impossible, and it could be attained by means of a carefully prepared Registration Bill.

The details of any Bill will require watching with most jealous care on the part of all those interested in the training of nurses, both to see that the larger schools are not made unduly powerful and that institutions which do not contain the material for a sound training, should not be allowed to foist imperfectly trained persons upon a confiding community. I have been astonished that the "Proposed Midwives' Bill" I have been has excited so little attention amongst nursing A Bill which proposes to confer upon circles. persons who have undergone certainly not more than three months' training, all the rights and privileges of a fully qualified Medical Practitioner, should be denounced by the whole nursing world.

This Bill very nearly slipped through the House of Commons, and it was only at the last moment that it was met by sufficient opposition to secure, at any rate, a delay. One of the qualifications which I endeavoured to get attached was that no person should be allowed to present herself for examination as a midwife unless she could produce a certificate of training from a recognised School of Nursing. This was, of course, not accepted, but I hope that, should anything further be heard of this Bill, the nurses will see that their rights are not overlooked in the matter, which presents this anomaly that no trained nurse could attend to a case of labour unless she had passed at least three years in the acquisition of knowledge at a recognized School, whereas she would be under the authority and would have to obey the orders of a person who could easily get her qualification in three months.

Amongst others, this Bill has been pushed forward by a section of medical men interested in the manufacture of what is really a bogus medical qualification, viz., the Licence of the Obstetrical Society.

The medical man will seriously consider whether the Registration of Nurses will tend to introduce a dual control into the sick room. It is essential for the well being of the patient that the authority of the medical man should be unquestioned, and that absolute and implicit obedience should be given to his orders.

Personally, I do not think that the State recognition of a nurse's qualifications will increase any tendency she may have to assert her independence of medical control.

I doubt very much whether a nurse really believes at all in a Physician, and I am sure that her respect for a Surgeon varies with her recognition of the smell of his lotions and with her approval of the colour of his dressings.

I fear there is a great tendency on the part of those who are leaders in the nursing world, to encourage any spirit of insubordination to medical authority which may exist. The NURSING RECORD, week in and week out, asserts that medical men know nothing about the details of practical nursing, but such an assertion is valueless unless accompanied by some proofs, and the only statement advanced in its support that I have been able to find is, that many recently qualified men do not know how to take temperatures, to administer hypodermic injections, enemata or vapour baths. I can only characterise this as a ridiculous statement, and say that unless a man has made very bad use of his opportunities for observation, there is no detail of nursing with which, at the end of his hospital career, he should not be perfectly familiar.

To quote from the NURSING RECORD :---

## EVOLUTION.

"Years ago, when nurse-training, and consequently trained nurses as we now understand them, did not exist, the clinical work in the wards included the performance of duties now relegated to the nurse. The taking of temperatures, the administration of hypodermic injections, of enemata, of vapour baths, and many other practical details were performed by the student in the course of his career. Medical practitioners of about 50 year of age therefore possess usually some considerable knowledge of practical nursing details. The student of to-day, however, finds all this work done for him by the modern nurse, and it is only those students who are specially keen who manage to get an insight into the details of nursing which, after all, form the basis of successful medicine and surgery.

## MEDICAL EDUCATION.

Medical students must realise that the evolution of medicine and nursing has left them high and dry, no doubt on a pinnacle of scientific kuowledge, but ignorant of the practical details of nursing, which were, and still are, the basis of successful general practice. They will then demand nursing, as apart from treatment, as part of their education.

I very much regret to see these constant remarks, which are calculated to stir up strife, and embitter the relations between those who, for their own and their patients' interests, should work absolutely in harmony.

In my public position I mix with a great number of medical men, and it would be idle to deny that there is a deep feeling of distrust on the part of the practitioner towards the trained nurse as a class, and that this feeling is based upon solid grounds. Here is an incident which was related to me recently.

A lady was suffering from symptoms which pointed to grave disease of the stomach. The family practitioner engaged, a nurse from the Nursing Home of one of the Metropolitan Hospitals, to which she had been attached for

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