

night, to whom all the Nurses may refer in any difficulty. On day duty each Nurse should have charge of two patients only, and in all major operations, such as ovariectomy, colotomy, &c., special Nurses will be necessary. Your correspondent, "W. L. B.," is quite right in doubting the efficacy of the pernicious system of one Nurse attempting to take entire charge of a critical case; *she cannot do justice to her patient*, and must not be prompted either by devotion or vanity to imagine that she can. I must express the opinion most emphatically—after fifteen years' Nursing experience—that two Nurses are absolutely necessary for the efficient Nursing of persons who are really ill—one for day, and one for night duty, especially after operations; and that, to keep the patient and bedding clean, two Nurses must work together in washing the patient and changing the bed-linen.

"A Private Nurse" touches on one or two salient points—one sentence, "irrespective of sex," is significant. Every true Nurse will agree with me that there is no service which a woman cannot render to a sick and helpless man without offence to modesty; but she must render such services in her official position as Nurse, and a professional attitude must always be maintained. With this object in view, a woman will be careful at all times—day or night—to appear before her patient in uniform, and she will, under no circumstances, consider it justifiable to occupy a bed in the room of a male patient, or perform her duties in a dressing-gown. Any Home Hospital where such unprofessional irregularity is permitted should be avoided by decent women, as such a system is calculated to lower the tone of Nurses and patients in a most undesirable manner, and can only be practised for economical reasons, which are totally indefensible.—I am, Sir, yours faithfully,
MATRONA.

To the Editor of "The Nursing Record."

Sir,—Your correspondent, "W. L. B.," asks for enlightenment at the end of her most admirable letter, concerning the

experience of several superintendents of Home Hospitals having opposed Registration of Trained Nurses. Far be it from me to impute unworthy motives, but we are all human, and Registration of Trained Nurses means depreciation of profits to many of these ladies. At present (I am speaking from personal knowledge) semi-trained Nurses are admitted upon the staffs of Home Hospitals at a very low salary (doubtless quite as much as their unskilled services are worth). They are then utilised to nurse-paying patients in the Home, who have a right to demand skilled nursing, or sent out to work in private families, the Superintendent charging the full fee of £2 2s. to £3 3s. a week for their services, and pocketing the profits. If the State made Registration after three years' experience compulsory, and the public was aware of the law, these unskilled workers could no longer be palmed off as Trained Nurses. The public would demand *quid pro quo* for its golden guineas, as it does with medical treatment. The whole question resolves itself into a matter of £ s. d., and is in consequence nauseously common-place.—Yours truly,
GENERAL PRACTITIONER.

To the Editor of "The Nursing Record."

Sir,—What I want is justice—and I can't get it. I am a Nurse in a Home Hospital (a very successful Institution, we Nurses are told, and I hope you will print my few words). We are engaged to work either in the Home, or go out private-nursing, and we are paid £20 to £22 per year, with uniform and washing. Many of us have not had much experience before we are taken on to the Staff of this Home, and we are told the experience we gain is part payment. Somehow it doesn't seem right, as the patients pay high, and the Lady Superintendent charges £2 2s. a week for us when out. Last year I kept count of what I earned for the Home. I brought in £110, as many times I went to two cases in a week because of deaths and things, and a clear profit of £20 a quarter on my hard work is surely unfair; and though I do

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