

Ireland, as well as in England and Wales, such additional duties ought not to be imposed upon the Council unless a grant be made by the Treasury to meet the expenses involved. (See Minutes of Council, Vol. XXXII., 1895, p. 86.)

(12) That undue assumption of responsibility by registered midwives shall be specially provided against, and legal protection afforded to the public against malpraxis.

(13) That provision should be made in the Bill to make it penal for any person or body of persons in the United Kingdom to grant, or to profess to grant, any certificate in midwifery, for the purposes of this Act, to any woman other than that provided for in any Act that may be passed.

(14) That there should be statutory control and inspection of private lying-in homes.

(15) That all penalties recovered under the Act be paid to the Treasurer of the Midwives' Board.

(16) That this Act should be made to apply to Scotland and Ireland, as well as to England and Wales, in which case the constitution of the Midwifery Board should be altered accordingly.

JAMES GREY GLOVER,
Acting Chairman

(in the absence of Sir RICHARD T. THORNE
from illness).

March 25th, 1898.

NOTE BY MR. CARTER.

I desire to place on record my dissent from many of the opinions expressed in the foregoing report, whether they are introduced into the portion said to be a "description" of the Bill, or into the subsequent "considerations and recommendations."

R. BRUDENELL CARTER.

NOTE BY MR. BROWN.

Whilst agreeing generally with the report signed by the Acting Chairman of the Committee, I desire to suggest, further, that the Privy Council be informed that in any Act of Parliament regulating midwifery practice by women, it is desirable that the title or titles which a person registered under the Act may take or use, shall be strictly defined, and that the title or titles should clearly indicate that the holder is to be regarded rather as a nurse than as an independent practitioner of midwifery. I would suggest the titles "midwifery nurse" and "obstetric nurse" as sufficiently distinctive of the calling of those women whose names are permitted to be placed on the Register, and no other title or description should be used by them. The use of such titles as licentiate or diplomate in midwifery or obstetrics should be strictly prohibited.

GEORGE BROWN.

Hints to Amateurs.

(Continued from page 259.)

THE bedstead should, if possible, be an iron one with a wire woven mattress. One horse hair mattress is all that will then be required. This, as all good housewives know, should be covered with a case of unbleached calico. A feather bed should never be tolerated in a sick room. A low iron bar at the foot of the bedstead adds much to the com-

fort of the patient by preventing the mattress from slipping down. The bedstead itself should not be more than three feet wide. It is a mistake in cases of long illness to make the bed with an under blanket. The bolster should be rolled in the under sheet, and particular care should be taken that the bolster ends of the sheets are tidily tucked in. The difference between a professional and an amateur nurse may frequently be known by this one fact alone. Over the bottom sheet should be placed a draw sheet, folded double, not less than two and a half yards in length, the length of the draw sheet being of course at right angles to the length of the bed. The free edges of the draw sheet should be nearest the foot of the bed. Attention to this detail adds much to the comfort of the patient, as, if the draw sheet is put in the reverse way, it will inevitably get wrinkled under his back, a fact which even trained nurses do not always take into consideration. If the patient perspires much a light blanket should be placed next to him, this will be much more comfortable for him besides diminishing the risk of chill. The upper part of the bed should then be made in the usual way.

A number of plain, soft night-dresses form one of the greatest comforts an invalid can have. Night-dresses must be large enough to be put on and off easily when in bed, and even then if a patient is weak this is a serious matter; they should be fine, or old enough to be soft, and the prettier the better, provided they are not too fanciful. Change them night and morning, provided the patient is in a condition to bear moving. Frequent changes of linen prevent restlessness and discomfort. A flannel bed-jacket should add to the comfort of the patient, and diminish the risk of chill. Should there be much perspiration soft flannel or nun's veiling night-dresses for a woman, and flannel or flannelette pyjamas for a man should be insisted upon.

The amateur nurse can add greatly to the comfort of the invalid by the careful choice of her own attire. She should wear a washing dress, made plainly, of course, which will enable her to at all times appear neat; nothing is more annoying to an invalid than a careless, untidy-looking nurse. She should never walk on tip-toe, or talk in whispers, and should at all times avoid saying anything in the patient's room which she does not wish him to hear. With many patients, even when they are apparently semi-conscious, the sense of hearing is preternaturally acute.

Food or nourishment, whether solid or liquid, must be perfectly fresh and well-cooked and plain. Rich food and fancy dishes should never appear on an invalid's tray. All food should be served in small quantities, and daintily set out. Spotless linen, bright silver, and even a tiny glass of flowers on the patient's tray, often make all the difference between appetite and no appetite.

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