



**Department
of Health**

Revisions to the Medical Orders for Life-Sustaining Treatment (MOLST) Form (DOH-5003)

**Marina J. Maxwell, LCSW
Center for Hospice & Palliative Care**

01/07/2025

REVISIONS TO THE MOLST FORM (DOH- 5003)

- Previous MOLST form updated August 2022
- Newly Revised MOLST form created in collaboration with Office for People With Developmental Disabilities, Department Of Health, and Office of Mental Health in 2024
- The MOLST was modified to conform with statutory changes
- Previous versions of the MOLST form remain in effect for those who completed one
- Form was simplified to align with other medical forms such as:
 - “Do-Not-Resuscitate” and “Do-Not-Intubate” Medical Orders
 - These changes have been moved to the first page

REVISIONS TO THE MOLST FORM (CONTINUED)

Page 1:

- Section A: Outlines patient information and advance directives
- Section B: No changes
- Section C: Clarifies available choices which now include:
 - Intubation and long-term mechanical ventilation, includes tracheostomy
 - Intubation and long-term mechanical ventilation, includes tracheostomy, following the use of non-invasive ventilation
 - Do Not Intubate, use of Non-Invasive Ventilation only
 - Do Not Intubate and Do Not Use Non-Invasive Ventilation or Mechanical Ventilation



REVISIONS TO THE MOLST FORM (CONTINUED)

Page 1 Continued:

- Section D: Updated check boxes under “Who is the individual making decisions”:
 - From “Family Health Care Decisions Act Surrogate” to “Family Health Care Decisions Act Surrogate for Adult”
 - From “Minor’s Parent/Guardian” to “Family Health Care Decisions Act Surrogate for Minor”
- Section E: No changes
 - Addition of a reminder to use the directions on page 4 in this section



REVISIONS TO THE MOLST FORM (CONTINUED)

Page 2:

- Section F: “Future Hospitalization/Transfer” section is listed here rather than Section C
 - “Future Hospitalization/Transfer” has a new option: “Do not send to the hospital unless pain or severe symptoms cannot be otherwise controlled.”
- Section G: Updated check boxes under “Who is the individual making decisions”:
 - From “Family Health Care Decisions Act Surrogate” to “Family Health Care Decisions Act Surrogate for Adult”
 - From “Minor’s Parent/Guardian” to “Family Health Care Decisions Act Surrogate for Minor”
 - The reminder to use directions for an individual with Intellectual Disability/Developmental Disability on page 4 was removed from this section and put into Section H
- Section H: The reminder to use the directions was moved here



REVISIONS TO THE MOLST FORM (CONTINUED)

Page 3:

- Section I:
 - Description of the review and renewal process is more detailed, regarding patient wishes and notification of relevant parties
 - Addition of a reminder to use directions on page 4 for an individual with Intellectual Disability/Developmental Disability classification

REVISIONS TO THE MOLST FORM (CONTINUED)

Page 4:

- Same content but now has its own section heading
- More detailed instructions and reasons checklists are necessary
- Website references updated to provide complete instructions on the checklists

IMPORTANT REFERENCES AND RESOURCES

- For individuals with an intellectual or developmental disability, refer to the Office for People with Developmental Disabilities Website at <https://opwdd.ny.gov/providers/health-care-decisions> and to the Office for People With Developmental Disabilities MOLST Legal Requirements Checklist for Individuals with Developmental Disabilities
- Ordering MOLST forms:
 - The MOLST form and supporting checklists can be downloaded at <https://www.health.ny.gov/forms/doh-5003.pdf>
 - The nonhospital Do Not Resuscitate form is available at <https://www.health.ny.gov/forms/doh-3474.pdf>
 - To order printed MOLST forms, please complete the [DOH Order Form](#) and email it to bmcc@health.ny.gov (quantities may be limited)
 - For more on the MOLST, visit: https://www.health.ny.gov/professionals/patients/patient_rights/molst/





Department
of Health

Center for Hospice & Palliative Care

Office of Aging & Long-Term care

EMAIL: CHPC@HEALTH.NY.GOV | PHONE: (518) 807-7848



**Department
of Health**