart.org/en>

