

Guidelines on Sacraments and Pastoral Care

*Working Group on Infectious Disease Protocols for Sacraments & Pastoral Care*¹

Part II - Anointing of the Sick

Sacramental principles:

The sacrament of anointing is only strictly necessary when a person is unable to manifest sorrow for his or her sins (e.g., the person is unconscious and so cannot make a confession), and is in need of forgiveness. In such cases, the sacrament of anointing forgives mortal sin, presuming -- as one should in the normal case -- that the person desired to receive the sacraments before death. (The person remains bound to make a complete confession at the next opportunity, should one arise.) For this reason, when called to the bedside of a person who is unconscious and dying, priests should make every effort to confer the sacrament of anointing, because it could be necessary for the person's salvation.

In order for an anointing to be valid, the priest must be physically present to the penitent in person. The priest himself must both pronounce the entirety of the sacramental formula and anoint the recipient's body with the oil of the sick. (The sacramental formula is: "Through this holy anointing may the Lord in his love and mercy help you with the grace of the Holy Spirit. May the Lord who frees you from sin save you and raise you up.") The priest may not delegate the act of anointing to another person.

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A clarification on anointing and confession: The case of unconscious dying persons poses special challenges for the administration of the sacraments.

In the sacrament of confession, the priest's absolution forgives sins *only if conjoined to a penitent's act of repentance or turning away from his or her sins, manifested by an exterior act*. This is required for validity. (There is widespread misunderstanding on this point. Even in the case of general absolution – that is, absolution given to many people at once, without individual confession of specific sins – penitents must each make an act of repentance with an exterior sign in order for the absolution to remit their sins.)

Therefore, when a person is near death and is unconscious or largely unresponsive, a priest may speak to the person, asking him or her to make some sign of sorrow (which need not be verbal) for the person's sins. If the person does so, the priest should then recite the formula of absolution over the person. This is called a "generic confession," and it is permitted in cases like this, where the person is in danger of death and it is impossible to confess sins by species and number due to inability to speak.

In contrast, the sacramental structure of the anointing of the sick does not require its recipient to make an external confession. When a seriously sick person is unconscious or unable to respond, therefore, it is very important to confer the sacrament of anointing. The anointing remits the sins of a person now unable to make an act of repentance, as long as the person desired to be forgiven or had some desire for the sacraments before losing consciousness. The priest should presume that every Catholic had such a disposition and so should anoint an unconscious Catholic who is dying unless there is clear evidence that the person did not want to receive the sacraments.

If the person is not in a state of grace and is able to confess, however, the person is bound to do so. The Rite of Anointing provides for this to take place at the beginning of the rite.

Guidelines for Administering the Anointing of the Sick:

- A. If a person has no COVID-19 symptoms and no suspicion of close contact with COVID+ individual, but is otherwise a candidate for anointing due to age or another sickness (e.g., someone with an advanced cancer diagnosis, someone about to undergo a risky surgery for a serious medical condition, or someone hospitalized for a non-COVID related condition):**

In general, follow the guidelines and mandates of the local jurisdiction regarding limits to the number of people gathering at the same time or “shelter-in-place” orders. In any case, gatherings should be no more than recommended by civil authorities (at the present writing, 10 people per recommendations by the federal government and CDC -- in the future, larger gatherings may be permitted).

Since anointing requires the priest to come within 6 feet of the person to be anointed (“the recipient”), at least for a few moments, additional precautions are appropriate to minimize the risk of possible infection from priest-to-recipient and vice versa. (NB: In this section, we are treating a case where neither priest nor recipient shows signs of COVID-19 infection and has not been in close contact with a COVID+ individual. It is nonetheless possible that one or the other could be asymptomatic or pre-symptomatic.)

If recommended by national or local public health authorities, the priest and recipient should wear face coverings. (At present, the CDC recommends wearing a cloth face covering. An N95 respirator or surgical mask is not recommended, [per CDC guidance](#) and [FDA recommendations](#).)

- The priest should remain at least 6 feet from the recipient for the entirety of the Rite of Anointing, except for the actual moment of anointing.
- If the anointing is taking place outside of church (e.g., in a patient’s home), the priest should avoid contact with surfaces in the home as much as possible.
- If in a private home, the priest should select a location more than 6 feet from the recipient where he can set out the items he will use during the anointing (described below). He should ensure that the surface is clean and has recently been disinfected.
- In a location more than 6 feet from the recipient, he should set out:
 - the oil stock containing the Oil of the Sick;

- a cotton swab;
- a paper bag (like a grocery bag with handles, or a brown paper lunch sack), which he should open fully and leave standing up, open;
- alcohol-based hand sanitizing gel.
- Before beginning the Rite of Anointing, the priest should perform hand hygiene (washing hands for 20 seconds with soap and water, or using an alcohol-based gel).
- The priest should then conduct the Rite of Anointing as normal, but should omit the laying-on of hands.
- When the moment comes for the anointing, the priest should use an instrument (a cotton swab) for the actual anointing, as follows. (This is permitted by the current rubrics for the Rite of Anointing.)
 - Keeping a 6-foot distance from the recipient, he should dip the tip of the swab one time in the holy oil. He should then re-close the oil stock.
 - He should approach the person and anoint the person on the forehead alone (omitting the anointing of the hands), while speaking the full sacramental formula. He should avoid contact with the recipient, using only the tip of the cotton swab to touch the recipient's forehead.
 - He should then return to a 6-foot distance from the person. He should drop the cotton swab into the open paper sack, without touching the sack with his hands.
 - He should immediately perform hand hygiene, using hand sanitizer.
 - He should then fold the bag closed several times, so that the cotton swab remains securely in the interior of the sack. (If desired, he could later tape the paper bag closed.) Later, the priest will burn the paper bag with the cotton swab inside it.
- The priest then concludes the Rite of Anointing as usual.
- The priest should take the folded paper bag with him. At a later point, the priest should burn it with the cotton swab inside it. He should not re-open or re-use the bag.

- He should sanitize his hands after the encounter (and, if in a private home, again after he exits the home).

B. If a person is confirmed or suspected COVID+, is conscious, and is self-isolating at home:

We presume that appropriate PPE will not be available. Hospital level PPE is not recommended in homes/outside of the hospital as proper use of PPE requires training and appropriate methods of disposal (per [CDC](#) and [WHO](#) guidance).

A sick person should not be brought to the church, church offices, or rectory to be anointed.

The sacrament of anointing is only strictly necessary when a person is unable to manifest sorrow for his or her sins (e.g., the person is unconscious and so cannot make a confession), and is in need of forgiveness.

If a suspected or confirmed COVID+ patient is self-isolating at home, and is conscious and thus able to make an auricular confession, the priest should hear the person's confession, following the guidelines we have provided for such cases (see Part I - Confession). In such a case, **we recommend postponing the anointing of a suspected or confirmed COVID patient**, since full PPE will not be available in a home setting, and the person will have already been restored to sanctifying grace by the sacrament of confession.

NB: Even if a conscious person is unable to articulate sins by species and number due to some extraordinary circumstance (e.g., inability to speak), the priest may pose questions to the penitent or may simply ask the penitent if he is sorry for his sins (a "generic confession"). If a penitent is able to make some sign indicating repentance, the sacramental absolution will validly remit the penitent's sins. As Part I of these guidelines makes clear, such a confession can take place while maintaining a 6-foot distance from the patient, and therefore without hospital-level PPE.

C. If a person is confirmed or suspected COVID+, is at home or in a nursing facility, is unconscious, and is in imminent danger of death:

We presume that appropriate PPE will not be available. Hospital level PPE is not recommended in homes/outside of the hospital as proper use of PPE requires training and appropriate methods of disposal (per [CDC](#) and [WHO](#) guidance).

We presume that most COVID+ patients who are unconscious (or otherwise unable to make a confession) will be hospitalized.

If, however, for a grave reason it is necessary for an unconscious COVID+ patient to be anointed at home or in a nursing facility (e.g., the person is in imminent danger of death, perhaps awaiting the arrival of emergency medical assistance), the priest should follow the steps outlined below.

- Before going to the home, the priest should prepare the following items:
 - His small stock of the oil of the sick, and a small “sick call” stole.
 - A printout of Appendix A (a one-page reproduction of the rite of anointing in a hospital or institution), which the priest will leave behind in the patient’s room. The priest should **not** bring his Pastoral Care of the Sick book into the home.²
 - Hand sanitizer, gloves, and a surgical mask (if available). An N95 respirator is not necessary (see [Technical Guidance](#) from the WHO).
 - A cotton swab, and a paper bag (like a grocery bag with handles, or a brown paper lunch sack).
- **Before entering the home**, the priest must don a surgical mask, and should then place his short “sick call” confessional stole around his neck.
 - NB: A patient who is having trouble breathing or who is unconscious should not wear a face covering or mask. (See [CDC guidance on face coverings and masks](#).)
- The priest should not bring anything into the home with him except for what is absolutely necessary. For example, a priest may not bring into the home a ritual book, a mobile phone, a holy card, or any other item. He may not reach into his pockets for any item whatsoever. He may not bring anything whatsoever out of the home, except as provided below.

² It is important that the priest not bring anything out of the patient’s room without the strictest of precautions, as provided in these guidelines.

- The priest should avoid touching surfaces in the home as much as possible, and should avoid all contact between his clothing and the items in the home as much as possible. He should take care not to touch his eyes, nose or mouth while inside the home and wearing protective gloves.
- *Social distancing*: The priest should limit the number of people he comes into contact with during his visit in the home, always respecting the CDC-recommended safe distance of 6 feet.
- The priest should select a location outside the patient's room where he can set out the items he will use during the anointing (described below). He should ensure that the surface is clean and has recently been disinfected.
- On this disinfected surface outside the patient's room, he should set out:
 - the oil stock containing the Oil of the Sick;
 - a cotton swab;
 - a paper bag (like a grocery bag with handles, or a brown paper lunch sack), which he should open fully and leave standing up, open;
 - alcohol-based hand sanitizing gel.
- Before beginning the Rite of Anointing, the priest should perform hand hygiene (washing hands for 20 seconds with soap and water, or using an alcohol-based gel). He should then put on gloves.
- The priest should dip the tip of the cotton swab one time in the holy oil. He should then re-close the oil stock and place it in his pocket.
- Taking the swab in his dominant hand, and a printout of Appendix A (the Rite of Anointing) in his other hand, he should enter the patient's room. He should stand at least 6 feet from the patient.
- He should conduct the Rite of Anointing as provided in Appendix A, remaining 6 feet from the patient until the moment of anointing. He should omit the laying-on of hands.
 - When the moment comes for the anointing, the priest should use the cotton swab to anoint, as follows. (The use of a cotton swab as an instrument of anointing is permitted by the current rubrics for the Rite of Anointing.)
 - He should approach the person and anoint the person on the forehead alone (omitting the anointing of the hands), while

speaking the full sacramental formula. He should avoid contact with the recipient, using only the tip of the cotton swab to touch the recipient's forehead.

- He should then impart the Apostolic Pardon, as indicated in Appendix A.
 - He should then walk out of the room to the open paper bag, taking care not to touch anything whatsoever. He should drop the cotton swab into the open paper sack, without touching the sack with his hands.
 - He should then re-enter the room and, remaining 6 feet from the patient, recite the Lord's Prayer, the Concluding Prayer, and impart the Concluding Blessing. This completes the Rite of Anointing. He should leave the page containing Appendix A in the patient's room.
 - He should exit the room and remove his gloves, turning them inside-out as he does so and discarding them as soon as possible. The gloves can be placed in the trash in the patient's home. A guide for removing gloves is available here ([CDC - How to Remove Gloves](#)).
 - He should immediately perform hand hygiene, using hand sanitizer.
 - He should then fold the bag closed several times, so that the cotton swab remains securely in the interior of the sack. (If desired, he could later tape the paper bag closed.)
- The priest should take the folded paper bag with him. At a later point, the priest should burn it with the cotton swab inside it. He should not re-open or re-use the bag.
- After exiting the home, he should perform hand hygiene. He should then remove his mask, and again perform hand hygiene. (For example, he might leave a small bottle of hand sanitizer near his car, which he would use after the visit and before touching his car keys, mobile phone, car door, or other items.) He should avoid touching his face, nose, or eyes before washing his hands.
- As possible, the priest should wash the exterior of the oil stock with soap and water. If possible, he could also discard the oil remaining in the stock (normally by burning the cotton ball soaked in the oil), wash the interior, and replenish with oil of the sick.

D. If a person is confirmed or suspected COVID+, and is hospitalized:

If properly equipped with PPE (as guided by hospital personnel and protocols), a priest may enter the patient's room, may stand or sit at the patient's bedside, and even may touch the patient as appropriate. Many hospitals recognize the essential role of the chaplain or chaplain-equivalent in the necessary care of the patient. A hospital nurse can show the priest the proper way to don and doff appropriate PPE. The priest should follow hospital guidance for infection control procedures. He may need to pre-clear with hospital staff the procedure he will use (described below) to remove the cotton swab used to anoint the patient from the patient's room, for proper sacramental disposal by burning.

- Before going to the hospital, the priest should prepare the following items:
 - His small stock of the oil of the sick, and a small “sick call” stole.
 - A printout of Appendix A (a one-page reproduction of the rite of anointing in a hospital or institution), which the priest will leave behind in the patient's room. The priest should **not** bring his Pastoral Care of the Sick book into the patient's room.³
 - A cotton swab, and a paper bag (like a grocery bag with handles, or a brown paper lunch sack).
- The priest should select a location outside the patient's room where he can set out the items he will use during the anointing (described below). He should ensure that the surface is clean and has recently been disinfected.
- On this disinfected surface just outside the patient's room, he should set out
 - the oil stock containing the Oil of the Sick;
 - a cotton swab;
 - a paper bag, which he should open fully and leave standing up, open.
- Before beginning the Rite of Anointing, the priest should perform hand hygiene (washing hands for 20 seconds with soap and water, or using an alcohol-based gel).
- The priest should then dip the tip of the cotton swab one time in the holy oil. He should then re-close the oil stock and place it in his pocket.

³ It is important that the priest not bring anything out of the patient's room without the strictest of precautions, as provided in these guidelines.

- Taking the swab in his dominant hand, and a printout of Appendix A (the Rite of Anointing) in his other hand, he should enter the patient's room.
- If the patient is conscious and time permits, he should offer an opportunity to go to confession before anointing the patient. Normally this should be done before the anointing or as part of the Rite itself (after the opening prayer - see Rite of Anointing in a Hospital or Institution, no. 155). If the patient makes a confession, the priest should impart the Apostolic Pardon immediately after the sacramental absolution and before the anointing.
- He should then conduct the Rite of Anointing as provided in Appendix A.
 - When the moment comes for the anointing, the priest should use the cotton swab to anoint, as follows. (The use of a cotton swab as an instrument of anointing is permitted by the current rubrics for the Rite of Anointing.)
 - He should approach the person and anoint the person on the forehead alone (omitting the anointing of the hands), while speaking the full sacramental formula.
 - If not already given, he should then impart the Apostolic Pardon, as indicated in Appendix A.
 - He should then walk to the door of the room to the open paper bag, taking care not to touch anything whatsoever. He should drop the cotton swab into the open paper sack, without touching the sack with his hands.
 - He should then re-enter the room and recite the Lord's Prayer, the Concluding Prayer, and impart the Concluding Blessing. This completes the Rite of Anointing. He should leave the page containing Appendix A in the patient's room.
 - He should exit the room and doff his PPE, following the instructions of hospital personnel. He should then perform hand hygiene.
 - He should then fold the bag closed several times, so that the cotton swab remains securely in the interior of the sack. (If desired, he could later tape the paper bag closed.)
- The priest should take the folded paper bag with him. At a later point, the priest should burn it with the cotton swab inside it. He should not re-open or re-use the bag.

- As possible, the priest should wash the exterior of the oil stock with soap and water. If possible, he could also discard the oil remaining in the stock (normally by burning the cotton ball soaked in the oil), wash the interior, and replenish with oil of the sick.

Appendix A
Anointing a COVID+ person

(from the Rite of Anointing in a Hospital or Institution)

[Prior to entering the patient's room, the priest dips a cotton swab in blessed oil. Entering the room holding the swab and maintaining a 6-foot distance, he says:]

The peace of the Lord be with you always.

R/. And with your spirit.

Lord God, you have said to us through your apostle James: "Are there people sick among you? Let them send for the priests of the Church, and let the priests pray over them, anointing them with oil in the name of the Lord. The prayer of faith will save the sick persons, and the Lord will raise them up. If they have committed any sins, their sins will be forgiven them."

Lord, we have gathered here in your name and we ask you to be among us, to watch over our brother/sister N. We ask this with confidence, for you live and reign for ever and ever. R/. Amen.

[Laying on of Hands - OMITTED unless the priest is wearing hospital-level PPE]

Anointing

The priest anoints the forehead of the sick person with the cotton swab, saying:

THROUGH THIS HOLY ANOINTING MAY THE LORD IN HIS LOVE AND MERCY HELP YOU WITH THE GRACE OF THE HOLY SPIRIT. MAY THE LORD WHO FREES YOU FROM SIN SAVE YOU AND RAISE YOU UP. R/. Amen.

Apostolic Pardon

Through the holy mysteries of our redemption, may almighty God release you from all punishments in this life and in the life to come. May he open to

you the gates of paradise and welcome you to everlasting joy. R/. Amen.

[The priest moves to the door and places the swab in the open paper bag without touching it. He returns, maintaining a 6-foot distance.]

The Lord's Prayer

Now let us pray to God as our Lord Jesus Christ taught us: *All say:* Our Father...

Prayer after Anointing

Let us pray.

General:

Lord Jesus Christ, our Redeemer, by the grace of your Holy Spirit cure the weakness of your servant N. Heal his/her sickness and forgive his/her sins; expel all afflictions of mind and body; mercifully restore him/her to full health, and enable him/her to resume his/her former duties, for you are Lord for ever and ever.

R/. Amen.

Or, in extreme or terminal illness:

Lord Jesus Christ, you chose to share our human nature, to redeem all people, and to heal the sick. Look with compassion upon your servant N., whom we have anointed in your name with this holy oil for the healing of his/her body and spirit. Support him/her with your power, comfort him/her with your protection, and give him/her the strength to fight against evil. Since you have given him/her a share in your own passion, help him/her to find hope in suffering, for you are Lord for ever and ever. R/. Amen.

Concluding Blessing

May the blessing of almighty God, the Father, and the Son, + and the Holy Spirit, come upon you and remain with you for ever. R/. Amen.

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