



Islamic Hospital Guidelines

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Introduction

The concept of Islamic Hospital Consortium (IHC) was first presented in FIMA Council meeting at Beirut by the then FIMA (Federation of Islamic Medical Association) president, Prof. Dr. Mohammad Azhar Khan (Late). The official inauguration took place in Islamabad in 2001 and Prof. Dr. Aly Mishal was appointed as Chairman of this consortium. Later on, a regional IHC of South East Asia was developed under the leadership of Dr. Ishak Mas'ud, Director of Hospital

Pakar Al-Islam, Kuala Lumpur, Malaysia. The main objective of this consortium is to bring all like-minded hospitals under one umbrella and develop systems to make these hospitals as state of the art, sharia compliant, health care providers. Pakistan Islamic Medical Association (PIMA), Prime Foundation and Alkhidmat Foundation have around fifty small and large hospitals in Pakistan. These organizations desired to adopt Islamic hospital concept in their hospitals and had a detailed meeting in November 2015 at Peshawar Medical College, Peshawar. A task group was constituted to prepare guidelines for the hospitals that are willing to adopt this concept. It was also decided to conduct a two days seminar on this concept in March 2016 annexed to PIMA Biennial Convention at Peshawar Medical College. Around 135 nominees of around 50 hospitals across the country attended this seminar. Eminent scholars from five different countries, including Prof. Dr. Aly Mishal and Dr. Ishak Mas'ud, delivered structured lectures on various aspects of this concept. Through this manuscript, we hope to share the guidelines based on the methods employed to implement the concept of 'Islamic Hospital' at member hospitals of IHC. Although, there will always be room for improvement, but those who wish to adopt these guidelines, will find it beneficial, Insha Allah.

Conceptual Framework

Hospital:

Islamic Hospital: An Introduction

Why Islamic Medical Institutions? When you attach the prefix Islamic to a Medical Institution (college or a hospital etc) it immediately raises a question; why? The term Islamic appears to be an unrequired phrase to many because of the basic flaw in the understanding and interpretation of Islam. A secular person may consider Medical Education and Health care to be value neutral without any interference and even relevance to any religion including Islam. The same may be

true with many Muslim professionals. They may believe that religion (Islam) is a personal matter and has no relevance to their professional life. They might consider that practicing certain rituals of Islam (Ibadah) like Salah (Prayers) and Soam (Fasting) etc. may be enough to fulfill their obligations as Muslim. However, others may believe Ibadah is much beyond that and includes all their actions at personal and community level including performing their professional duties. Allah ? says in Quran: I have not created Humans and Jinns except for doing my Ibadah (worship).

If the only purpose of human creation is Ibadah then are we violating Allah's commands by examining patients and even learning Medicine? The answer to this has been explained by Muslim scholars that all human actions are considered Ibadah provided these are in accordance with the basic principles of Islam and are done with the ultimate objective of pleasing Allah . The verse therefore not only clarifies the purpose of creation of human beings but also the scope of their actions. This also clarifies that Ibadah is not limited to its traditional interpretation of certain Islamic rituals as mentioned above. It applies to all our actions including practicing and teaching Medicine. That is why the term Islamic can be attached to all such institutions of Muslims where they want to achieve the objective of gaining the pleasure of Allah through their professional work. It is a paradigm shift.

Islamic Hospitals: Concept & Contemporary

Applicapitals: Concept & Contemporary

Application Islamic Hospitals: Concept and Contemporary Applications

In past Islamic civilization, hospitals were looked upon as health institutions for comprehensive care of the sick, from physical, social and psychospiritual aspects. The main motive for Muslims to establish and operate hospitals (used to be termed Marizistans or Bimaristans) was to serve humanity and alleviate human suffering and misery, as a way to seek the blessings of Allah/ Pious individuals and rulers sought to please their Creator by caring for His creation, in fulfillment of the Ayah And we honored the children of Adam, And the Prophet's saying After the death of the individual, his actions come to an end except in respect of three matters that he leaves behind: sadaqah jariah (a continuous charity), knowledge from which benefit could be derived, and a pious child who makes du'aa (supplication) for him".

Traditionally, hospitals were established by God-fearing, pious Muslim individuals and rulers of Islamic states. The





concept of the WAQF institution was developed very early in Islamic history⁷. It is an endowment system, that provides pious donations, zakat and sadaqat for various charity and welfare aspects of community life, including establishment and maintenance of health institutions in a milieu of spiritual-charity-worship attitudes, inspired by Islamic teachings of grace and welfare for all. Health care in dignity was looked upon as a basic right for all community members. Parallel to that, the HISBAH (interpreted as advocating good and avoiding evil) system was implemented in various aspects of life, including healthcare. This system was the true application of quality standards of modern times. Both WAQF and HISBAH systems were managed by distinguished, pious, knowledgeable and wise persons. The physical structures of Islamic hospitals and their furnishings, especially those established by rulers, were distinct and luxurious. Some of them were similar to elegant palaces^{3,4,8}. No doubt this generosity in establishing and maintaining hospitals was inspired by religious motives of welfare and Ehsan to the needy and destitute, as the glorious Qur'an states: You shall not attend to virtue unless you spend for the welfare of the poor from the choicest part of your wealth.

Early historians described hospitals in major Islamic cities to be as elegant as palaces. They had wide rooms, recreation areas, fresh water supply, baths, pharmacies, masjid, library and lecture halls, and housing for medical trainees and house staff. Men and women were admitted to separate wards, irrespective of race, religion, social status or whether the patient was a local citizen or visitor. Nobody was ever turned away. Patients with medical or surgical conditions, fevers or eye diseases, had separate wards. For the first time in history, Islamic Hospitals maintained medical records of patients that documented aspects of care. A historical account of the Mansouri Hospital in Egypt described all that, and documented that the hospital had a masjid for Muslims and a chapel for Christians. Finances and administration were all shouldered by the WAQF system, the state, pious rulers or individuals. WAQF establishment included properties or businesses designed with arrangements to finance hospital expenses and even to grant some patients sums of money when they leave the hospital. An illustrative model of this concept was a WAQF document in the 12th century Egypt, in which we read: The hospital shall keep all patients, men and women, until they are recovered. Cost of therapy shall be borne by the hospital, whether the people come from afar or near, whether they are residents or foreigners, strong or weak, low or high, rich or poor, employed or unemployed, blind or sighted, physically or mentally ill, learned or illiterate. No conditions of consideration and payment. The entire service is provided through the magnificence of Allah the Most Generous. Moreover, Islamic hospitals were centres of medical

knowledge, research, teaching and training of generations of new medical practitioners. They were medical schools by all standards.

Leaders in medicine and surgery used the existing scientific information of medicine of the time, and added their own observations, experimentations and skills. As for remunerations of physicians, this was generously provided by the WAQF administration, the state or rulers. This included, at various scales, leading physicians as well as trainees. Authentic sources indicate the annual income of Jibrail ibn Bakhtishu, who was the chief of staff at Baghdad's main hospital, as recorded by his own secretary, was 4.9 million dirhams. His son, also a leading physician, lived in a house in Baghdad, that was air-conditioned by ice in summer, and heated by charcoal in winter.

HOSPITAL

AN INTRODUCTION Islamic Hospital Mission, Objectives & Basic Principles

Vision

A Hospital with excellent professional services to the community in accordance with the principles of Islam.

Mission

- To contribute to health care and treatment from an Islamic perspective
- To provide health care services at an affordable cost
- To instill a sense of responsibility and trust in every staff member in the Hospital, and that consider their duty as an Ibadah and Amal e Saleh; To contribute to the society through comprehensive missionary activities, especially in the health education sector, in order to help the community become healthier and well-balanced, and to make the hospital a platform for Dawah.

•Objectives

- To provide an understanding of Islam as a comprehensive way of life.
- To explain the concept of Ibadah (worship) in Islam.
- To create awareness among staff members that their job is an Amanah (trust) from Allah
- To enhance self-esteem and commitment to Islam.
- To work collectively and collaboratively to gain the pleasure of Allah? (Mardhatillah).
- To improve the overall services of the hospital in line with Muslims are the chosen ummah.
- To translate Islam as a 'mercy for all mankind'.



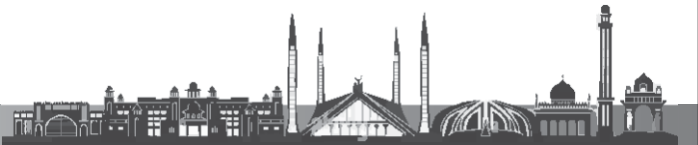
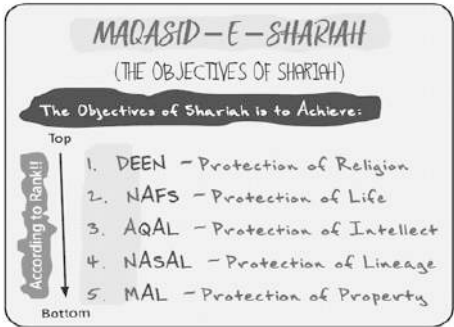
- To become the first choice hospital for the community.
- As part of translating the program of Dawah through modeling in health services.
- Integrating Dawah Program with business and seeking the pleasure of Allah

Basic Principles

1. Excellence: Islam emphasizes on doing a job with excellence. Holy Prophet said, Indeed Allah loves that when one of you does a deed, he should do it with excellence.
2. Fear of Allah: This has been explained in the famous Hadith Jebriel about Islam and Iman and when he asked the Prophet he answered; When you do Ibadah consider that you are seeing Allah (and doing your action in front of him) and if you cannot do that then consider that Allah is seeing you. When a job is done properly due to fear of Law (external control) only, then people try to erode it when they lose the supervision and get a chance. However, when there is fear of Allah (internal control), then a person tries to put all his efforts to complete the desired task irrespective of the supervision and rewards in this world.
3. Responsibility: The prophet said, The one who practices medicine without having (appropriate) knowledge about that he stands answerable (for his action).

Fundamental Guidelines of Islam

Maqasid-i-Shariah: Maqasid-e-Shariah (The purposes of Shariah) serve as a guideline to help the practitioner distinguish whether or not a procedure or practice lies inline with the requirements of Islam. The term Maqasid-e-Shariah means, 'the main objectives of Shariah'. These are sorted by scholars based on the principle of taking all that is good (Maslahah) and rejecting the difficulties (Mashaqah). They have also explained the order in which these goals are applied, based on their importance. To perform duties in accordance with the guidelines of Islam, the medical staff must comply with the following five fundamental objectives of Shariah, in the same order given below:



1. **Preserving Religion** (الدِين حفظ): To preserve the Deen should be the top priority of medical practitioners in every decision taken during the treatment of patients.
2. **Preserving Life** (النفس حفظ): The purpose of medical science is to maintain and ensure the best quality of life in order to serve Allah in the best way.
3. **Preserving Intellect** (العقل لحفظ): The medical staff is responsible for helping to preserve the intellect and sanity of the patient in all decisions and actions to be taken. This includes issues related to mental and psychological health, such as consumption of alcohol and drugs.
4. **Preserving Lineage** (النس لحفظ): It must be ensured that the lineage of the human race and the institution of family is protected and preserved. This includes matters such as pregnancy, antenatal care, childbirth and postnatal care.
5. **Preserving Wealth** (المال لحفظ): Wealth and property is a trust from Allah. It has been placed in the hands of mankind, and they shall be answerable for it in the future life. The health professionals should take care of the wealth of the patient and must avoid unnecessary expense as they will be answerable to this act.

Qawaid-e-Shariah (Islamic Legal Maxims)

The implementation of Maqasid-e-Shariah is based on the following five key principles in Qawaid-e-Shariah (Islamic Legal Maxims).

1. **Intention** (القصد): Everything should be done for the sake of Allah alone as the person will be judged according to his intentions.
2. **Conviction** (اليقين): There should be a high level of belief and conviction when taking any step. Predominant conjecture is desired.
3. **Harm (injury)** (الضرر): Some principles that must be understood in this regard are as follows:
 - (i) In case of injury, aid should be given to help in healing;
 - (ii) An injury should not be helped in a way that ultimately gives the same effect;
 - (iii) Prevention comes first in medicine;
 - (iv) When there are two choices, opt for the one that contains less harm;
 - (v) Community interests are placed above the interests of individuals;
 - (vi) Perform Istikharah prayer if you are finding

- it difficult to make a choice.
4. Hardship (المشقة):
 - i) Hardship permits us to do something which is otherwise not permissible in Shariah;
 - (ii) When we are compelled to do something contrary to the Shariah, there should be a limit to it and it should not be prolonged;
 - (iii) When faced with hardship, it is not permissible to give responsibility/liability to someone else.
 5. Custom (العرف): The treatment of a disease should be done according to prevalent standards if not contradictory to shariah.

DHUWABETALSHARIAH (REGULATIONS)

These regulations are more focused and have narrow scope, and deals with one chapter of Fiqh. These are:

1. **Competence** (اتقان)
2. **Excellence** (احسان)
3. **Balance** (توازن)
4. **Trust** (امانة)
5. **Criticism** (احتساب)

The physician must have technical competence (اتقان) and aim at excellence and quality work (احسان). He must have balance (توازن) in actions and attitudes. He must realize that he is carrying a great trust (امانة) and must continuously undertake self criticism (احتساب).

Application of The Principle of Dharurah& Rukhsah In Medicine

Islam is a complete code of life. Like any other professional, it is essential for any Muslim to have the basic minimum knowledge to practice the following four areas in the approved manner of Islamic teachings; Faith (Imanyat); Divine worship (Ibadah); Dealings- particularly with human beings (Muamilat); and relevant Islamic knowledge to practice his/her profession in line with principles of Shariah.

A Muslim Physician is not expected to be a care free person. He is expected to fulfill his responsibilities with full devotion and take care of all people irrespective of colour, race, religion and gender. He is obliged to take into account the sensitivities of faith and beliefs of all people including those of Muslim patients.

Islam is a practical religion. It is a religion that takes care of natural human needs and creates easiness for people. It is not a religion of hardships. Allah has said the same in many places in Quran. Few example are :

Allah does not burden any human being with a responsibility heavier than he can bear (Albaqra -286);

He has forbidden you unless you are constrained to

it (Alinam -119);

So hold Allah in awe as much as you can, and listen and obey, and be charitable (Altaghabin- 16)

The Prophet Mohammad has also emphasized the same in many of his sayings (Ahadith). He said;

Create easiness and do not create hardship and give them good tidings and do not make them run away;

Allah likes concessions (easiness) as much as he dislikes sins;

The best about religion is its easiness and concessions;

The doctrine of Islamic jurisprudence (Fiqh) is based on the same principles. It tries to create easiness for people within the limits defined in Shariah and avoids hardship.

Islam categorizes Human actions into Halal (Lawful / Permissible) Haram (Unlawful / Forbidden) and Mabah (Admissible). The ultimate objective is the overall benefit to humanity, through which the pleasure of Allah is achieved.

Based on Halal and Haram, Allah has clearly defined limits in certain areas. Allah said in Quran:

These are the limits of Allah, so don't go near them (Albaqra-187); These are the limits set by Allah; do not transgress them, and those who transgress the limits of Allah are the wrongdoers. (Albaqra-229).

So it is obvious that on one hand we should be aware of the situation (Dharurah) where mitigation (Rukhsah) is required while on the other we must also know our limits of application of this important principle. Thus it is important to know;

1. **Dharurah** Definition, levels and classification
2. **Rukhsah** Definition and types
3. Application of Rukhsah in some medical issues.

Dharurah (Necessity):

Definition: Most of the scholars of Islam (Fuqaha) have defined this as situations that would lead to severe disruption of life and would thus necessitate the use of an otherwise forbidden action or thing. Imam Shatibi, Wahabt Alzuhailee and Mufti Taqi Usmani (may Allah's mercy be on them) have also expressed similar views. The purpose is protection of Higher Intent (Maqasid) of Shariah in situations of hardship i.e. protection of Deen, Life, Progeny, Intellect and Wealth. Thus we also need to know what is Hardship? It will enable us to apply the principle of Rukhsah accordingly

Hardship: Hardship is any situation that would create some level of difficulty in performance of an action. According to the level of difficult hardship can be categorized into three levels;

1. Maximum Level: In this level, there is a definite threat to loss of life or a vital organ of the body. Availing Rukhsah has been declared mandatory in

- such situations. It temporarily allows use of forbidden / unlawful means and objects to save life.
2. Moderate level: This level is not life threatening but sever enough that is out of proportion to the routine hardship in life. In such situation one may opt to avail the concession permissible in the specific conditions or decide to continue with bearing the hardship. In this level of mitigation, an action may be allowed but use of unlawful substances and actions is not allowed.
3. Minimum level: This is the level of minimum hardship that one faces in day to day matters and which can be easily tolerated without any significant harm. Rukhsah (Mitigation) is not allowed in this level of hardship.

The severe level of hardships are grouped under Dharurah, while the moderate level as Hajah. It is important to understand this categorization because in the first one, use of unlawful may be allowed; while in second level, mitigation is optional and does not justify use of unlawful things or actions; while in the third level of hardship, mitigation is not allowed.

Principles of removing Hardship:

- (i) No Harm Do not harm and don't get harmed.
- (ii) Hardship is to be removed;
- (iii) Hardship brings easiness;
- (iv) A bigger Hardship is to be removed by a smaller hardship;
- (v) A hardship cannot be removed by an equal hardship;
- (vi) Necessity allows the use of prohibited things;
- (vii) Allowance of prohibitions is limited to the extent (and specific time) of need;
- (viii) Whatever is allowed (authorized) by an excuse, shall be forbidden by the removal of that excuse;
- (ix) In (absolute) necessity all forbidden things are allowed;
- (x) Non-maleficance will take priority on Beneficence [(Removing harm will be preferred over providing benefit (and leaving the harm as such)];
- (xi) Long standing customs can become the basis of orders.

Rukhsah:

Definition: Rukhsah can be defined as temporary permission of an otherwise non-permissible or prohibited action in a particular situation as per the essential requirements, in the larger interest of human beings.

Purpose (Objectives) of Rukhsah: The main purpose is protection of higher intents of Shariah i.e. Deen, Life, Intellect, Progeny and Wealth.

Categories of actions allowing Rukhsah:

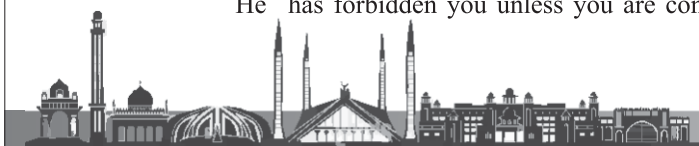
Human actions can have many levels and types For purpose of Rukhsah these can be divided into three categories.

- a. Actions that could lead to loss of life or a vital organ. This is a clear and doubtless indication of Rukhsah. This is called Dharar. Availing Rukhsah has been declared mandatory by Fuqahah in such situations and have grouped it under the term Iztirar.
- b. Actions that may result in difficulty. In this category one may experiences more than usual difficulty but there is no significant threat to life or loss of a vital organs. Rukhsah is allowed in situation but the option of endurance (Azimah- هم؟ عز) i.e. accepting and continuing in the situation may also be availed. These are called Hajah.
- c. Recommendable actions. Actions in which there is no or little difficulty only. Rukhsah is not allowed in such situation and these are called Tahseeniat.

Principles of application of Rukhsah in Islamic Jurisprudence (Fiqh)

There are many basic rules for decision making in Fiqh and these can be applied as guiding principles in availing Rukhsah in a particular way in a particular situation when faced with hardship. There are basic principles that would determines availing and continuing Rukhsah in a specific condition. Some important ones are outlined below:

1. It is an exception and not a general rule: Rukhsah is generally restricted to a particular situation and cannot be used as analogy for other issues / situations.
2. Decision is to be based on merit of each situation: Each situation and issue has to be judged independently for the purpose of permissibility under Dharurah.
3. Level of mitigation. Rukhsah is based on the level of Dharurah.
4. Permissible limits. Depending on the category, Rukhsah has to be in the permissible limits.
5. No effect given to imagination. The decision about availing Rukhsah has to be based on actual situation and not on a presumptive condition arising in future.
6. Knowledge and full comprehension. Only those can apply the principle of Dharurah and Rukhsah, who have full comprehension of the issue and knowledge of Islamic principles in decision making, otherwise they should ask other people with knowledge for advice. So ask those who possess knowledge if you





- do not know(Alnahla-43)
- It is to remove hardship and not enjoyment.
 - ntention of availing Rukhsah should be compliance to the guidelines provided by Islam and not transgression.
 - Option to avail a choice. Mostly applied in second level of hardship.
 - It is for limited time only: Rukhsah should discontinue when the specific situation is over.
 - ppplied only when alternate is not available:Situations in which a Halal alternate is available, the principle of Rukhsah cannot be used to permit use of a Haram article or action.
 - Certain Rukhsah are compulsory: Availing Rukhsah is obligatory in all life threatening situations.

Halal (Allowed), Haram (Forbidden), and Mushtabihat (Doubtful)

It is very important to understand that while taking decisions about mitigation in certain situations, it is imperative to have clear concept of Halal, Haram and doubtful matters.

Halal (Allowed) and Haram (Forbidden) are clearly defined while Mushtabihat (Doubtful) are actions and things where such clear demarcation may not be there. Allah and the Holy Prophet has made things easy for human beings but the allowance given in certain situations may be related to this categorization.

The following ahadith of the Holy Prophet will further explain the concept of Halal, Haram and Mushtabihat:

- Whatever has been decreed by Allah as Halal in His book is Halal and whatever did he decreed as Haram is considered Haram and there are others about which He remained silent so you are pardoned for that. Allah neither forgets nor neglects a thing so (if He remained silent on certain things) accept His generosity. And then he recited the verse of Surah Maryam

That Allah never forgets or neglect.

- Holy Prophet further explained about Mushtabihat that The Halal is clear and the Haram is clear. Between the two there are doubtful matters concerning which many people do not know (whether they are Halal or Haram). One who avoids them in order to safeguard his religion and his honor is safe, while if someone engages in a part of them he may be doing something haram, like one who grazes his animals near the Hima (the grounds reserved for animals belonging to the king which are out of bounds for others' animals); it is thus quite likely that some of his animals will stray into it. Truly, every king has a Hima, and the Hima of Allah is what He has prohibited. So beware, in the body there is a piece of flesh; if it is good, the whole body is good, and if it is corrupt the whole

body is corrupt, and behold, it is the heart.

There are many occasions where decision making shall be based on the knowledge, piety and intention of a doctor. He must ask his heart (conscious) and see that it is satisfied or not on such decision.Holy Prophet said, O Wasibah ask your heart, ask your conscious. Good deed is the one where your heart and conscious are both satisfied with it and sinful act is the one which pinches your heart and you feel hesitant to do that even though someone gives you a decree or given you a verdict to do that. It is evident from the above that a primary factor

in decision making in a particular situation of mitigation is one's own conscious. If there is no ill intention and vested interest then the conscious of a physician may be an important factor in the decision making. However it is equally important to realize that we are primarily taking into consideration the heart/conscious of a Muslim Physician, who's conscious is alive and he regularly struggles to get appropriate knowledge of Islam for decision making in his professional matters. It is not about the heart of transgressor who does not care for Islam and sinful acts. Few examples are given below where decision making about mitigation may be based on the above described principles and guidelines;

- Using impermissible contents (Alcohol, Gelatin or other contents from Haram sources, e.g. medicinal item derived from Swine lung or other parts 8.
- Organ transplantation (Human, animal and artificial organs).
- Examination of patients of opposite gender.
- Patients issues related to Taharah, Wudhoo,Salah and Fasting.

There are many other issues like abortion, genetic research, medical practice, cloning etc, that need to be addressed in line with the basic principle of Dharurah and Rukhsah. May Allah give us the wisdom and perseverance to work for His pleasure.

Islamic Hospital Practical Guidelines

Performing Ibadah In Islamic Hospitals

The Concept of Ibadah:The concept of Ibadah in Islam is vastly comprehensive, and encompasses the divine aim of man's creation:I have not created Humans and Jinns except for doing my Ibadah (worship).(Alzurriyat-56). Ibadah is complete submission and loyalty to Allah that dominates the believer throughout all his/her moments, engagements and endeavours of life, day and night, in health and disease. Ibadah is not limited to the five pillars of Islam.Any pure deed performed with sincere intention to obey and please Allah is considered Ibadah.

Common misconceptions: Many patients and family members have the misconception that sick individuals, admitted to hospitals, are exempted from performing the prescribed Ibadah, especially Salah. On the other hand, many healthcare professionals,including physicians and nurses, have this same misconception. Added to that, most of them think their duties are limited to providing various types of medical or nursing care only. This same misconception dominates trends and concerns of most hospital administrators, at various levels of hospital hierarchy. This deep-rooted concept should be remedied by all means of education, training, and administrative decisions and the proper understanding of Islam as a complete & comprehensive way of life.

Obligations of hospital administrations:All personnel at various levels of responsibility of administration must realize their commitment in leading the implementation process of establishing or transforming their hospitals into Ibadah-friendly. This leading role is considered as Ibadah. They should be deeply committed to the concept that Islam is a mercy for all mankind. Sincerity, professionalism, proper intention (Niyyah), devotion, perfection (Itqan) and excellence (Ehsan), are principle concepts of all healthcare procedures.This process includes:

1. Establishing Ibadah-related Standard OperatingProcedures (SOPs) for all the staff: Ibadah care, guidance and execution of duties to patients, family members and visitors, must not be left to individual judgment. It has to be standardized and supervised. Moreover, it has to be built-in as integral components of the day-to-day healthcare routines, as a comprehensive obligation to all. Setting up of a panel, as a reference for guidance, implementation and follow up, may be needed. Administration may need to employ specialists in Islamic Shariah.

2. Selection, training, motivation and capacity-building of all healthcare staff, and administration personnel:To nurture the qualities of devotion, taqwa, Islamic morals of professionalism, Ehsan, amanah and day-to-day muhasabah.

3. SOPs for patients' Ibadah: Related educational and orientation means:Audiovisuals, reading materials, lectures and seminars for patients, families and visitors. Time for Dua'a are also useful means.

4. Facilities for Ibadah: Hospital administration should ensure facilities for Ibadah,i.e.,places for prayer,qiblah directions,reminders, prayers handbooks,prayer clothes,prayer mats,clean floor,assistance in wudhu, tayammum, and salah.

5. Professional assessment of patients' capabilities to perform various kinds of Ibadah: This should follow (SOPs) to classify patients into various categories in their

capabilities to perform wudhu, salah and other forms of Ibadah,without any kind of compromise to their health.

Ablution (Wudhu):

According to clinical assessment:

- Patients with mild or moderate medical conditions,with no pain, discomfort or worsening of illness, or delay of healing: The usual prescribed ablution steps could be undertaken.
- In cases where wudhu is expected to worsen the illness, or delay healing: The staff should assess the extent of assistance or modification needed to assure safe outcome.Nor kill (or destroy) yourselves: for verify Allah hath been to you most merciful(Alnisa-29).



Wadhoo trally

- Patients who lack capability to ambulate or move, and nobody is available to provide water and other facilities for wudhu: Tayammum is permissible. The patient touches the ground or a nearby wall, or any prepared stone or sand, with hand, then wipe face and arms. (Please use purpose built trolley.
- Patients unable to perform Tayammum: Others could do that for them.
- In situations where the patient is alone, unable to perform wudhu or Tayammum: He/she could pray in his/her current status.



Salah: Salah is the first and foremost obligation on Muslims. It is not waved unless when sanity is lost, and continues to be an obligation till the departure of roh. Imran ibn Hussein (ra) reports that he had piles and thus he asked the Holy Prophet about prayers. Prophet Mohammad replied, Pray while standing, and if you are unable to do so, pray while sitting and if you cannot do even that, then pray lying on your side. It is mentioned in Holy Quran that Indeed, prayer has been decreed upon the believers at fixed hours (Alnisa-103). Forsaking the prayer and denying its obligation is seen as an act of disbelief and places the person outside the fold of Islam. Jabir (ra) reported that the Holy Prophet said, Between a man and shirk (associating others with Allah) and kufr (disbelief) there stands his giving up prayer. Buraidah reported that the Holy Prophet said, The covenant between us and them is prayer. Whoever abandons it, he has committed disbelief.

Prayer is the first act that we will be asked about on the Judgment Day. Anas bin Malik related that the Messenger of Allah said, The first matter that the slave will be brought to account for on the Day of Judgment is the prayer. If it is sound, then the rest of his deeds will be sound. And if it is bad, then the rest of his deeds will be bad. Prophet Mohammad also informed us: Allah has obligated five prayers. Whoever excellently performs their ablutions, prays them in their proper times, completes their bows, prostrations and khushu' (attention) has a promise from Allah that He will forgive him. And whoever does not do that has no promise from Allah. He may either forgive him or punish him.

On one hand we see that Salah is a top priority for a Muslim and on the other hand we observe that more than 70% of our Muslim patients are not praying. This is mainly due to the ignorance of its importance. Also, there is a lack of awareness of various relaxations in the performance of Salah in different conditions of illness. Allah intends every facility for you, and does not want to put you to difficulties (Albaqra -185). Holy prophet said When I order you to do something, do it as much as you can (Muslim; Bukhari). Another important aspect of prayer is that it is a source of patience which is deeply required by the patients and their relatives: O You who believe! Seek help with perseverance and prayer (Salah): for Allah is with those who patiently persevere (Albaqra-153). Allah has enlisted sabr in many ayat, and associated it with salah.

Management of the Islamic hospital should accord priority to the development of Salah culture.

If you are beginning with the construction of a new hospital, place the masjid or praying area in the center of the building so that it is easily accessible for patients and staff. Build toilets and Wudhu area in close proximity to the Masjid.

The Masjid should be kept neat and clean at all times, and should not be used for sleeping or purposes other than prayers and daroos.

Five times prayer should be established with Adhan and Iqamah. Adhan should be heard in all wards and other areas of the hospital in a soft tone. PA system and close circuit television network may be used for this purpose.

Salah culture is to be adopted in the routine medical work of the hospital. Nursing staff is trained for a soft reminder and facilitation of Salah to all admitted patients and their attendants.

Reminder for Salah is recorded on a separate sheet and kept in the file of the patient. It should be kept in mind that this is just a humble and polite reminder and facilitation without any compulsion. Doctor on duty will cross check this reminder off and on for the sustainability of the system. Religious officer should also visit the patients to offer spiritual support to the patients and their relatives including performance of prayers. Doctor on duty should assess the patient regarding its ability to perform Salah and record on the prescribed sheet. Every female ward should have a place dedicated for prayers. Qibla direction should be clearly indicated in the wards.

Assessment Sheet for Salah (Reminder & Facilitation)

Day	Fajr	Zohar	Asr	Maghrib	Isha	Counter Check by Registrar
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						

Wudhu/Tayammum Trolley

Every ward should have a Wudhu trolley for facilitation of Wudhu or Tayammum for the patients who cannot go to the toilet for this purpose.



Old Age and Frailty

Special moral considerations of respect, dignity, ease and facilitation have been ordained in Islamic teachings towards performing Ibadah. When old age progresses into the stage of frailty, these considerations become more manifest.

Stages of Terminal illness

In such circumstances, special attitudes and behaviours become required from medical staff members. The patient and family members should be approached and counselled around issues of faith, Islamic view of lifespan, inevitability of death (Ajal), and related concepts. The medical professionals are not in a position to protect their patients from death. The aim is to provide their utmost of experiences and sincere effort for possible cure or alleviation/palliation.

Patient Sufferings and Attitude of Medical Staff

The staff should acquire capabilities of counseling patients and families at these stages of suffering and agony. In addition to palliation measures, they should be able to address the distinguished rank of patience/perseverance: O You who believe! Seek help with perseverance and prayer (Salah): for Allah is with those who patiently persevere (Albaqra-153). Allah enlisted sabr in many ayat, and associated it with salah. Comforting the patient with citing the good news of the great reward that Allah bestows on those who have patience,

perseverance and acceptance of Divine jurisdiction. Staff should be qualified to outline the concept of positive belief and amicable thinking towards Allah. It is proper and timely to instil the concept of repentance (tawbah) at these stages of agony and approaching Ajal. Allah cautions His servants against delaying tawbah. Turn to your Lord (in repentance) and bow to His (will) before the penalty comes on you: After that you shall not be helped (Alzumar -55). Say: O My servants who have transgressed against their souls! Despair not of the Mercy of Allah: For Allah forgives all sins (Alzumar-53). M Allah loves those who turn to Him constantly, And He loves those who keep themselves pure and clean (Albaqra-222). Allah grants these reassuring messages of hope and Divine assurance to those distinguished with patience, perseverance and repentance, in general, but specifically for those afflicted with illness. Holy Prophet said: No fatigue, nor disease, nor sorrow, nor sadness, or hurt, nor distress befalls a Muslim, even if it were the prick of a thorn, but Allah expiates his sins for that.

Architectural Design of An Islamic Hospital

Provision of health care delivery system and hospitals is a mandatory component of any society. Hospitals are built, developed and operated under certain ideology, philosophy and defined mission and objectives. As Muslims we believe that khelq is Allah's Ayal. So to seek the pleasure of Allah we need to take care of His khelq. By serving His khelq; we are in fact benefitting ourselves. Islam is our Deen, Medicine is our profession, and to seek the pleasure of Allah is our objective. So whenever we aim to have a hospital it has an ideology at the background and a mission in front of us. around the same mission; whatever I shall do is to

please my Allah. This overarching objective shall reflect from site selection to operation of the hospital. It includes architecture of the hospital, facilities, services, etc.

The current societal and demographic trends and their impact on health care have led to the trend of humanistic design. It means that the facility design shall help to meet the needs of patients and visitors and shall also address behavioral issues of the society served. The flow scenario and circulation system must be properly addressed. Hospitals shall be the hospitality centers and treat patients and their visitors as guests.

Professional Excellence shall be pivotal in all the fields of hospital services. Architectural design must serve the above mentioned purposes. For example, provision of fresh air, cross ventilation, sunlight, greenery, heating/cooling systems, uninterrupted power supply, ample supply of water, kitchen and halal food services, appropriate drainage system, emergency



(fire, blast, earth quack etc.) handling facilities; waiting and service area, car parking facilities, flower and gift shops, etc. Details of patient care units must be in accordance to international standards. For example, patient receiving and waiting areas, proper patient guiding and directions system, appropriate passages, walk ways for disabled.

The design of the hospital shall respect the commonly followed Islamic principals regarding Qibla direction. Centralized Azan system shall be preferred. Wudhu and prayer places must be at easy access for the patients and facilities shall be available even at ward level. Gender mixing shall be avoided at common places in general and in wards in particular. In addition to these, the design must be reflective of Islamic culture. So the masjid shall be at the center of the hospital and shall be used as referral point for other departments.

In most hospitals, a weakened patient and traumatized family are greeted by harsh lights and clod stainless steel, labyrinths of white corridors, thumping equipment and mysterious smells. The sick rarely have access to medical information, privacy, or a place for quite talk or grieving. The sense of anxiety and helplessness is the worst imaginable to promote healing. So we need to avoid these problems in designing. The role of health care facility design is to help prevent illness and injury. Every thing from the design of heating, ventilation, air-conditioning systems to the design of stairways and patient bathroom grab bars and selection of floor coverings, etc. directly affects the health and safety of its users. Starting from Nazafah which is claimed to be Half Iman, hospital surroundings must be neat, clean and green to provide fresh air (with out flies and mosquitoes) to the hospital inmates. Inside the hospital; irrespective of hospital construction, standard and quality of fixtures and furniture, cleanliness and hygienic environment must be maintained.

The Staff should have neat and clean uniforms that give a healthy look and fully cover their satar. Similarly neat and clean dress for patients is also important.

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where all the preventive and hygienic principles must be followed. Food wastage shall be avoided.

Wash rooms shall never be neglected and must have appropriate wudhu places. Toilets must be separate from wash basin and shower areas. Appropriate drainage system and solid waste disposal mechanism (incinerators) must be provided. Burial of human tissues is an Islamic principle and there must be a place for that as well and it shall not be thrown in routine dustbins.

The Running of An Islamic Hospital

Based on 'The Best Services from the Best People', FIMA brought forth the concept of Islamic Hospital in all aspects of its administration. This was done to ensure that all the staff strives to reach the values of excellence and integrity. This program/concept includes:

1. The hospital provides the policies and a Standard Operating Procedures (SOPs) which are faith-centered.
2. Employment scheme to hire Shariah compliant personnel who fulfill the following requirements:
 - i. Ability to apply the concept of Maqasid-e-Shariah and Qawaid al-Fiqhiyyah as a hospital guide.
 - ii. Ethical dress code which is appropriate and covers properly.
 - iii. They have good interpersonal skills.
3. Cultivating Islamic values in order to provide the best services to patients and visitors, such as 'Smile and greet' and 'You are our guest'.
4. Setting up of a Shariah panel for reference and guidance.
5. Creating a Special Affairs Unit supervised by religious officials who are appointed for full time, to assist in the implementation of IHC program
6. Providing facilities to the patients at Islamic Hospital to practice their religion
7. Every day begins with Dua at 8: 00 am and ends with a Dua at 9:00 pm after the visiting hours have finished.
8. A central Audio/Video system which assists in the implementation of the IHC program, this encompasses;
 - i. Television programs are regulated and appropriate.
 - ii. Broadcast equipment (Public announcement system) for use in the implementation of IHC program such as live Islamic lectures, reciting Duas, Quran, Adhan, prayer-timings and others. This program should be designed



with 'Hikmah' and be well under control of administrator.

9. Educational and motivational programs for the staff, such as ,Motivational Camps,. Quranic study circles, Study tours.
10. Islamic Social Responsibilities (ISR): Islamic Hospital encourages its staff to work with different NGO's like Federation of Islamic Medical Association (FIMA), Alkhidmat and PIMA and contribute their energy, expertise and skills in various social activities inside and outside the country.
11. Providing the facility of a day care center for the children of the staff of the hospital.

Teaching of Medical Students in an Islamic Hospital SOPs

General Principles

Students and all other stake holders should know it clearly that a hospital is made for the patients and only patients will be taken as VIPs. Tawheedic Paradigm should prevail all the time at all the places and for all the matters. Time is a precious commodity so it will not be wasted. It is the responsibility of all students to know the rules and regulations of the hospital and follow them strictly. Cleanliness is the collective responsibility of everybody. Students will show Zero Tolerance in this respect. Polite attitude is the hallmark of a Muslim. Students are expected to behave politely with everybody in all circumstances. Dress code will be observed in letter and spirit. Muslims are trained for discipline through Salah and Saum. Students will show punctuality with religious spirit.

Respect for everyone will be the icon of students. Dealing with the opposite gender will be strictly under the guidelines of Islam and any deviation in this respect will not be tolerated. Salah is made Farz on all Muslims on the prescribed times and students are expected to follow it on priority.

Students in the Class Room

Class room is the place specially meant for gaining knowledge. It is by all means a sacred place so students are expected to respect its sanctity. Punctuality will be observed with religious spirit. Proxy comes under False Testimony which is strictly forbidden in Islam. Students will never think of signing for others. Respect for fellows and norms for opposite gender will be observed strictly. Care and Eesar for fellows will prevail in the class room. Cleanliness and orderly arrangements are collective responsibility of students. Every

student is answerable for its maintenance.

Students with Teachers

Prophet Mohammad came to humanity as a Muallim. A teacher is the most sacred personality and owns a holy profession. It is the religious responsibility of students to extend utmost respect and honor to the teacher. The teacher is expected to extend a fatherly attitude towards students which includes character building and career planning in addition to professional teaching with utmost care of time management. Students are expected to follow instructions of the teacher in letter and spirit. A cordial environment is required between teachers and students.

Students with Patients in Wards and OPD

While entering in the ward or OPD, student should be well dressed in proper uniform; wearing a white coat and name badge on it. While in groups students shouldn't chat casually. A modest behavior is required during the stay in the ward and OPD. Proper prior information to nursing staff is required before entering female wards. Knocking and prior permission is required before entering any private room. Male students will not approach any female patient in the OPD, ward or private room without accompanying a female nurse, lady doctor or female attendant.

Discipline of OPD must be maintained as per instructions of the concerned in charge. While examining a female patient, privacy and Aurah must be maintained in strict compliance to Islamic guidance.

Students after taking history will keep the secrecy and will not discuss with the colleagues and other unrelated persons. While meeting and dealing with the patients and their attendants, students must know that these people are under stress and grief; hence a very sympathetic attitude is required.

Students should learn to help the poor and needy patients and should try to solve their problems which may be simple guidance or arrangement of resources. Taking initiative in Greeting with Assalam o Allaikum is advised by Prophet Mohammad and has high value to Allah, hence it will be the icon of the students. Cleanliness is said to be half of Faith. Students will keep an eye on the ward and OPD and ensure its maintenance through all stakeholders.

Students and Nursing Staff

Nursing staff is an integral part of the healthcare system and it is not possible to deliver any healthcare in the hospital without them. Students are expected to extend due respect to the nursing staff. Dealing with the opposite gender will be strictly under the Islamic rules.



Students and other Helping Staff of Hospital

All other staff including janitorial staff is an integral part of the hospital and proper healthcare would be impossible without them. Students will extend special care and respect to all such staff with the spirit to uplift the self-esteem of these people. Taking initiative to greet these people will be the icon of students.

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