panophthalmitis, or septic infection of a wound; thrombosis of the ophthalmic veins and cavernous sinus; lastly Mules' and Frost's operations, in which a glass globe is stitched into the stump after removal or evisceration of the eye.

In all these cases except in the last the surgeon must be summoned, as the condition is an urgent one admitting no delay. The nurse may relieve the pain temporarily, which is almost always very severe, by very hot fomentations of antiseptic lotion. The pain after the operations of Frost or Mules is most readily relieved by morphia. The swelling can usually be kept within bounds by iced compresses.

The nurse must recognise several forms of redness (injection) of the eye. The most common and least serious is that of simple conjunctivitis. Here the redness is found over the greater part of the eye, but on the whole is more marked away from the cornea. The individual vessels are distinct, lying in the conjunctiva, and anastomosing into a bright red network, whose contents are easily emptied by light pressure, leaving the underlying bluish sclerotic clearly visible. There are usually to be seen flakes of mucus in the culde-sac.

Another form, and one only less common than the preceding, is associated with the presence of papules near the cornea, to each of which runs a leash of delicate, almost parallel, conjunctival vessels.

Much more important is the deep "ciliary" injection. This is specially found in the circumcorneal zone, and appears as a rosy ring, about $\frac{1}{16}$ to $\frac{1}{16}$ in. in diameter, round the cornea. The vessels affected here are the deeper division, and therefore since they are seen through a layer of semi-opaque bluish tissue, we cannot distinguish the individual branches, nor can we empty them of their contents by light pressure. The rosy colour also is due to the superjacent tissue.

The superficial and deep are often found coexistent in the same eye. When this is the case, the superficial can be emptied and the deep zone stands out more distinct than before. This form is found with keratitis and inflammatory affections of the uveal tract.

In glaucoma in different stages two forms of injection are found: in the acute attack the appearances are like those just described as ciliary injection, but there is more venous engorgement, and the colour is more definitely purple than in the arterial injection of iritis. In the last stages, a few larger distended veins are seen tortuously winding over the blue sclerotic.

All these points will be dealt with again as the individual diseases are discussed.

(To be continued.)

Appointments,

MATRON.

Miss L. Mary Paine, the recently appointed Matron of the Hospital, Gravesend, having resigned the appointment for personal reasons, Miss Bessie Coleridge Davis, one of the selected candidates has been elected to fill the vacancy. Miss Davis received her training at King's College Hospital, where she also held the position of Night Sister. She has also been Matron of the Cottage Hospital, Bromley, Home Sister and Housekeeper at University College Hospital, Sister-in-Charge of the Cancer Wing at the Middlesex Hospital, and Night Superintendent at St. George's Hospital.

Miss F. K. Monkhouse has been appointed Matron at the Borough Isolation Hospital, Darwen. She was trained at St. George's Hospital, London,' and has held the positions of Charge Nurse at the South Eastern Hospital, New Cross, Ward Sister at the East Dulwich Infirmary, and Home Sister at St. Leonard's Infirmary, Shoreditch.

Miss May C. Robertson has been appointed Matron at the Victoria Cottage Hospital, Kington, Herefordshire. She received her training at the Children's Hospital, Gloucester, and Guy's Hospital, London, and has held the position of Nurse at the Cottage Hospital, Wellingborough.

Assistant Matron.

Miss Lucy Sharrock has been appointed Assistant Matron at the Isolation Hospital, Norwich. She was trained at the Royal Albert Edward Infirmary, Wigan, and has held the positions of Charge Nurse at the Brook Hospital, Shooter's Hill, and Sister at the Rotherham Hospital, the Suffolk General Hospital, Bury St. Edmunds, and the National Orthopædic Hospital, Great Portland Street.

Miss Susan Kerr has been appointed Assistant Matron at the Stirling District Asylum, Larbert. She received her training at Charing Cross Hospital, and subsequently was appointed Sister at the Royal Hospital, Portsmouth, after which she took Night and Day Sister's duties alternately at the Greek Hospital, Alexandria.

SUPERINTENDENT NURSE.

Miss F. Ewbank has been appointed Superintendent Nurse at the Union Infirmary, Hitchin. She received her training at the Royal Hospital, Salford, and has had some experience of private nursing in connection with the Victoria Home, Bournemouth, was Charge Nurse for over four years at the Hahnemann Home, Bournemouth, and Charge Nurse, for three years, at the Ecclesall Infirmary, Sheffield.



