

ignorant Nurses to give a reliable account of the symptoms exhibited by a patient. Nothing but constant practice and experience can do you any good in this matter.

It may possibly be the practice of the Hospital you are in for the Probationers to take notes of some of the cases. I am quite sure such a habit would conduce to most valuable development of the power of observation if it were maintained by the Nurses; but whether the information which a raw Probationer acquires compensates for the time bestowed on copying and elaborating notes of doubtful accuracy, I will not venture an opinion.

The lectures, which Probationers in most Hospitals have the privilege of attending, are of great value. The clinical lectures which are often given for the benefit of Nurses are, I think, of the *greatest* use to them.

It is constant attention to these, observing how the remarks made on the symptoms and state of the patient corroborate or contradict those you have yourself made, which will, with your own experience, enable you by-and-by to take notes of cases which shall be of more value than waste paper.

I will give you a few of the symptoms which you will be expected to observe.

Sleep.—How many hours, whether continuous or broken, and the character of the sleep.

Food.—Quality of food taken, also the amount of stimulant, whether the food is eaten with any degree of appetite, whether eating is followed by sickness or any other symptoms. She should also notice what kind of appetite the patient has, and if he experiences thirst, and craving for any particular sort of liquid.

Pulse.—I have spoken to you already about the pulse, so will only advise you to make yourself acquainted with the different states of the pulse in health, in fever, in exhaustion, &c.

Temperature.—To ascertain the state of the patient's temperature will be a duty you will constantly have to perform. The thermometer should be placed in the armpit, unless you have distinct orders to the contrary, and you should not leave it in less than five minutes. The time of taking it, which should be at regular intervals, should be carefully recorded. The average temperature of a healthy person is 98.4°. Temperature over 100° indicates fever; over 106° is generally the forerunner of a fatal termination.

Skin.—Is it warm, cold, cool, moist, or dry?

Respiration I have already spoken of, and I need hardly say that every particular of a cough, including the expectoration, should be carefully noted, and the same thing may be remarked of all vomited matter.

Bowels.—Frequency and character of *fæces* should be observed; and you should learn to recognise the stools characteristic of different diseases.

Urine.—You will constantly be required to measure this. The average quantity passed by an adult is fifty ounces. It may happen that you are called on to test urine; at any rate it may be useful to you to know how to do so. Testing means the process of finding out the precise unhealthy or unusual quality in the urine. The test of heat is usually applied by placing a small quantity of urine in a test-tube, and subjecting it very carefully to the influence of a spirit-lamp.

To test urine in order to discover if there is *bile* in it, a little must be poured on a white plate, and nitric acid added to it drop by drop. If bile is there it will produce a play of colours from brown to green, blue, violet, and red—characteristic of bile pigment.

To detect *albumen*, two tests are necessary—heat and nitric acid. On boiling albuminous urine in a clean test-tube, the albumen coagulates and produces a cloud varying in density. There are conditions, however, into which it is needless here to enter, under which heat alone is insufficient to detect albumen; some drops of nitric acid should therefore always be added, either before or after the urine is subjected to the boiling process.

There are many other tests for discovering the presence of phosphates, lithic acid, grape sugar, &c., in urine; and when you have time enough at your command, you will find some little experiments on the subject very interesting; but I do not know, as Nurses, you will ever be able to make much practical use of the information you may acquire.

Not that I would, however, discourage you from any investigation or inquiry which may serve to make your beautiful work of Nursing more interesting to you.

VISITORS IN THE SICK ROOM.

THE inconsistency of many well-disposed people, who, in the kindness of their hearts, or from a sense of duty, visit their friends in affliction, is often a marvel. It is frequently a disadvantage to the patient, to say nothing of the annoyance, perplexity, and inconvenience for the Nurse.

All will agree that the rule controlling the sick-room must be "the patient's welfare," to which everything else should be subservient. Then why will friends persist in fatiguing one in whom they are so deeply interested, when every effort

[previous page](#)

[next page](#)