

event of cases arising such as described in the "Editorial" of May 15 during the attendance of a Nurse specially qualified in one department of her work, her general training would surely qualify her to meet the change of symptoms as well as any ordinary Nurse would now, and enable her to carry out the orders of the Physician called in as carefully as those of the Surgeon for whom she is already working.

It may be urged, in conclusion, that besides the advantages accruing to patient and Doctor from the special skilfulness in one direction of any given Nurse, and her own intense pleasure in being able by experience to do her work so as to fully satisfy them both, there yet remains another outcome of the question. In this nineteenth century we are nothing if we are not practical, and there is another point of view from which we may look at the question, and that is a financial one.

We cannot shut our eyes to the fact that the Nursing profession is overcrowded. It may be urged that, notwithstanding the numbers seeking work, it is very difficult to find reliable Nurses; still it is undoubtedly true that, at present at any rate, competent and incompetent alike are treading in one another's footsteps and that very shortly a deadlock seems inevitable. If specialism for Nurses were sanctioned by the Medical profession, and encouraged by the heads of Nursing Institutions, the result to individual Nurses would, there is little doubt, be continuous employment and higher pay, and the pressure for those engaged in general work would be lessened. Moreover, the further and more distinct sub-division of Nursing skill would enable Nurses to follow their especial bent in deciding where, after their training was finished, their course should lie.

It would seem at least an open question, whether specialism might not lead to a more satisfactory state of things, in many ways, than that now existing, and result ere long in doing away with many of the difficulties which, at present, meet both Doctors and Nurses in their relations with one another.

M. P.

TERMS USED IN NURSING, THEIR ORIGIN AND MEANING.

COLLECTED AND ARRANGED BY MISS MARY
SHEEHY.

Abdomen.—Probably a corrupted form of adipomen, from adeps, fat. It is the largest cavity in the body, situated between the thorax and pelvis.

Abnormal (from Latin words ab, from; norma, a rule).—Irregular; that which deviates from the usual order.

Albumen (from Latin albus, white).—A thick glairy fluid, constituting the principal part of the white of egg. It enters largely into the composition of animal fluids and solids.

Antiseptic (from the Greek anti, against, and sepomai, to putrefy).—Anything directed against putrefaction. An *antiseptic dressing* generally consists of several layers of wet carbolic gauze, then eight folds of dry gauze, with a layer of thin mackintosh under the outermost layer, a pad of wool, the whole secured by a bandage. Other antiseptic materials and germicides are now used, the object being to exclude the entrance of micro-organisms.

Aperient (Latin aperio, ab, and pario, I bring forth, I open).—A medicine which gently opens the bowels. The term had formerly a much more extensive signification, and was given to a substance supposed to have the power of opening any of the passages, and even the blood vessels.

Apnœa (Greek pnou, the breath).—Interrupted or suspended respiration.

Asphyxia (asphuxis, the pulse).—Simply means pulselessness, but generally used to mean suspended animation, produced by the non-conversion of the venous blood of the lungs into arterial.

Bandage.—A surgical appliance made of cotton, linen, flannel, or woven material, used in the form of a roller of various widths and lengths, to give support to a part, to exert pressure, or to retain a dressing in its place.

Bed-sore.—A sore occasioned by constant pressure of a part of the body in bed.

Blister (from Dutch bluyster; Saxon blaerfan, to puff).—Any substance which, when applied to the skin, irritates it, and occasions a serous secretion, raising the epidermis and inducing a vesicle. The term is also applied to the vesicle or bleb.

Cardiac (from Greek kardia, the heart).—Relating to the heart.

Catheter (Greek katheter, anything put down or let into).—A tube which is introduced through the urethra into the bladder for the purpose of drawing off the urine.

Cataplasm (Greek kataplasma, that which is spread or smeared).—A medicine applied externally under the form of a thick pap. It may be anodyne, emollient, tonic, antiseptic, or irritating.

Cautery (Greek kaio, to burn).—The application of caustics. By the term actual cautery is meant the application of the white-hot iron.

Chronic (Greek kronos, time).—Of long duration.

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