

Miller, Donald Ferd.

Sick Room... —

ADU 3558

SICK ROOM

Guide

— D. F. MILLER, C.S.S.R. —

•
FIVE CENTS

IMPRIMI POTEST:

FRANCIS J. FAGEN, C.S.S.R.,

Provincial

St. Louis Province of Redemptorist Fathers

St. Louis, Mo., November 19, 1945

NIHIL OBSTAT:

H. B. RIES,

Censor Librorum

St. Francis, Wis., November 14, 1945

IMPRIMATUR:

✠ MOSES E. KILEY, S.T.D.,

Archbishop of Milwaukee

Milwaukee, Wis., November 19, 1945

835035

SICK ROOM
GUIDE

INSTRUCTIONS ON THE
SPIRITUAL CARE OF THE SICK
AND DYING

by

D. F. MILLER, C.S.S.R.

Published by
THE LIGUORIAN PAMPHLET OFFICE
Oconomowoc, Wisconsin

Deacidified

Introduction

INTO every home, at some time sickness is bound to come, and sometimes it will be a sickness that is followed by death. For the sick person himself, his suffering is an opportunity to make amends for his sins, to atone for the evil committed by others, and to make a good preparation for his entry into the other world. For the relatives and friends of the one suffering, sickness offers one of the greatest of all opportunities for charity, in the form of both spiritual and corporal works of mercy.

Our Lord Himself placed charity toward the sick high on the list of works pleasing in His eyes. In fact, He has promised that the reward of the blessed in heaven will in great part be due to their kindness to the sick. For after the final

judgment He will say to them: "Come ye blessed of My Father, possess the Kingdom prepared for you from the foundation of the world . . . I was sick and you visited Me." And when they ask, "Lord, when did we see Thee sick and visited Thee?" He will answer, "Amen, I say to you, as long as you did it to one of these My least brethren, you did it to Me."

These words should be kept in mind by those on whom the duty falls of caring for the sick. They provide a supernatural motive, and the surest incentive to unfailing kindness, in all ministrations to the sick person. They make one realize that it is not merely a fond mother or good father or beloved brother or sister who is being cared for, but a child of God, an heir of heaven, and a representative of Jesus Christ.

The one who has the care of the sick must always be mindful that his charity should be of two kinds, the one for the body and the other for the soul. It is the purpose of this booklet to set down the rules for care of the soul of a sick person; nevertheless a few remarks on providing for the physical comfort of the patient will not be out of place.

The cleanliness of the sick room and of the patient's bed and body should be of constant concern to the attendant on the sick, because nothing contributes so much to comfort and peace. The room itself should be neat and orderly; unnecessary objects, such as trunks, old furniture, stored materials, should be removed. There should be cheery curtains on the window, and attractive, preferably holy pictures on the walls. The

floor should be swept and the furniture dusted every day. The bed linen should be changed often, and in between changes should be frequently smoothed out and put in order. For a patient who is confined to bed for a long period, the attendant should learn how to give sponge baths as a great means of comfort and refreshment.

In the midst of all these ministrations, a spirit of cheerfulness should always be maintained. The service of the sick is often laborious and monotonous and fatiguing; it requires great sacrifices of time and energy; but it would be rendered fruitless unless it were performed in a spirit of comforting cheerfulness.

But the most perfect care of the body and of the physical surroundings of the sick would be but poor charity if it were unaccompanied

by an informed and understanding care of the soul. The highest of all forms of charity is that which assists a soul to appear properly prepared before its Maker. Surely it should be the earnest wish of a son or daughter caring for a mother or father, or of a father and mother caring for one of their own children, to see that nothing is lacking that can in any way assure the soul of its eternal happiness. Sometimes caring for the sick presents opportunities for conversion, or for the awakening of repentance in those who have lived sinful lives. Through the physical care of the sick, one always gains some access to the soul, and many a fallen-away Catholic has died at peace with God, because the one caring for him in his last illness knew what to do for the soul.

This booklet therefore sets down

the rules that should be followed in a sick room when the priest comes to visit the sick, when the Sacraments are being administered, when the time of death approaches, and for the actual moment when death occurs.

SICK ROOM GUIDE

I. When and How to Call the Priest

1. Whenever there is real danger the priest should be called to a sick person at once. This does not mean that the family should wait until death seems to be close at hand. To wait until that time is both dangerous to the soul of the sick person and an injustice to the priest. The priest should be called as soon as it is known that the illness is a dangerous one. It can be taken as proof that there is danger if the doctor expresses himself as uncertain of the illness. In the case of serious accident or injury the priest should be called at once.

2. Except in the case of sudden illness or serious accident, an effort should be made to call the priest during the day, and not on a

Saturday afternoon when he is busy with confessions, nor on a Sunday morning. However, there should be no hesitation about calling a priest at night or even out of the confessional in a suddenly arising danger.

The priest should not be called during the above-mentioned hours for someone who has already been attended and prepared for death, unless he has not been to see the sick person for a considerable time, or unless the sick person insists on seeing the priest because of some trouble of mind.

4. The priest should not be called for sick infants, unless they have not been baptized. However, any child having the use of reason, therefore of seven years or thereabouts, should have the priest in danger of death.

5. In suddenly arising danger of

death it is of the utmost importance that the priest who is called be given correct and complete information about the sick person. It is preferable that a messenger be sent for the priest who can give him the facts and conduct him to the home of the sick person. This messenger should not be a child who may not be able to give all the information needed. The telephone may be used to call a priest, when he can easily find the sick person's home, because of the time that may be saved, but the one who calls must be ready to give clearly and completely the facts that the priest needs to know. If the call for the priest is made at night, and especially if he has to pass through doubtful districts of the city, or if he may have difficulty finding the home, someone should be sent to accompany him

if that be at all possible. If the family possesses an automobile, or if there are friends who have a car near at hand, someone should be sent to bring the priest.

6. The following points of information should be given to the priest when he is called to attend the sick:

a. Full name of the sick person.

b. Name of the street and the house number where the sick person lives, and any added details that will be helpful, such as whether it be an upstairs flat, an apartment, etc.

c. The age and condition of the sick person; whether conscious or unconscious, capable of swallowing Holy Communion or not.

d. Whether the person has been a practical Catholic, which may be indicated by mentioning

when the Sacraments were last received, whether there is any marriage problem, etc.

e. Whether the sick person has been attended in the same illness by another priest, and by what priest, and whether the priest actually administered the Sacraments.

f. Whether a doctor has been called, and if so, what is his opinion.

7. When a person accompanies or chauffeurs a priest to a sick-call, and he is carrying the Blessed Sacrament, there should be no conversation on the way except that which is absolutely necessary. A Catholic who meets a priest carrying the Blessed Sacrament to the sick should not speak but should bow his head reverently and say inwardly: "O Sacrament Most Holy, O Sacrament Divine, all

praise and all thanksgiving be every moment Thine."

8. It should be remarked that not only in danger of death should a priest be called to attend a sick person. Anyone who is confined to bed for a long period of time has a right to receive the Sacraments at least now and then, even though there be no danger of death whatsoever. Sometimes families whose members are in the habit of receiving Communion often when they are well, will let months pass by without thinking of calling the priest to give Communion to one of their number who is confined to bed all during that time. When illness or confinement drags on, a priest should be notified and asked to bring Communion at a convenient time.

9. In the case of non-Catholics who are ill in one's home, the

priest should be called if they signify any desire to know more about the Catholic religion. In the case of fallen-away Catholics, even though they express no desire to see a priest, it would be well to tell a priest about their condition and let him judge how and when to approach them in an effort to win back their souls.

10. In the matter of calling a priest, there should be no hesitation on the ground that it may disturb the sick person or make him think that he is dying, or frighten him into a worse condition. The greatest comfort a sick person can possess arises from the spiritual ministrations of the Church. Therefore the highest charity possible for those who care for the sick is to see to it that the priest is called in good time.

II. Preparing for the Arrival of the Priest

1. As soon as the priest is to be called, the room of the sick person should be tidied up, if need be, and made, in so far as possible, a fitting temporary habitation for the Eucharistic Savior Whom the priest will most likely bring. Also the sick person should be made neat and comfortable; the face and hands washed, the hair neatly arranged, etc. The bed linen should be clean and smooth, and if possible, a clean coverlet should be placed over the bed.

2. If the priest is to bring Holy Communion, the following articles are to be provided and arranged in the sick room. Every family should have these articles in a familiar place at all times, and not wait until sickness suddenly comes

to have to go looking for them or borrowing them.

a. a table or a stand or a dresser with a clean white cover. When the priest is coming, all objects, such as books, ornaments, etc., except the following, should be removed from the table.

b. a crucifix, standing to the rear and in the center of the table.

c. two blessed candles in candle-sticks, one on each side of the crucifix.

d. a vessel of some kind with holy water, placed at the side of the table.

e. a clean white napkin, to be used as a Communion cloth for the sick person. One of the attendants may spread this under the chin of the sick person just before Communion.

f. a glass of water and a teaspoon.

3. On the walls of the room should be one or the other religious picture, and a crucifix within sight of the sick person. It is fitting that all worldly pictures be removed.

4. If the priest is to give the Sacrament of Extreme Unction, there should be added to the other articles on the Communion table a small plate with clean cotton and a little salt; also a small towel and a small open dish containing a little water.

5. If the sick person is to make a Confession, a chair should be placed near the head of the bed in such a way that the priest will be looking toward the foot of the bed and not into the face of the penitent.

6. The sick person should be told beforehand that the priest will soon arrive, and urged to prepare

for whatever Sacraments are to be received. It often happens that a priest finds that very little thought has been given to the disposition of the soul of the sick person for the reception of the Sacraments. The relatives should take care of this, and if the sick person cannot pray alone, they should read a few short appropriate prayers slowly and devoutly for him.

7. When Holy Communion is to be received in any danger of death the sick person is not obliged to be fasting, nor does it matter at what time of day or night the Sacrament is received.

III. The Priest in the Home

1. When the priest arrives at the house, he should be met at the door by a member of the family carrying a lighted blessed candle.

No ordinary greetings are to be exchanged; instead, the one carrying the candle should make a genuflection to the Blessed Sacrament as the priest enters, and then silently lead the way to the sick room. If it be necessary to say anything regarding the condition of the patient, it should be done in a low tone of voice.

2. On reaching the sick room, the attendant should place the candle in its candlestick and then kneel facing the Blessed Sacrament, remaining there till the priest has finished the first blessing and prayers. Then, if the sick person is to go to confession, all are to leave the room, but to remain within reach of a sign from the priest to return for the Communion of the sick, when they should kneel about the bed.

3. Only grave reasons should

be permitted to hinder any member of the household from being present when Communion is given to the sick, and even the children and babes in arms should be there. The sick room is a chapel or church while the priest is there with the Blessed Sacrament, and every member of the family should be on hand to welcome the Lord into their own home. It is well to train the children who have reached the age of reason to prepare the sick room for the priest and to meet him at the door with the blessed candles, that they may form a tiny procession to the sick room. Lessons of faith and devotion are thus inculcated that remain indelibly.

4. If any members of the family know the **Confiteor**, they should recite it for the priest at the proper time in the Communion service.

5. If the sick person is to be anointed, one member of the family should assist the priest in the following ways:

a. If the room is dark, hold the candle in such a way that he can read from his ritual.

b. When the priest is anointing the hands of the sick person, begin to uncover the feet modestly so that he may anoint them next. After the anointing, cover the feet and then kneel down.

6. When the priest has given the last blessing, he should be accompanied to the door. If he is to give Communion elsewhere, and therefore still carries the Blessed Sacrament, he will bless the family in the sick room with the Sacred Host in the pyx as at Benediction in the church. Then he should not be spoken to as he departs, but he should be accompanied to

the door by someone carrying the lighted candle.

7. After the departure of the priest, someone should remain with the sick person for a short time to help him make an appropriate thanksgiving. This is best done by slowly reading thanksgiving prayers from a prayerbook, or reciting them from memory. For some time there should be no loud conversation in the house, and food should not be given to the sick person for several minutes after the departure of the priest, because the Body and Blood of Christ may remain for some time.

8. The water, salt, cotton and whatever else was used by the priest in purifying his fingers, should be thrown into the fire.

IV. Preparation for Death

1. There is much that relatives can do to prepare a soul for a holy and happy death. They should not permit unreasonable sorrow, and unwillingness to face the thought of the death of a loved one, to prevent them from doing all in their power to dispose the soul for its meeting with its Maker. Apart from calling the priest in good time, the following services should also be rendered.

a. A person in his last illness should be assisted in saying his morning and evening prayers. An act of faith, hope, love and contrition should be made with him every morning and evening.

b. From time to time during the day, a few inspiring thoughts should be suggested, such as: how much the Saviour suffered for our

sins; how easy it is to shorten one's Purgatory by resignation during sickness; how eager the Blessed Mother is to help and comfort all who call on her name.

c. A little pious reading during the course of the day, from the Imitation of Christ or from one of the Gospels, or from some other spiritual book, will soothe the patient's mind and awaken holy affections.

d. In periods of special distress or pain, acts of resignation to God's will should be recited slowly for the patient; the crucifix should be held before him or placed in his hand, and a short act of contrition should be repeated several times.

e. If the sick person has been invested in the scapular or the Miraculous Medal, the attendant should see that they are worn during the last illness. Sometimes it

happens that just when the graces and blessings gained through these articles of devotion are needed most, they are lost because the articles are laid aside.

2. When the death-agony begins, it is not always possible to have the priest at hand to recite the official prayers for the dying. Sometimes, too, the death-agony continues for a long time, and though the priest comes and gives the blessings and recites the prayers, he cannot remain until the actual death occurs. Therefore the family of the dying person should be well prepared to assist the soul in its last hour, when the devil may make a final effort to win it for himself.

3. One member of the family should continue to recite, near the ear of the dying person, some of the following ejaculatory prayers.

They should be said slowly and distinctly, and should be repeated even when the person appears to be unconscious, because there are times when the sense of hearing remains alert even though all other appearances of consciousness are lacking.

a. I believe in Thee, my God; I hope in Thee; I love Thee, my God and my All.

b. Jesus, pardon all my sins. I am sorry that I ever offended Thee because Thou are so loving and good.

c. My Jesus, I resign myself entirely to Thee: I accept death for my sins, because it is Thy Holy Will.

d. By the precious Blood which Thou didst shed for me, O Jesus, save me.

e. I thank Thee, O my Jesus, for all the graces Thou hast be-

stowed on me. I thank Thee for the grace of dying in the bosom of Thy holy Church and in Thy friendship and love.

f. Jesus, Mary, and Joseph, I give you my heart and my soul. Jesus, Mary and Joseph, be with me in my last hour. Jesus, Mary and Joseph, may I breathe forth my soul to you in peace.

g. O Mother of Mercy, behold my misery and have pity on me.

h. O Comforter of the afflicted, console me in my affliction.

i. O purest Mary, O sweetest Mary, O Blessed Lady, help me in this hour of trial.

4. During the agony, the entire family should be present in the sick room, kneeling about the bed. If the patient appears to be unconscious, the rosary should be recited by all, meditating on the sorrowful mysteries.

5. If possible, when the end actually is at hand, one of the attendants should hold a blessed candle in the hand of the dying person, and present the crucifix to be kissed for the last time.

6. When it becomes evident that death has taken place, the following prayers should be recited, either with one member of the family leading and the rest answering, or all reciting them together:

C o m e to his (her) assistance, all ye saints of God: meet him (her), all ye angels of the Lord: receiving his (her) soul; presenting it in the sight of the Most High.

V. May Christ who has called thee receive thee, and the angels conduct thee into the bosom of Abraham.

R. Receiving his (her) soul.

V. Eternal rest grant unto him

(her), O Lord.

R. And let perpetual light shine upon him (her).

Presenting it in the sight of the Most High.

Lord, have mercy on us.

Christ, have mercy on us.

Lord, have mercy on us.

Our Father, etc.

And lead us not into temptation.

But deliver us from evil.

Eternal rest grant unto him (her),

O Lord.

And let perpetual light shine upon him (her).

From the gates of hell.

Deliver his (her) soul, O Lord.

O Lord, hear my prayer

And let my cry come unto Thee.

Let us Pray

To Thee, O Lord, we commend the soul of Thy servant (name), that

being dead to this world, he (she)
may live to Thee, and whatsoever
sins he (she) has committed
through human frailty, we beseech
Thee in Thy goodness mercifully
to pardon, through Christ our Lord.
Amen.

EVERY SHUT-IN WILL APPRECIATE
BLESSINGS IN ILLNESS

by Rev. D. F. Miller, C.S.S.R.

●

A 96 page pamphlet, in large clear type, made up of 55 short, pointed inspirational articles on topics of interest to every shut-in.

Some of the titles are: "On the Thought of Angels," "On Relaxing," "On Laughter," "On Loneliness in Illness," "On Being a Burden," "On the Right to Seek Health," etc.

Recommended to doctors, priests and nurses, as well as to sick persons themselves.

●

25 cents each \$20.00 a hundred

