

tellect. The Editorial deals with matters with which it behoves asylum workers to acquaint themselves, namely, Parliamentary matters affecting their interests. The Lunacy Acts Amendment Bill is commented on, and some of the clauses—those relating to superannuation allowances, and allowances in case of injury—are quoted *in extenso*. The matters in the Lunacy Act which affect asylum workers are carefully explained to them, so that intelligent subscribers to this useful journal are placed in possession of facts of the highest importance to them.

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*Asylum News*, although it has so recently been launched into the journalistic world, is already being used by the asylum workers as the medium of expressing their views, and there is some interesting correspondence in the present issue. One member complains that "there are some asylums where the attendants and nurses, however desirous they may be of learning their work, get no theoretical teaching whatever, and have to pick up knowledge as they can in the wards." Again, it is stated that attendants, who are anxious to go up for the examination of the Medico-Psychological Society, can only do so "through the superintendent," and therefore, however much an attendant may desire it, it is impossible to obtain its certificate, if the superintendent of the asylum, where the training is given, is not in touch with this Society. As this certificate is at present much sought after, it seems obviously unfair that the possibility of possessing it should be within the power of one individual to give or withhold. The correspondent, who gives this information, makes the practical suggestion that "attendants and nurses before entering asylums should enquire as to the training, as well as to the pay and hours on duty," from which it would appear that satisfactory information with respect to the latter are the chief inducements to the average applicant to engage in the occupation of asylum attendant. We think that the Association of Asylum Workers is wise to educate its members to a sense of their professional responsibilities, and to wait for a somewhat more uniform system of training, before asking for its workers the hall-mark of registration with the members of an organised profession.

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It will be observed that *Asylum News* has never advocated the Registration of Asylum Attendants by the Royal British Nurses' Association. On the contrary, we understand that the Association proposes to register its own members, of whom it can already show a list larger than that of the Royal British Nurses' Association.

## The Hospital World.

### THE OPERATING THEATRE, PRINCE ALFRED'S HOSPITAL, SYDNEY.

WE have received a report of the Prince Alfred Hospital, Sydney, and congratulate the directors upon the results they have achieved, and the lucidity with which these are explained. The number of patients in the hospital last year was 3,410, the proportion of occupied beds throughout the year being 93'64 per cent. The report states that "The matron (Miss S. B. McGahey) has continued to fulfil the onerous duties of her post with marked interest, ability, and energy, to the great advantage of the institution. The high degree of efficiency and discipline maintained amongst the nursing staff is mainly due to her influence and work." An interesting feature of the report is the list which it publishes of nurses who have gained certificates during the last five years, together with the appointments which they hold at present. From the number of these who hold posts as matrons of hospitals it would appear that the certificate of this hospital ranks high in the estimation of hospital authorities.

We have before us a photograph of the beautifully modernised operating theatre at Prince Alfred's Hospital, in which Sir Alfred Roberts has taken such keen interest, and of which the medical and nursing staffs are justly proud.

The main principle aimed at as the "base" upon which the success of details more or less depends, has been to establish and afford the means of carrying out, by night or day, the utmost surgical cleanliness, and thus to reduce to a minimum the chance of infection of wounds, either through the atmosphere, water, personal contact, or dressings.

The floor has been formed of strong Belgian tiles of a specially hard and unabsorbent character, it is laid with a slight incline towards the eastern side of the arena, where it ends in an open gutter 9 in. from the wall, this is cut in long lengths of thick slate, with a good fall towards each end, where it terminates in well ventilated traps.

The tiles are laid without an opening or depression in any part, all pipes being fixed above the floor. They are of copper, and nickel plated, in order that the "theatre nurse" may keep them strictly clean without the use of polishing powder, and the dirt and dust caused by it.

A range of five earthenware sinks of various sizes, with two large wash-hand basins, extend along the east wall of the arena, immediately over the above mentioned open gutter, and discharge all the wastes into it.

Each basin is supplied with hot and cold sterilised water night and day, a hose standard, supplied from the main, is placed in one corner for flushing down the floor and marble dado.

The water supply taps have been placed 3 in. above the floor level, they are of special construction, and designed to work with the foot instead of the hand, to prevent the possibility of the fingers of the surgeon or nurse being infected by handling a tap previously used by a person whose hands were not surgically clean.

The sides of the arena are faced with a dado of polished white marble, standing 5 ft. 6 in. from the

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