

## CLINICAL ASSESSMENT TOOL

# FICA Spiritual History Tool

Developed by Christina Puchalski, MD, George Washington University. The most widely used spiritual history tool in palliative care. Designed to be conversational — ask in your natural clinical voice, not as a checklist.

Reference: Puchalski C, Romer AL. Taking a spiritual history allows clinicians to understand patients more fully. *J Palliat Med.* 2000;3(1):129–137.

## F

### Faith / Belief

*Identifies whether the patient has a faith/belief system or other source of meaning.*

**Primary question:** "Do you consider yourself spiritual or religious?"

**Follow-up questions:**

- "Do you have spiritual beliefs that help you cope with stress?"
- "What gives your life meaning?"
- "Some people don't identify as religious or spiritual but find meaning in other ways — what's that like for you?"

## I

### Importance

*Assesses whether spirituality influences health decisions or coping.*

**Primary question:** "How important is your faith/belief in your life?"

**Follow-up questions:**

- "Has your faith/belief influenced how you take care of yourself?"
- "Has your illness affected your faith or spiritual life in any way?"
- "What role does your spirituality play in your health decisions?"

## C

### Community

*Determines if the patient has a supportive spiritual community.*

**Primary question:** "Are you part of a spiritual or religious community?"

**Follow-up questions:**

- "Is this a source of support for you? How?"
- "Is there a person or group of people who are especially important to you?"
- "Have you felt supported or unsupported by your community during this illness?"

**A**

**Address in Care**

*Determines how to integrate spiritual care into the patient's overall care plan.*

**Primary question:** "How would you like me to address these issues in your healthcare?"

**Follow-up questions:**

- "Is there anything we can do to support your spiritual needs?"
- "Would you like to speak with a chaplain or your own clergy/spiritual leader?"
- "Are there any spiritual or religious practices that are important to your care right now?"

**DOCUMENTATION**

**Documenting the Spiritual Assessment**

Field	What to Document
Faith tradition / belief system	Patient's stated religion, spirituality, or source of meaning
Importance to patient	How central faith is to daily life and health decisions
Community support	Whether patient has supportive religious/spiritual community
Care preferences	Specific needs: chaplain referral, clergy contact, ritual accommodation, dietary needs
Sacred objects present	Any religious items at bedside — document, do not remove
Chaplain referral	Date/time of referral, name of chaplain, outcome of visit
Follow-up needed	Unresolved spiritual needs, planned reassessment date

**Model FICA Documentation Note:**

*"F: Patient identifies as Catholic; reports faith is central to her life. I: States her rosary and daily prayer are important coping resources; concerned about receiving Last Rites. C: Active parish community; priest notified and will visit today. A: Chaplain consulted for spiritual support; patient requests Anointing of the Sick. Rosary at bedside — not to be removed. Spiritual care plan documented and communicated to IDT."*