

ADMINISTERING TO THE SICK WITH GENERAL GUIDELINES

The Purpose of Administration:

Administration to the sick is a divine ordinance. It is the calling of one or more elders who, in turn, will anoint the forehead with oil and approach God on your behalf for a physical as well as a spiritual blessing. This ordinance for the relief and cure of physical, mental, and spiritual illness and suffering was practiced in the times of Christ and the apostles (Mark 16:19; Luke 4:40; Acts 28:8; James 5:13-15). It was taught and practiced in the Book of Mormon days by the Nephites (1 Nephi 3:85; 1 Nephi 1:6; Mosiah 1:98). In the latter day we are commanded to teach and practice this ordinance (D&C 42:12,13).

[Sec 42:12d] And the elders of the church, two or more, shall be called, and shall pray for, and lay their hands upon them in my name; and if they die, they shall die unto me, and if they live, they shall live unto me.

[Sec 42:12e] Thou shalt live together in love, insomuch that thou shalt weep for the loss of them that die, and more especially for those that have not hope of a glorious resurrection.

[Sec 42:12f] And it shall come to pass that those that die in me shall not taste of death, for it shall be sweet unto them; and they that die not in me, woe unto them, for their death is bitter.

[Sec 42:13a-b] And again, it shall come to pass, that he that has faith in me to be healed, and is not appointed unto death, shall be healed; he who has faith to see shall see; he who has faith to hear shall hear, the lame who have faith to leap shall leap; and they who have not faith to do these things, but believe in me, have power to become my sons; and inasmuch as they break not my laws, thou shalt bear their infirmities.

Calling the Elders:

The responsibility for calling the elders rests upon the one needing or desiring the administration.

It is a personal responsibility, and unless thus requested, it is doubtful if proper preparation has been made for the experience (James 5:14). Of course, this situation is altered in the case of a child or an individual who is not conscious.

Number of Elders:

Only the Melchisedec priesthood may administer to the sick (General Conference Resolution, No. 132). James states: “Let *him* call for the *elders*” and in the majority of cases this advice should be followed. The Lord has blessed only one elder and will continue to bless him when only one elder can be present; but it is wise for us to observe the rule given by God, which is re-emphasized in Doctrine and Covenants 42:12: “*And the elders of the church, two or more, shall be called and shall pray for, and lay their hands upon them in my name; and if they die, they shall die unto me, and if they live, they shall live unto me.*”

Prayers:

The prayer offered should certainly be in faith believing; and the essence of that faith is “*Thy will be done.*” Faith is the basic principle, and where it does not exist there will be little, if any, desired results (D&C 42:13). Before entering into this rite, a preparation must be made by the elders as well as by the sick person. As ministers we must always remember that this rite of healing is a spiritual function, so we must try to create a spiritual atmosphere.

Note: The physical act of administration to the sick is twofold. One is the anointing of the forehead with oil; the other is confirmation of the anointing. Both acts involve the laying on of hands and the prayer of faith. The anointing elder should use the oil of the confirming elder. The confirming elder opens the bottle or vial and hands it to the anointing elder. When the anointing elder is finished, the confirming elder takes the bottle or vial and replaces the cap. This enables the anointing elder to place both hands **lightly** on the head of the one requesting the administration, and offer the brief prayer of anointing.

The anointing prayer:

The prayer of anointing should be a **BRIEF** supplication, concerned only with the invoking of God's Spirit and asking His presence, and a direct charge to the person being administered to for the exercising of our united faith. The elder should not, however, alternate from prayer to exhortation and back again. Beware of taking the whole of the administration into your hands, thus leaving your brother at a loss for something more for which to pray.

The Confirmation Prayer:

The prayer of confirmation should also be a **BRIEF** prayer and to the point. Knowing the needs of the person, present his case to the Lord in simple, clear terms and leave him in God's hands. Avoid open or veiled promises of healing. Occasionally some men, unwisely moved by their own sympathy, have yielded to the impulse to promise recovery. **Such a promise is not a part of the administration.** The Lord has given us warning which is certainly applicable today: "Prophesying over them that are sick in administering to them has been a fruitful source of trouble among my people." D&C 125:15.

[Sec 125:15a] Prophesying over them that are sick in administering to them has been a fruitful source of trouble among my people.

[Sec 125:15b] They must observe that this they are not required to do except there be a direct manifestation of the Spirit which may direct it.

[Sec 125:15c] Pray over the sick, anoint them with oil, as commanded in the law, and **leave them in my hands, that the Spirit may deal with them according to my wisdom.**

[Sec 125:15d] Many spiritual manifestations have been had. Some of these have been false, and under the operation of the law which I gave many, many years ago, those who make these false presentations are not to be feared among my people.

[Sec 125:15e] They are not justified in permitting their human sympathies to overcome that which has been written in my Scriptures. The spirit of the prophets is subject to the prophets.

Note: [James 5:15] And the prayer of faith shall save the sick, and the Lord shall raise him up; and if he have committed sins, they shall be forgiven him. The elder should take care that his emotions do not cause him to make statements of forgiveness unless moved by the Holy Spirit to do so.

Use of Oil:

Olive oil is used. While there is no specific command to consecrate oil for this purpose, it is reasonable and suitable that such be done as one would bless or set apart any other agent used consistently for sacred purposes, such as the bread and wine of the Holy Communion.

Be sure to anoint with oil in the name of the Lord Jesus Christ.

Sometimes requests are made to anoint affected parts of the body. This is NOT advisable and MUST NOT be done.

The elder should anoint the head only (forehead preferably), for the anointing is not for medical purposes but is a symbol of the anointing of the Spirit of God. One drop of oil is sufficient, and preferably anointed ON THE FOREHEAD.

Note: Remember, there are times when a person will not have an opportunity for shampoo for days or weeks and a large amount of oil in the hair can become rancid with an unpleasant smell and very disconcerting and messy.

The regular practice of the church is to have one elder, and sometimes two, consecrate the oil to be used in administration to the sick. One elder does it if he is alone. If there are more elders present, two perform this service. The container is opened, or the cap is removed for this blessing. One elder serves as spokesman, generally offering a prayer to God that he will bless it for the purposes of healing of the sick. There is no prescribed wording for this prayer. The elder prays briefly and sincerely as he is led to pray. After the prayer, the cap is replaced on the container. Oil is often blessed at the close of prayer meetings or privately in the home.

Use of the Hands:

Hands should rest lightly upon the head. Be careful not to lean on, cover the eyes, nose, mouth, or face of the person. This is a little point to us, but with a sick person it may seem to be an insurmountable object.

Length of stay:

How long we stay with the patient is governed by the situation in each case. It is unwise to stay long. It is much better to make more and shorter visits than one long, tiring experience. **Do not sandwich the rite of administration in between periods of small talk or secular conversation. Make the whole visit a spiritual experience.**

Following the administration, when the person has been assured that you will continue to remember him in your prayers, leave him to meditate upon this recent spiritual experience, and then remember him in your prayers.

Favorite Remedies:

We must not encroach upon the rights of the physician who is the only one to prescribe. The law of the land is very severe on any but doctors giving prescriptions. Always remember he is the specialist of things medical---you, the minister, the specialist in the ways of the Spirit.

Cleanliness:

Both the clothing, person, and mind of the elder should be scrupulously clean. We seldom think we are or could be the offender, but before going to administer use a toothbrush and a good mouthwash. It is always wise to wash our hands well before and after an administration.

Contagious Disease:

In cases of contagious diseases, the elder should use special care that he not become a carrier and spread the disease. In such cases, permission of the doctor in charge should be obtained before entering the sickroom. Proper precautions should be taken afterward as is suggested by the doctor.

Administering to Nonmembers:

Sharing this ordinance with our nonmember friends is certainly worthwhile and a fine opportunity for us to give some good ministry, provided our nonmember friend understands our belief and practices. He, too, should abide by the instruction found in James 5:14-15.

[James 5:14-15] Is any sick among you? let him call for the elders of the church; and let them pray over him, anointing him with oil in the name of the Lord; And the prayer of faith shall save the sick, and the Lord shall raise him up; and if he have committed sins, they shall be forgiven him.

Rules for Visiting:

Discipline your emotions. In ministering to the sick, we can change the whole spiritual and emotional tone of a sickroom. We must never show alarm, sorrow, or surprise; lest we upset the patient. We must not be surprised at anything we see, hear, or smell. Always be sincere. Show sympathy—not pity. Sympathy supports—pity humiliates.

Co-operate with nurses and doctors. Inasmuch as is possible, observe the visiting hours of the institution you are visiting. Never argue with the nurse if she refuses to let you see the patient—be courteous and check with the supervisor or physician, explaining your interest and reason for association. If perchance you are requested by a doctor or a nurse to leave the bedside of one ill, please comply immediately and graciously, knowing that the request is made for some legitimate reason in the interest of the patient.

A minister must never take part in the treatment of a patient. Of course, if a suggestion is given to you by the attending physician or nurse, you should be glad to follow through. It is not advisable to discuss the doctor or his treatment. Remember, he is the specialist in medicine; you, the minister, are a specialist in things of the Spirit. It is well for us to imitate the reticence of the nurse if the patient asks regarding the nature of his sickness.

Try to appreciate and understand sick people. If we are to be successful and not blunder, the conditions of the sickroom must be understood.

Stand or sit within the patient's normal and comfortable range of vision.

Don't talk loudly or laugh boisterously. But it's just as bad to whisper outside the sickroom door.

Be careful not to kick, bump, or lean against the bed, or lay hats, coats, or parcels on it.

Avoid weighty or argumentative discussion.

Do not say or do anything to undermine the confidence the patient has in his doctor.

Avoid telling of someone else you know who had this same ailment and died from it.

Don't spread wild, inaccurate, unfounded rumors about the patient's condition which may get back to him and cause unnecessary worry or concern.

The Priesthood Member in a Sickroom:

Doctor Russell Dick makes a good statement: “A minister is God’s intern.” As ministers, let us develop some knowledge of psychiatry, physiology, and the therapeutic value of religion. As ministers, we can be of unusual assistance in working with the hospital staff in the rehabilitation of patients.

Conclusion:

Healing of the sick is one of the most comforting and fruitful ordinances of the Church, and for that reason it should be highly regarded and used with restraint and understanding, which alone can maintain dignity in the exercise of spiritual privileges.

This article is referenced on many of the guidelines found in:

**The Priesthood Manual
Administering to the Sick
Chapter Eight Pg. 45
Herald House Revised 1957**