

and more difficult for the latter to obtain employment. But it may be said that all these arguments are plausible enough, and might be freely granted; but how, if Registration is not compulsory by law, could any woman be prevented from calling herself a Registered Midwife? Easily, quickly, and effectively. For we presume that it would be one of the duties of the body entrusted with Registration to see that the title it confers is not usurped by any unauthorised person. By the law of England, anyone obtaining money by false pretences is liable to summary arrest, and, upon conviction, imprisonment with hard labour. Woe would certainly betide any woman adopting of her own initiative the title of Registered Midwife, because, if her employer bought or borrowed a Register, and found not her name therein, he could either refuse to pay her fee—which would not be lucrative work for her—or might pay her, and then forthwith give her in custody for having obtained the money by fraud. A few convictions would speedily prove that the “game was hardly worth the candle,” and the results we have ascribed to Registration would, we firmly believe, soon be achieved.

OBSTETRIC NURSING.

— BY OBSTETRICA, M.B.N.A. —

PART I.—MATERNAL.

CHAPTER II.—DUTIES DURING LABOUR.

(Continued from page 200.)

SEE that you have everything ready for the Doctor's arrival—hot and cold water, nail brush (I like the india-rubber ones myself), towels, soap, vaseline, napkins, thread and scissors. As to thread, never have glazed thread; it is too smooth, and it is apt to cut through the vessels of the cord. I have known more than one case of secondary umbilical hæmorrhage caused by this disaster. The common whitey-brown skein thread, without glaze, is fairly satisfactory. The number of strands is not less than four to a ligature, and as to lengths there is some divergence of opinion amongst accoucheurs. Men prefer thread as a rule cut in lengths of ten to twelve inches. At each end of the lengths tie a knot to keep the strands together. For my own part I never have my threads more than six or seven inches long, and most women use them short. This may arise from the smaller sizes of our hands, so that we can pull down closer with a short thread. However, it is not a matter of much importance either way, only have the threads ready. I like them papered myself, and keep them in my belt, so that I can

get at them handily; but as you will have to hand them to the accoucheur, it is a good plan for a Nurse to paper the threads and put them in her belt. Every Nurse should wear a belt on duty.

Returning for a moment to the subject of what is the best sort of thread for umbilical ligaturing, I really prefer and use a coarse kind of hempen thread—not very beautiful to look at, I confess, on account of its dark hue, but very reliable. About four strands if fine, and two if coarse, in seven-inch lengths, suffice for a ligature.

Now as to best sort of scissors for a Nurse to have for severing the cord, there is but one reply—*round-pointed*, in fact, draper's scissors, not more than *three* inches long. They are absolutely safe; you cannot hurt the infant with them. No Nurse should be without a pair of these scissors. You will see how useful they are in Obstetric Nursing as we go on. The scissors should be attached to your belt, by a piece of silk cord, or narrow strong braid, about thirty inches long, and the scissors themselves stuck into your belt, ever ready for use, and you will hand them with the thread to the accoucheur when he requires them. When he has severed the cord, wipe your scissors quite clean, and when you wash baby, wash your scissors too. Always keep them perfectly clean, and dip them when necessary into the antiseptic solutions we shall discuss before very long. As the labour progresses you must get everything requisite in the room and handy for use. You have prepared the bed already; bring in the foot-pan from your room, and place at the foot of the bed, on the left side, ready to receive the soiled linen. Have ready the woollen shawl I spoke about, or a small blanket, to cover over the patient when she lies down. Have on a table as near the bed as you can a bottle of clean, fresh drinking-water and glass, some pale brandy, a fan, a bottle of smelling salts, and two or three clean pocket-handkerchiefs. With respect to smelling salts, I always have them perfumed for my patients; they are so much more pleasant to inspire than plain. I hardly know what my chemist puts in, but I know that essential oil of lavender plays a very pleasant part of the “mixture,” and the women all like it. Have a fan with the other things on the table; those cheap and popular Chinese fans are very good for fanning, and so light to hold, but of course you must have what fan you can get.

There is another little matter, too, I may as well call your attention to, as a handy contrivance for administering chloroform during the second stage of labour, which, as you know, is only given to a slight degree on these occasions. Have a perfectly clean, dry tumbler, and half fill it with medicated white cotton wool, and when the

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