

## BEDSIDE PROTOCOL

## Sacred Objects &amp; Practices: Clinical Protocol

**The Rule:** Ask before you touch. Sacred objects are not decorations — they are extensions of the patient's spiritual identity. In many traditions they are believed to provide active protection or facilitate passage. When in doubt: glove up, don't move it, and ask.

Object	Tradition	Significance	Clinical Protocol
Rosary	Catholic Christianity	Meditative prayer beads; patient may be praying continuously	Do not remove. Route IV lines and leads around it. Document its presence in nursing notes.
Crucifix / Cross	Christianity	Symbol of salvation; often hung on wall or worn around neck	Do not remove from room without asking. Consider it part of the patient's therapeutic environment.
Sacred Thread (Janeu) <b>DONOT REMOVE</b>	Hinduism	Thread tied at initiation; marks spiritual status; worn by initiated Hindu men	Never cut or remove. Route monitoring cables around it. Document in nursing notes.
Tulsi Mala (beads)	Hinduism	Holy basil beads representing Vishnu; protection and devotion	Do not remove. Treat as sacred. May be worn under gown.
Ganga Jal	Hinduism	Holy water from Ganges River; placed on lips or in mouth at time of death	Family may wish to administer at time of death. Support this. Patient may be unconscious when given.
Kara (steel bracelet) <b>DO NOT REMOVE</b>	Sikhism — One of the Five Ks	Represents God's eternity and the Sikh's devotion; worn at all times	Never remove without explicit permission. Notify surgeon/anesthesia early if procedure is planned.
Kesh (uncut hair) <b>DO NOT REMOVE</b>	Sikhism — One of the Five Ks	Hair given by God and must not be cut under any circumstance	Never cut Sikh hair — even in emergencies. Seek explicit family permission. Document reasoning.
Kirpan <b>DO NOT REMOVE</b>	Sikhism — One of the Five Ks	Ceremonial dagger symbolizing justice; a religious article, not a weapon	Many jurisdictions legally protect the right to wear it. Consult administration. Never confiscate without legal basis.
Medicine Bundle <b>DO NOT REMOVE</b>	Indigenous traditions	Sacred collection with spiritual power specific to the individual; contents may not be discussed	Do not touch, open, or ask about contents. Secure storage in patient's room. Document its presence only.
Eagle Feathers <b>DO NOT REMOVE</b>	Many Indigenous traditions	Sacred in many nations; spiritually significant and legally protected (Eagle Protection Act)	Do not handle, move, or discard. Consult with patient or family for any required movement.
Tefillin	Judaism (Orthodox)	Prayer boxes worn during morning prayer; part of daily spiritual practice	Do not remove during prayer. Accommodate morning prayer time. Allow space and privacy.
Tasbeeh / Prayer Beads	Islam	99 or 33 beads used for dhikr (remembrance of God); patient may be in continuous prayer	Do not remove. Patient may be praying continuously. Preserve access during all care.

Object	Tradition	Significance	Clinical Protocol
<b>Quran</b> <b>DO NOT REMOVE</b>	Islam	The word of God — must not be placed on floor or near impure items	Handle only with clean hands or gloves. Never place on floor or under other objects. Elevate if needed.
<b>Smudge materials</b>	Indigenous traditions	Sage, cedar, sweetgrass, or tobacco burned for spiritual cleansing and prayer	Work with facility fire safety to accommodate. Open window, use fan, or coordinate timing. Do not prohibit without offering an alternative.
<b>Buddha image / Altar</b>	Buddhism	Focus for meditation and devotion; supports calm dying environment	Do not remove or reposition without asking. Maintain clean, respectful environment around it.

#### WHEN YOU MUST MOVE A SACRED OBJECT

### Protocol for Necessary Object Handling

- 1** Ask the patient or family directly.

*"I need to [explain procedure]. There is a [object] that I may need to move temporarily. Is that acceptable? How would you like me to handle it?"*

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- 2** Use gloves.

*Many traditions regard bare-handed touching of sacred items by non-members as disrespectful or ritually significant. Gloves signal care.*

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- 3** Move minimally and return promptly.

*Move only as far as necessary. Return to original position immediately. Do not place on floor.*

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- 4** Document.

*"[Object] temporarily repositioned for [procedure] with patient/family verbal consent. Returned to original position at [time]. Patient/family notified."*

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- 5** If patient is unconscious, ask the family.

*Family members are custodians of these objects. Their guidance governs. If no family is present, call the chaplain before moving.*

