

second visit to this hospital, but I am not surprised to find that its funds are not in a flourishing condition.

Your's truly,
A DETESTER OF DISCOURTESY.

To the Editor of the "Nursing Record."

MADAM,—I am glad to observe a letter in the last issue of your valuable journal, on nurses' manners. I should be obliged if you will express an opinion on two points of professional etiquette: is it good manners and permissible in a private house, for the nurse to sit to receive instructions from the medical man? And should a private nurse address the medical man in charge of the case as "Doctor" or "Sir?"

Yours truly,
M. D.

[There can be no doubt about the answer to these two questions. A nurse on duty is subordinate to the medical man, and good manners and discipline require her to rise upon the entrance of her superior officer, and also to address him as "Sir." A nurse who fails in these marks of professional respect towards her senior officer proves herself a woman lacking in good manners, and in a knowledge of professional etiquette.—ED.]

"BARBAROUS BRUTE FORCE."

To the Editor of "The Nursing Record."

DEAR MADAM,—I always look forward to, and read with very great interest, the letters by your special American correspondent, with whose views on nursing affairs I usually find myself in sympathy. After her description of the poor soldiers during the late war, I was doubly pleased to note that Red Cross matters may find a place in next year's programme for the International Council. Let me urge those responsible for the Nursing Section to find ample time for the discussion of all that relates to the nursing of the sick and wounded soldiers in all lands. Surely these brave fellows, by whose courage and by the sacrifice of whose lives we live our happy protected lives at home, should receive the very best care and reward that the nations can provide for them. No country, as far as I can learn, does nearly enough for its sick and wounded soldiers, or why should so many of them die as paupers in the Workhouse?

AN APPRECIATIVE READER.

[We are also deeply interested in the care of sick and wounded soldiers and sailors, and we have every hope that under the heading of "Nursing and the State," a session devoted to "The Nursing of Wounded in War," may be found practicable in next year's Nursing Conference.—ED.]

A STANDARD OF TRAINING.

To the Editor of "The Nursing Record"

DEAR MADAM,—I was very pleased to see in the NURSING RECORD last week, that you do not wholly condemn the small hospitals as training schools. I am quite sure that in a hospital of 60 beds and over, which is efficiently organised, a training can be given which should qualify a nurse well for her subsequent career. Take, for instance, a hospital having 24 medical and gynæcological, and 24 surgical beds for adults, and 12 cots in a chil-

dren's ward, and, in addition, what is, I think, a necessity in small hospitals, a small ward for diphtheria; you have quite enough material to train upon, and with work in the operating theatre and in the out-patient department in addition, very competent nurses can be turned out. I speak with some knowledge of both large and small schools, for I hold the certificate of one of the largest London training schools, and subsequently went as ward sister to a general hospital of 74 beds, where the work was excellent. I can only say that I learnt more of operation work than I ever did in my training school, and saw a greater variety of cases, both medical and surgical. The large training schools have their own advantages, and I am in no way saying this to the disparagement of my alma mater. But I do say that the small hospitals are capable of affording excellent training, and, this being so, I think it is only fair that their pupils should be recognised as trained nurses.

Yours faithfully,
JUSTICE.

To the Editor of "The Nursing Record."

DEAR MADAM,—I read with much interest your remarks upon the standard of nurse training in your last issue. It seems to me that the standard of 100 beds is a very fair one, and that it would be hardly possible to give a good all round training on a smaller number. I admit this seems a little hard on hospitals having a less number of beds, and which may, nevertheless, do excellent work, but why should not two or more of these hospitals combine, and ask for recognition as training schools in such combination? I think this would meet the difficulty. It will be very interesting to hear what our American colleagues think about this subject at the Congress next year; but, in America, everything is done upon a so much larger scale than here, that I hardly think they will support the claims of hospitals of under 100 beds to rank as training schools.

I am, Dear Madam,
Sincerely yours,
MATRON.

MATRON AND SECRETARY.

To the Editor of "The Nursing Record."

DEAR MADAM,—I have been much interested in the correspondence going on lately headed "A Question of Discipline," and venture to ask you for space for another question. What should be the relation of a Hospital Matron to the Committee? By that I mean, should or should not the Matron's department be included in the Secretarial? I am the Matron of a hospital where I never meet the Committee officially, and have to communicate with them through the Secretary. I do not find this method satisfactory, as I never present my own case, or hear arguments for or against it when discussed in Committee. I shall be grateful if your readers will give me the value of their experience and opinions with the same frankness with which they have discussed the Matron and House-Surgeon. The conclusion of that discussion seems to be that if each officer is made responsible for definite duties, there should be no fear of friction, unless people are personally pernicious.

Yours sincerely,
"SOMEWHAT AN OUTSIDER."

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