heart itself, its rapid removal by tapping often causes a temporary strain upon the heart's action; and, therefore, it is by no means unusual for patients to suffer from syncope during this operation. The Nurse should therefore be provided with brandy or some other stimulant, so as to be able to administer this immediately if the doctor directs it to be given. The outward application of iodine is often ordered in these cases, in order that it may cause the partial or complete removal of the effusion by its action as a "counter-irritant." The Nurse should then remember that the first application of iodine usually requires to be very carefully made; the skin should be well washed with soap and warm water in which a little Condy's fluid or carbolic acid has been placed, and then, having been thoroughly dried, the iodine should be painted over the affected surface with a soft large brush. It is better to use too large, than too small, a brush for this purpose, because the application is more readily and easily made thereby, and it is important that the patient should be exposed for as short a time as possible to the chance of a chill.

Inside\_each pleural bag, then, is one of the lungs. Each of these organs is composed of a large number of minute bags called "air cells." Each tiny cell is formed of a thin membrane round which circulates the finest capillaries of the pulmonary circuit; each little bag opens into a tube which is the finest continuation of the bronchi, or breathing tubes, and the arrangement of which is well illustrated in the appended diagram. From this, you will



understand that the air which rushes into the chest, from the mouth and throat when a deep breath is taken, passes down through the bronchi into their smaller and smallest branches, until it reaches the terminal air cells.

#### (To be continued.)

# The Mew York City Training School for Aurses.

## SCHOOL CURRICULUM. (Continued from page 269.)

### Second Term. Twenty Weeks. PRACTICAL NURSING.

Lesson 1.-Surgical Operating-room.- Nurses' Technique.-How to Prepare for Operations in Private Houses.

- Lesson 2.—Hæmorrhages; How to Control. Lesson 3.—Bandages. Lesson 4.—How to deal with Surgical Emergencies.— Shock.— Fractures. — Dislocation. — Sprains.— Contusions.— Burns and Scalds. — Frostbite.— Foreign Bodies in the Eyes, Nose and Ears, and Larynx.
- Lesson 5.—Medical Emergencies.—Artificial Respira-tion; Drowning; Poisons; Medical Appliances; Medical Rounds. Lesson 6.—Diet.
- Lesson 7.--The Administration of Anæsthetics.
- Lesson 8.—How to Observe, Report and Record Symptoms.

- Lesson 9.—Pneumonia. Lesson 10.—Tuberculosis. Lesson 11.—Typhoid Fever.
- Lesson 12.—Bright's Disease. Lesson 13.—Urine. Lesson 14.—Pregnancy.

- Lesson 15.—Pregnancy continued. Lesson 16.—Children's diseases. Lesson 17.—Children's diseases continued.
- Lesson 18.—Infectious diseases.

#### General Review.

Examination.

#### PHYSIOLOGY AND ANATOMY.

- Lesson 1.-The Respiratory Apparatus; Larynx;
- Trachea; Lungs. Lesson 2.—Respiration.—Effects of Respiration upon the Blood; upon the Air within the Lungs; upon the Air outside the Body; Modified Respiratory Movements.
- Lesson 3.-Alimentation .- Preliminary Remarks on
- Lesson 3.—Anmentation.— Fremmary Remarks on Secreting Glands and Mucous Membranes. Lesson 4.—Food.—Food Principles; Proteids; Fats: Carbo-hydrates; Water, Saline and Mineral Matters; Chemical Composition of the Body; Average Composition of Milk, Bread and Meat; Concluding Remarks.
- Lesson 5.-Alimentation continued.-The Digestive Apparatus; Alimentary Canal.
- Lesson 6.—Accessory Organs. Lesson 7.—Alimentation concluded. Digestion; Changes the Food undergoes in the Mouth, Stomach, Small and Large Intestines; Summary of Digestion.
- Lesson 8.—Absorption. Lesson 9.—Elimination.—General Description of the Urinary Organs; Structure and Blood-supply of Kidneys.
- Lesson 10.-Secretion of Urine.- Composition and General Characters of Urine.



