the nurse's duty to clean the part of skin to be punctured with hot soap and water followed by a good scrubbing with one in five hundred perchloride of mercury solution or one in twenty carbolic lotion. It is the nurse's duty to keep the throat and fauces clean; the organisms in the membrane cannot of course be destroyed by this, but it is probable that care of the throat may prevent lung complications. If possible, the fauces may be swabbed out with glycerine of carbolic, but in quite young children this may cause exhausting struggles, and it is better to blow in a little powdered sulphur. While making these applications the nurse must guard herself very carefully against any fragments of membrane which might be coughed up in the process. As mentioned above the nurse must watch very carefully the breathing, and if there be much dyspnœa the doctor must be sent for at If tracheotomy has been done, the once. nurse must constantly be at the bedside, and at the least sign of dyspnœa must clean out the tube with a feather dipped in one in forty carbolic solution, and also remove with forceps any membrane which is coughed up and place it in one in twenty carbolic. The inner tube should be removed every half-hour to be cleaned, anyhow for the first day or so. The temperature should be most carefully regulated, as the air goes direct to the lungs without being warmed and moistened through the natural passages. If the child has difficulty in swallowing, the nurse may have to administer nutrient enemata, or to feed the patient by a soft indiarubber catheter.

All secretions from the nose should be removed with a piece of lint or soft rag, which is immediately burned. All bed clothes and the linen of the patient must be boiled before being sent to the laundry.

The child must be kept isolated for a month in a mild case, and for six weeks in a more prolonged case.

If the patient during convalescence shew signs of diphtheritic paralysis it is the duty of the nurse to see that he is rigidly confined to bed and not allowed to sit up till the doctor orders it. She should take the rate of the pulse and breathing at least twice a day, and if either become rapid should at once inform the doctor in attendance. If the swallowing become difficult she may have to feed by a catheter.

(To be continued.)

Motes on Practical Mursing.

PREPARATION OF OPERATING ROOM SUPPLIES AND THE OPERATING ROOM IN HOSPITALS AND HOMES.

By Hanna Kindbom,

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Needles.—Needles vary a great deal, according to different operations and surgeons. Every surgeon has his preference, and an operatingroom nurse should make herself thoroughly acquainted with the needles, their suitability to the parts applied, their mechanism, and the manipulations. Clean the needles well by running them through a bag filled with powdered pummice stone or sapolio, and then run them firmly through a gauze pad, and sterilize for twenty minutes in a per cent. Soda Sol.

Needles are kept free from rust if they are laid in flannel saturated with linseed oil, or in oilpaper, talcum powder, or chalk. They should be handled with forceps in preference to the hands.

Instruments.—A nurse should be thoroughly acquainted with all instruments used, their names, mechanisms, and purposes. They should all be made with metal handles, and readily taken apart for cleaning. Being very expensive and easily broken, the nurse should handle them with skill and care.

Every surgeon has his choice, and the nurse should not take upon herself the responsibility of selecting them for different operations unless she is trusted by the surgeon to do so. It is her duty to see that all instruments are in good order; edges sharp, and well protected during sterilization. They are best cleaned after an operation by first rinsing them in cold water to remove the blood, after which they should be boiled in I per cent. Soda Sol., removed from the Sol., scrubbed well with Sapolio, washed well in hot water, then dried and polished with a soft clean cloth.

In moist climates it is best to lubricate the instruments slightly, either with sweet oil, glycerine, or vaseline; then placed in their respective cases, or wrapped in soft, white flannel, being careful that all sharp edges are protected with a thin piece of absorbent cotton.

Before using these instruments again, they should be well washed in hot soap-suds, that all fatty substances be removed, this being most thoroughly accomplished by using a piece of soft gauze, after which they should be rinsed in hot water, and sterilized as follows —

r.—Use a reliable steam sterilizer, and sterilize

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