## THE NURSING OF SICK CHILDREN.

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V.—SURGICAL NURSING (PART 2).

T will be part of the Nurse's duties to prepare her patient for an operation, and perhaps to prepare the theatre or room likewise. Ιt goes without saying that the patient must be scrupulously clean before being placed on the table; to provide against any unpleasant accident on the table, the Nurse will give a simple injection some hours before, and attend to all natural wants. If the patient is to have chloroform, the last food should be taken quite four hours before the time appointed for the operation, and beef-tea is the most suitable food. It seems hardly necessary to warn the Nurse that all instruments and other preparations must be kept out of sight until the patient is under the anæsthetic; but these things are so a part of our every-day life that they have lost their horror; it is not so, however, to a nervous, excitable child, nor indeed any one, so that respect and sympathy for their feelings would make us keep all the adjuncts of an operation out

A good Nurse will now have an opportunity of distinguishing herself by having everything in handy readiness for the Surgeon; doing her best to forestall every wish, so that all may go on as smoothly and rapidly as possible. The most successful theatre Nurse will be one who, while concentrating her mind on the business in hand, is yet on the alert to meet every demand and emergency; and no Nurse will attain to this, until she has disciplined herself into taking one thing at a time, and disposing of that, as completely and thoroughly as though it was the whole of her day's work. If a Nurse knew how her unready, awkward ways in the theatre, hindered and irritated the Surgeon, she would surely strive her utmost to

improve them.

When the operation is finished, and the patient back in his bed, the important Nursing work begins. It will be her duty to watch until the effects of the anæsthetic have worked off, and her patience will be taxed, and her ingenuity tested in tiding the little one over the first paroxysm of pain and resentment, in teaching him that he must yield to circumstances. Consider for a moment what it must be to the child; perhaps on the previous day he has been amusing himself about the Ward in no suffering, goes to bed as usual, and the next morning it is all so hideously strange; he feels il! Nurse will do well to bear in mind, that the little because of that "nasty stuff," and he has bad pain; patient may have to spend a long weary time on the cannot turn about and have a good kick, for that bed, without being moved, and so it should

he is fastened here, and fixed there, and Nurse, "cross old thing," will not let him sit up. The Surgeons keep carefully out of the way, and so Nurse has all the blame to bear, and this is natural; but if her management of her patient up to this time has been even and firm, she will now carry her point, because the little one will trust her. It is marvellous how soon the cry of pain and weariness is hushed, while merciful nature draws the curtains of sleep over the sad eyelids, and then, all being favourable, both Surgeon and Nurse may hope soon to see the results of their care.

Naturally, it will be a sad time when the wounds have to be dressed, and, certainly, the children's Nurses must feel ever grateful to antiseptic dressings, which have done so much to lessen these frequent dressings; but still they have to be faced. It is not necessary to teach Hospital Nurses how these dressings have to be prepared, but it may, perhaps, interest them in their work to be told that the principle on which they are based is to keep the external air from the wound, and to surround the wound with substances that have been rendered free from any poisonous germs, by treating them with antiseptic preparations. If they grasp this in their minds, they will understand the reason for the minute attention to detail that may seen unimportant. Scientific research has discovered that the air is the medium of conveying the germs of infection to open wounds, and so it is passed through antiseptic substances.

The actual dressing of the wound will be done by the House Surgeon, or Dresser; but the Nurse will have to prepare everything, and here is the responsibility of seeing that everything that can be required is at hand. There are few things more irritating than to be stopped in the middle of a dressing, while a heedless Nurse has to hurry off for something that she ought to have

remembered.

The general rules of Nursing apply to most surgical cases, the special instructions for the individual cases being given by the Sister of the Ward; but Nurses should be careful in the use of the antiseptic. Knowing the antiseptic lotion to be a good thing, they are apt to overdo it by using it too strong. Especially is there a danger in the too free use of iodoform, carbolic, &c.; these are all potent agents, and there is such a thing as iodoform poisoning, carbolic poisoning, and mercurialism. It is safer, in Ward management, to keep the weaker strength at hand, and the more powerful dilutions in another place not so handy.

In preparing the bed for the operation case, the Nurse will do well to bear in mind, that the little previous page next page