

Notes on Practical Nursing**THE COUNTING OF SPONGES IN ABDOMINAL SURGERY.**

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Among the many essential things for an abdominal operation, is an absolutely correct sponge count. While the surgeon is directly responsible to patient and friends for the successful carrying out of the work he has undertaken, it is nevertheless true that many of the details are performed by trained assistants, either doctors or nurses, and by common consent the sponge count has become a part of the nurse's duties in the operating-room.

It is a matter for regret that we have to acknowledge that mistakes have been made, resulting in the loss of life, but it is true; and so long as "to err is human," the possibility of such mistakes will always exist. To guard against them, some surgeons suggest having specially trained surgical nurses; others have devised wire racks and different mechanical devices for putting the soiled sponges on for accurate counting during the operation; while still other methods are practised in different hospitals. But care during the operation (no matter how great) is not sufficient. It must be exercised *from the very beginning of the sponge making*, and kept up systematically to the end, so that if what seemed impossible should happen and a mistake occur, it would be detected at once, and the responsibility fixed upon the person who made it.

The system in use at Harper Hospital, Detroit, Mich., probably has some features peculiar to itself, and, as it has been tried and proved correct for several years, it may not be amiss to mention the principles that underlie it, as well as its mechanical details.

When the nurse enters the operating-room for the training there she is, from the day she enters until she leaves, constantly impressed not only with the importance of all the work peculiar to that department, but especially with the following points:

1. That a mistake in the sponge count is just as serious as would be the administering of a wrong dose of the most deadly drug.
2. That she is given a system so accurate, that if followed, no mistake is possible.
3. That every bit of sponge work she does she will be held personally responsible for.
4. That any error made by her will most certainly be traced back to her, and that she will be held accountable to the surgeon for it, *no matter where she may be at the time.*

This system has commended itself to both surgeons and nurses, as much for its simplicity as for its accuracy. It is elastic enough to satisfy the most extravagant surgeon; it is so simple that "a wayfaring man, though a fool, need not err therein." The nurse undertakes it without fear, and the surgeon knows that his needs will be satisfied, while, if he is a particularly nervous man, he can verify the count at any moment, with almost no loss of time.

The following points have been observed in the selection of this system:—

1. The number selected for use was the square of five—viz. twenty-five; *and no other number* is allowed to be made up for any purpose whatever.

2. The sponge is *always* made with *one* selvedge, and thus it is distinguished from any other piece of gauze used in the operating-room.

3. Each twenty-five sponges is done up in a separate package labelled "Twenty-five Sterilised Sponges," *signed by the name in full* of the nurse who made them, dated, and immediately placed in the sterilising bag, and left there until after the third consecutive sterilisation, when it is removed to the supply-room, ready for the final sterilisation just before the operation. The label is written in ink and securely fastened on each package.

4. The sponges are uniform in size, a measure being used to cut them by, size $7\frac{1}{2}$ inches by 18 inches. To make them, the gauze is folded with the selvedges together, then folded again, and once again. It is then laid flat on the table and *never moved* until *five* sponge lengths have been cut off. This is the *first* count. As these five lengths are picked up and laid one on top of the other, they are again counted, making the *second* count. Again the gauze is folded, the same as before and *five* more cut, and *counted the same as the first group*. The second group is laid *across*

the first one { first group | second group | thus, —not straight on top of it. Treat each succeeding group this way until you have five groups, each containing five sponge lengths, and each group lying across the preceding one. Next count these groups as they stand in the pile, making the *third* count.

Place a towel to the right and another to the left on the table, and draw the pile toward you without disturbing the groups. Open each piece and cut it in *two*, placing one to the right and one to the left, repeating until all have been cut. Roll up the one towel carefully, until the sponges in the other have been made. As each sponge is made lay it on the towel, one against the other, until there are *five* in a row, then begin the next row, treating in the same manner as the first, and repeat until you have *five* rows, each con-

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