

Case Study: Sikh Patient and Modesty Concerns

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An 18-year-old male presented to the emergency room with a laceration near his groin. During intake, the patient shared with his male nurse that he was a Sikh.

About ten minutes after admitting the patient to a room in the clinic, the nurse returned to perform the initial exam and clean the laceration. The nurse told the patient that the female doctor on staff that day would be in shortly to take a closer look at the wound as it required sutures.

When the nurse was about to exit the room, the patient politely requested that the male nurse perform the examination and suturing instead of the female doctor. The patient further requested that no female providers be in the room while his undergarments were off.

Reflection:

- Could an understanding of the patient's spiritual/religious values and tradition help the nurse to better support him in his treatment? Why or why not?
- What about the Sikh tradition might explain the patient's reservations about removing his undergarment? What is the Sikh-specific name for this undergarment and what does it symbolize?
- Name at least two additional religious traditions where religious concerns around modesty may arise clinically.
- How can the providers best honor this request while providing patient-centered care?

Additional Resources:

Hasnain, M., Connell, K. J., Menon, U., & Tranmer, P. A. (2011). Patient-centered care for Muslim women: provider and patient perspectives. *Journal of Women's Health, 20*(1), 73-83.

Padela, A. I., Gunter, K., Killawi, A., & Heisler, M. (2012). Religious values and healthcare accommodations: voices from the American Muslim community. *Journal of General Internal Medicine, 27*(6), 708-715.

Sambhi, P. S., & Cole, W. O. (1990). Caring for Sikh patients. *Palliative medicine, 4*(3), 229-233.