the patients' toilettes, that does not seem to come under the head of nursing ; a little water is sometimes given, but the patients have neither scap or towels unless provided by themselves. Those who are well enough comb their own hair, and twist it up more or less *à la mode*, according to their social status. Those too ill to do this, are left uncombed—at least, these three days no one has touched them. I shall offer to the draw more than the state the state of the stat do them myself now, for it will be best to get this started before taking a pupil. I went back to Signorina P. this afternoon. She

has found two young women whom she thinks eminently suited for nurses. One I saw, a bright, in-telligent girl, 22, chemist's daughter. She informed me at once that she was not afraid of illness, having seen a good deal of it, and that she liked making-up prescriptions. I was not surprised at her first remark, for I am now quite accustomed to the chronic exclafor I am now quite accustomed to the chronic excla-mation which greets any mention of the fact of being a hospital nurse. "How can you have the courage!" with usually the polite continuance, "You must be a saint! I should die of it; I am much too sensitive." Whereto I patiently reply that they would be good nurses because sensitive. That women who don't feel are most undesirable as nurses; and that, through sympathy for the suffering, and satisfaction in helping them, one forgets even to think of the need of "courage " or " saintliness."

However, I remember my own fear of witnessing operations, and that even of one or two nurse-friends of many year's experience, so do not really wonder at girls here dreading the idea of hospital sights and sounds, for they have *no* example of the overcoming of that dread, except by doctors (who symbolise courage), and nuns (who are synonymous for "saintliness" The girls second assertion was more difficult to deal with, as opening a vista of pretension to more "amusing" work than that of the ordinary probationer. To make up prescriptions before knowing how to wash a patient is typical of the education of my adopted compatriots. The super-intelligence of Italians is constantly their great drawback; they learn things so quickly that they dislike repetition, and prefer inventing new methods. Cooks rarely repeat the same dish, lacking precision in measurements; dressmakers seldom cut accurately from want of patience in measuring, and so on, via discorrendo. Therefore, one's only chance of producing thorough nurses seems one's only chance of producing *thorodyn* horses seems to be in finding pupils who have no previous technical knowledge, and in instilling the necessity of the most monotonously precise repetition of humble duties on them from the beginning. I took the girl's address, therefore, promising to let her know if I could take her, and the other "aspirant" net appearing. Signers gave me her address that I

not appearing, Signora gave me her address, that I might write and tell her to come to me. It will be better really to talk to her alone.

November 11th .- I began to comb the bad cases this morning, but found it was not altogether an easy matter. Two of them-a Florentine, with cancer, poor soul, and a victim of Basedow's disease-were pleased to be released from entanglement, and tidily plaited. The third, with nephritis, the Suora declared must not be touched. She has been four days' rolled in a blanket from the top of her head to the soles of her feet. They change it when wet from perspiration, but it is still a very economical method, though not a comfortable one. It obviates the need of flannel night-

gowns, and of a second blanket (as we use them in England, one over, one under). But these patients, it seems, must not be touched either with water or comb, lest something terrible should happen—a chill, the Suora said, resulting in fever. Of course I had to accept her veto, and left the poor woman, the Suora pulling the blanket right over her forehead, with injunctions to "sudare" (perspire). Suor M. also forbade touching a heart case, saying.

she had known a patient who died in having his beard shaved, and who was also "cardiaco." There remained only an hysterical case, but a very had one, incessant vomiting, and great emaciation. I dreaded attempting her, but her hair was terribly matted, and Suor M. apparently had no folk-lore about hysterical patients, so did not forbid my tidying her. Rosina herself though had strong views on the matter—"Do not touch me, Signora," was all I could get from her, and no amount of coaxing could convince her that she would be more comfortable, or that I would not fatigue or hurt her. Probably having heard the discussion over the others (the ward is very small, and Suor M.'s voice very penetrating) she felt a point of honour to be no less worthy of "égard" than her cardiac and nephritic companions! I took out the hair-pins whilst. trying to distract her, and attempted to pass the comb through the tangled mass of long, dark hair, but it was impossible to keep her still, she rolled from side to side, always repeating, "Do not touch me," and finding that I quietly persisted, bethought herself finally of screaming, doing it so vigorously that there was nothing for it but to desist. Suor M. came and helped me just twist up the still tangled bundle, and fasten with her ping coveral cudents covering in and holver with hair-pins, several students coming in, and looking extremely amused, whilst commenting on the fact of the patient having forgotten to vomit. I was profoundly thankful I had no pupil present at

this scene, for it would have been difficult to explain why one had thought it right, first to attempt a task, and then to renounce it. It gave me an insight though into the undisciplined nature of Romans. No one seemed to think it extraordinary of Rosina to insist on getting her own way, though several patients told me they thought it very ill-mannered, "ignorante" of her not to accept so "charitable" an office on my part.

November 13th.—A ghastly scene at the hospitaling this morning. I had come home at 12.30 to lunch, and was quietly reading whilst eating it, when my landlady rushed in, exclaiming, "Signora, they have killed a suora !" I could not believe it for some time, but it was only too true.

A discharged patient (tubercular), who had been reported by the nun of his ward for bad language and singing of unclean songs, had threatened her, on re-ceiving his dismissal, and had consequently been for-bidden admittance to the hospital. This was more than a fortnight ago ; but to-day the porter seems to have relaxed his attention, and the man managed to slip in amongst the crowd of visitors (some 200 or 300) and to find his way to the ward. The sister was alone in the kitchen, and he stabbed her there, and again in the passage, along which she struggled to escape him, and where he left her dying, whilst he escaped.

I think it is too awful that no one tried to prevent him ! He was known to have vowed vengeance, and yet the male nurses let him pass through the ward and never followed him; only one feeble convalescent



