

may require several repetitions of this part of the process. The soda solution is removed by again rinsing in warm sterilised water, temperature 100° F., and the sponges immersed in cold solution of sulphurous acid (1 in 5) for twelve hours for a final bleaching and sterilisation. This solution is made by simply adding liquid sulphurous acid to water. During this stage a plate is placed over the sponges to sink them in the solution, otherwise they are apt to become discoloured. Lastly, they are squeezed as dry as possible, and placed in carbolic lotion (1 in 20) ready for the operation. Of course other lotions may be used for the purpose. During the operation the sponges are handed to the surgeon or his assistant in a bowl of lotion. The advantages of biniodide of mercury lotion for this purpose have been pointed out. Blood is so easily squeezed from the sponges when it is used, that it is seldom necessary for anyone but the surgeon or his assistant to touch them again. The lotion in which the sponges are handed not only ensures their sterility, but also helps to keep the hands of the surgeon and of his assistant aseptic. A sponge should be taken from the lotion, applied to the wound, and returned to the lotion. It is most dangerous and objectionable to lay sponges upon the body of the patient or upon the table, or even upon the sterilised towels. They are apt to fall upon the floor, or be brought in contact with things which have not been disinfected.

Sponges which have been used for quite clean cases can with safety be used again if properly cleansed. This is done in the same way as with new sponges, except that strong soda water is necessary to get away the blood and fat, &c.

Sponges which have been used in suppurating cases should on no account be used again.

Of the Cleaning of Instruments.—The importance of this cannot be over-estimated, and I say it without hesitation and emphatically, no inexperienced Nurse should be entrusted with such work.

Instruments of the present day are made to take to pieces, which renders the cleaning of them easy, but even then there are many which need the greatest care, for instance, the roughened ends of forceps, the teeth of clamps, the inside of trocars, and the like. Forceps should be disjoined, scissors unscrewed, and any screw holes scrupulously cleaned by putting a piece of lint on a match, or something which will answer the same purpose, and threading it through the hole, turning it round in screw-like fashion. The screws themselves should be held with pincers when very small, and scrubbed. The eyes of needles need equal care, and the bristles of the instrument brush passed through each separately.

Although instruments are boiled now a days before using, I think even a boiled germ is an undesirable addition. Instruments should be put into soda-water after operation, scrubbed with a brush kept for that purpose, boiled in soda-water, dried, and polished with a clean leather, and boiled again before use. We have a few things to look at here, so that I must not further encroach upon your time, although I feel there are innumerable points about which nothing has been said; but in concluding let me add that the entire success of our Nursing depends upon the most scrupulous carrying out of our physicians' and surgeons' orders in the smallest detail, and when left upon our own responsibility let the excellence of our training, both in theory and practice, be shown in our wise and careful management of our patient. As we who work

in Hospitals know, few patients can be managed alike. Some need all persuasion; with others we must insist. Some need all the encouragement we can give them; others seem to realise no fear. In some the want of confidence in all humanity leads them to put no confidence in those who attend them. These we must by our straightforward honesty, in word and deed, inspire with trust, that they may know we speak them fair. Let us Nurse our *patient*, not our case. Let the active principle of our work be obedience. Would our army be what it is if it were not for the strict obedience of our soldiers to their commanders? What is the striking feature which stands out so conspicuously in the great events by land and sea? Is it not the quick response to discipline and command, even unto death? And shall not we, who have to fight in the ranks against disease, follow the example of our soldiers and our sailors? Now a days there seems to be a fear lest we, as Nurses, should encroach upon the territory of our doctors and surgeons. Perhaps we have brought it upon ourselves. Let us show our commanders that we are pressing forward, so that we may be better able to *comprehend* their orders, and so be better able carry them out.

The greatest artists of our day and of past days are those who have taken the most pains to cultivate the talents they were and are conscious of possessing. Shall we not in our art of Nursing cultivate this same spirit of rising higher and higher in our profession, ever emulating the bright example of those grand women whose glory has been to live for others, not themselves, and who have lifted Nursing from the mire and set it upon the eminence where we find it at the present day. (The discussion will be published next week.)

Dressing Forward.

ONE of the most hopeful signs of the times in the Nursing World is the thirst for knowledge on the part of Nurses in every position, and we cannot permit to pass unnoted the last few lines of Miss Bristow's very instructive lecture. We feel sure that those medical men who have risen to eminence in their profession, who, even in old age, are before all things *students*, will sympathise with the conscientious aspirations of the great body of Nurses who are throwing themselves body and soul into their work, and whose highest ambition is to *know*, so that they may be better servants of the sick, and worthier helpers to the medical officers under whose direction they perform their duties. That doubt should have been cast upon the excellent motives and the honourable and justifiable ambition of the leaders of Nursing reform in the public duty which they have performed, in inspiring and organising British Nurses into a powerful professional body, is unworthy of the great traditions of the medical profession, and we have no hesitation in asserting that such suggestions could only emanate from persons to whom professional progress is of little account.

A few weeks ago a mischievous manifesto, attempting to sow dissension between Nurses and doctors as a body, was published in a contemporary. The best response, on the part of the great body of the generous-minded men who compose the medical profession, has been the invitation, upon the part of the Council of the British Medical Association, to representative Nursing Societies to take part in a Conference to discuss the subject of Registration of Trained Nurses by the State.

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