Background  Illness raises fundamental questions – For what may I hope? Why do I suffer? Does my suffering have meaning? What happens after I die? When a physician stands with a patient as they face death, the physician inevitably plays a role in supporting the patient’s inquiry into these spiritual questions (see Fast Fact #31 Confronting Personal Mortality). In addition some patients have specific preferences regarding medical care, death and dying that are based upon their religious beliefs. The physician often plays an important role in supporting a patient’s exploration of these issues. Taking a spiritual history is one way to support the patient in this exploration. Maugans (1997) presents a framework for taking a spiritual history; the interview below comes primarily from Maugans’ article with some modification based upon the other sources cited. See Fast Fact #274 for information on the FICA Spirituality History Tool.

Taking a Spiritual History

S—Spiritual belief system

• Do you have a formal religious affiliation? Can you describe this?
• Do you have a spiritual life that is important to you?
• What is your clearest sense of the meaning of your life at this time?

P—Personal spirituality

• Describe the beliefs and practices of your religion that you personally accept.
• Describe those beliefs and practices that you do not accept or follow.
• In what ways is your spirituality/religion meaningful for you?
• How is your spirituality/religion important to you in daily life?

I—Integration with a spiritual community

• Do you belong to any religious or spiritual groups or communities?
• How do you participate in this group/community? What is your role?
• What importance does this group have for you?
• In what ways is this group a source of support for you?
• What types of support and help does or could this group provide for you in dealing with health issues?

R—Ritualized practices and restrictions

• What specific practices do you carry out as part of your religious and spiritual life (e.g. prayer, meditation, services, etc.)
• What lifestyle activities or practices do your religion encourage, discourage or forbid?
• What meaning do these practices and restrictions have for you? To what extent have you followed these guidelines?

I—Implications for medical care

• Are there specific elements of medical care that your religion discourages or forbids? To what extent have you followed these guidelines?
• What aspects of your religion/spirituality would you like to keep in mind as I care for you?
• What knowledge or understanding would strengthen our relationship as physician and patient?
• Are there barriers to our relationship based upon religious or spiritual issues?
• Would you like to discuss religious or spiritual implications of health care?

T—Terminal events planning

• Are there particular aspects of medical care that you wish to forgo or have withheld because of your religion/spirituality?
• Are there religious or spiritual practices or rituals that you would like to have available in the hospital or at home?
• Are there religious or spiritual practices that you wish to plan for at the time of death, or following death?
• From what sources do you draw strength in order to cope with this illness?
• For what in your life do you still feel gratitude even though ill?
• When you are afraid or in pain, how do you find comfort?
• As we plan for your medical care near the end of life, in what ways will your religion and spirituality influence your decisions?

References:


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