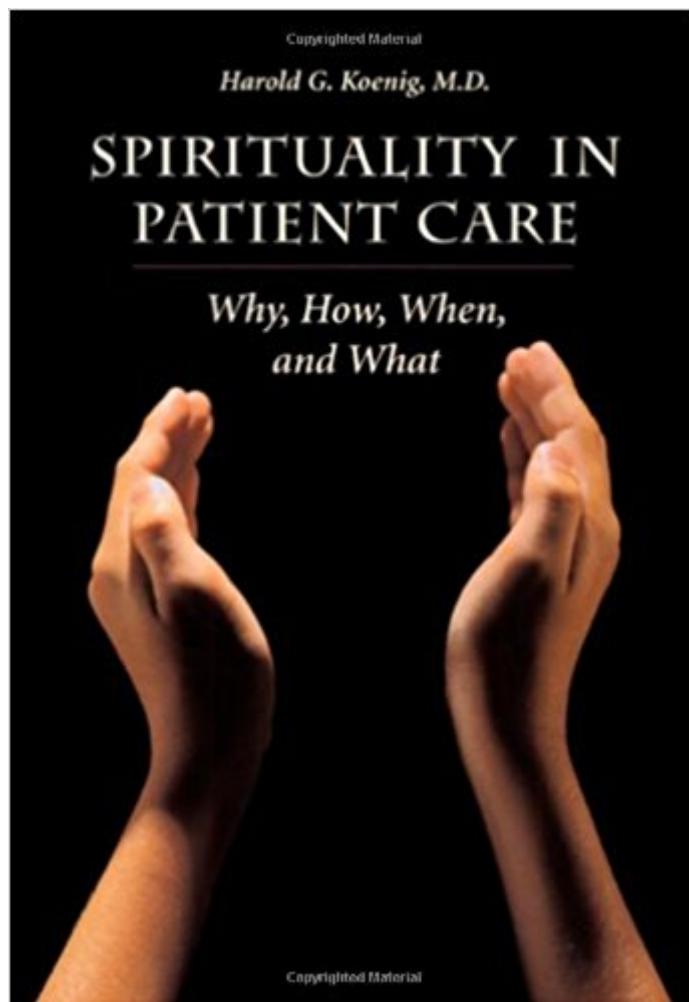


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Spirituality In Patient Care: Why How When & What



Synopsis

This book is intended as a guide for practicing physicians, medical students, and residents to help identify and address the spiritual needs of patients. Those who will benefit most will be physicians who wish to know how to integrate spirituality into clinical practice in an effective and sensitive manner. Other professionals, such as nurses and chaplains, may use this book as they interact with doctors, other health professionals, and hospital administrators.

Book Information

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Customer Reviews

Harold G. Koenig, MD, is board certified in general psychiatry, geriatric psychiatry, and geriatric medicine. He is on the faculty at Duke as professor of psychiatry and behavioral sciences and associate professor of medicine. Dr. Koenig is Director of Duke's Center for Spirituality, Theology and Health and has published extensively in the fields of mental health, geriatrics, and religion, with over 350 peer-reviewed articles and book chapters and close to 40 books in print or in preparation. He is also a registered nurse.

Through most of recorded history spiritual beliefs and religious practices have been assumed to play a central role in health. Religious leaders were often also seen as healers, or at least mediums through whom healing might come. The 20th century particularly saw a separation between the practice of medicine and spiritual/religious beliefs and practices. Harold G. Koenig's book *Spirituality In Patient Care: Why, How, When, and What* addresses this gap and argues for the inclusion of

patient's religious and spiritual life as an essential element in "patient-centered medicine" (8). He makes use of volumes of research data to demonstrate the value of religiosity to health, and the importance of health professionals addressing this aspect of their patients' lives. The book outlines, as the title suggests, the why, how, when and what of including the spirituality of the patient in the treatment conversation and plan. He then proceeds to discuss some risks - i.e. some ways that religious and spiritual beliefs and practices might be problematic, and how do address these. One example is the notion that illness or suffering is somehow "God's will" which might dispose a patient to resist treatment or might interfere with that patient's openness and capacity for healing (108). He outlines professional boundaries for health professionals, and then spends a chapter on each of the following disciplines and how they might address spirituality in patient care: Chaplains and Pastoral Care; Nursing; Social Work; Rehabilitation; Mental Health. His final two main chapters are spent outlining a model curriculum for including religion and spirituality in medical training, followed by an overview of beliefs and practice found in world religions. These chapters are helpful not only for medical schools but particularly for staff development and inservice training in medical facilities. Ongoing conversation is needed to develop the ability of all health practitioners to address these issues effectively with patients and their families. The failure to do so can hinder the ability of patients to develop a relationship of trust with their medical team and to make full use of these resources for their progress toward wholeness. I highly recommend this book for medical practitioners as well as clergy and other religious professionals and lay leaders who function in healthcare settings or interact regularly with people in matters of their health. Below are links to chapter summary notes for use in a book club or other study.

Not one of my favorite Koenig titles. Much of the content is just common sense. Written for doctors/nurses.

Required book for class.

Muito interessante e ilucidativo para implementar entre os profissionais da saúde uma prática de respeito e promoção à Ásia Ásia Ásia da espiritualidade dos doentes durante o internamento hospitalar.

This is helpful for those seeking a chaplaincy position or those in pastoral ministry. Practical advice abounds in this book.

Sera posible tenerlo en espanol?

This 2007 second edition updates Koenig's earlier edition written in 2001 and published in 2002. While some in the science and healthcare field might consider the Templeton Press imprint suspect, the fact of the matter is that Dr. Koenig -- a psychiatrist on the faculty of the Medical School at Duke -- is a respected and well-known authority on the relationship between health and spirituality; an area that the Templeton Foundation specifically funds research and publication. Because 's "product description" is vague, and less than helpful, regarding the content; and, because others in this venue have already commented on Koenig's reputation and the quality of this work, I will -- instead -- provide a descriptive, rather than an evaluative review. When one scans the table of contents, it is readily apparent that Koenig is providing narrative from a series of lectures that surround and encompass his interest in ways healthcare professionals can identify and address the spiritual needs of their patients. He has studied the enormous body of research literature very carefully and interviewed hundreds of healthcare professionals to provide readers with the most current research and views regarding the integration of spirituality into patient care. Of interest to proponents is his note that -- despite JCAHO Accreditation Standards and the fact that the nursing profession has its roots in religious orders -- only about 7 percent of patients have a spiritual history documented in their medical records. Why? Typically because doctors assume that such questions are dealt with by the hospital's chaplain, a position that many hospitals have trimmed to pay for budget expansion elsewhere. Arguing that "spiritual issues in patient care" are important because they are "an extension of patient centered medicine," Koenig then explores the topic in the following contexts: Why include spirituality in patient care? How does a healthcare professional go about including spirituality in the healthcare provider-patient context? When is the most appropriate time or setting to discuss spirituality issues with a patient? What might result - or, put another way, in what ways might the patient's spirituality impact upon his prognosis and improvement? What about ethical and professional boundaries regarding this issue? And, then there is the problem of how best to address and deal with those times and situations where the patient's religious and spiritual beliefs are harmful. Koenig then explores the functional role and opportunities that spirituality might play for chaplains, nurses, social workers, rehabilitation therapists, and those in the mental health field. This is followed by his ten-session model curriculum intended for such an audience that would cover religion, spirituality and medicine and a forty-page outline of basic information on the religious rituals, customs and tenets of many of the world's religions that healthcare professional might find

useful. If, for no other reason, that hospital accreditation standards require healthcare providers to include the patient's spiritual history in their records, this book should be an essential purchase for medical, nursing and hospital libraries. But, because it also serves religious leaders, psychologists and academics with a practical guide to the inclusion of spirituality in the realm of those suffering and confronting death, it should be of great interest and worthy of acquisition in college and university libraries as well. R. Neil Scott Middle Tennessee State University

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