

when she left the Training School with her certificate. A medical man must take special courses in fever and midwifery before he is considered qualified, and the nurse ought to do the same before calling herself a trained nurse. A short time ago she had to interview nurses applying for a vacancy on the private nursing staff of a Hospital. One after another was asked if she could undertake midwifery and fever cases, and if she understood epilepsy? Not one of the trained certificated nurses was qualified for any of those three branches. Hardly any nurses knew anything of the new open-air treatment of tuberculosis. It was obviously impossible for a General Hospital to take up these branches. Why not have Special Hospitals affiliated to the General Hospitals so that nurses could have the training and discipline of the General Hospital combined with training in special subjects? Surely the Matrons' Council was the proper authority to settle the curriculum of the training of nurses.

MRS. BEDFORD FENWICK (London) said there was an idea in this country that discipline in America was not so good as in England, that there was more liberty of the subject, of the individual, that obligations to the community were not so fully recognized. She thought it would be interesting to the meeting if one of the American Matrons would give information on that point.

MRS. QUINTARD (New York) thought Mrs. Fenwick was correct in her opinion. Probably, hospitals in the United States were not so strictly disciplined in certain ways as in England, and this might be the outgrowth of the independent feeling of women of all classes of society and in different professions. Graduated nurses in America were fully independent, and hospital training was more on the line to make them so; at the same time, they were very strict on certain points, and in her own hospital if the probationer was not conscientious and up to the mark, she was dropped out of the School. Socially, nurses in the United States had a very pleasant time in the Training Schools. During the three years' course they were so shut in, and had such great distances to go in order to get any outside enjoyment, that they had Social Evenings provided in the Nursing Homes, to which they were allowed to invite their friends. The discipline in the School, however, was quite as strict as it was possible to make it.

MRS. GRAY (London) deprecated the fact that scrubbing and much elementary work was being given up in many Hospitals, and, in consequence, probationers got to the best part of the work before they understood ward management. Every probationer should learn to do hard physical work before undertaking the responsibility of actually nursing the sick. In some cases, no

doubt, the physical strain had been excessive, but she was sure a little of it was an excellent thing, and where cleaning was part of the training, better nurses were turned out.

MISS WATKINS (Cape Colony), speaking from the nurse's point of view, considered that working under strict discipline was the greatest comfort to everyone concerned.

MISS STEWART (London), replying to the various points raised, felt it had been shown that of late years discipline was somewhat relaxed. Undoubtedly, the tendency of the present day was to bolster up the weaklings, and she was inclined to agree with Miss Pell Smith. With regard to Miss Todd's idea of affiliating small hospitals, it would mean a very difficult and laborious reorganization of the profession; it might be done sometime, but not soon. As to training nurses in specialities, typhoid fever was nursed in all General Hospitals, and diphtheria in many. All nurses were not taught to nurse every kind of disease; even in small hospitals they were taught the elements, but they could not learn the A B C details of every possible case; they did not want to show nurses how to nurse everything, only to train their minds and bodies so that when a new idea or a new case was presented to them and explained, they might be able at once to grasp the important points. Nurses might not know the ins and outs of the fresh-air treatment yet, it was a very new treatment, but she had no doubt a well-trained nurse would find the details quite easy to grasp when they were explained to her.

A Hospital Joke.

THE *Indian Medical Record* is responsible for the following story:—

A dock labourer having sustained an injury to his hand went to a hospital for treatment. In due course his wound was examined by a surgeon of some repute and also by fifteen students.

"Now, Sir," said the Surgeon, to the nearest student, "do you think an operation ought to be performed on this patient?" The Student, at a loss what to answer, at last ventured to say he thought not. Saying nothing to this the Surgeon passed the question on to the next, who took his cue from the first student, and the whole fifteen followed on.

"Then," said the Visiting Surgeon, "you are all wrong, gentlemen, for I am going to operate."

But here the patient broke in:—

"Oh no, you ain't, mister; these 'ere fifteen doctors are agin' a hoperation, an' they ought to know better than you, so I ain't agoin' to 'ave one."

[Exit patient, amid general discomfiture.]

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