

how all-important it is to the well-being of the patients, how futile is any reform which does not include that of the nursing department. In short, the good work of women is essential if the work of a hospital is to be satisfactory. When hospital authorities do not realise this fact of paramount moment, then the work of the whole institution suffers.

I am, Dear Madam,
Yours faithfully,
A BELIEVER IN DISCIPLINE.

Notices.

OUR PRIZE PUZZLE.

Rules for competing for the Pictorial Puzzle Prize will be found on Advertisement page VIII.

Comments and Replies.

Mrs van Stockum, Amsterdam.—We should advise the nurses you mention to obtain the *Nursing Directory*, issued under the authority of the Matrons' Council, and published at 11, Adam Street, Strand. It contains reliable information as to the various nurse-training schools, and full particulars as the conditions of service in all the more important ones. It is not unusual for nurses who sign a three or four years' agreement, as the case may be, to receive from the first a small salary. We should advise their applying in the first instance to Miss Stewart, Matron of St. Bartholomew's Hospital, London, E.C., or Miss Monk, Sister-Matron of King's College Hospital, Lincoln's Inn Fields, London, W.C.

Colonial.—Mr. J. W. Pridmore believes from experience gained during eight months' campaigning in South Africa that veldt sores have a bacterial origin, and has made some interesting observations on their relation to the disease

known as horse tick. (1) In cold weather and high altitudes horse tick is rare, and veldt sores disappear. (2) They are more common amongst soldiers brought into contact with horses, namely, the cavalry and artillery. (3) Amongst officers veldt sores are unknown, as they do not groom their horses. It has been found that the best dressing for these sores are wet, mild, antiseptic applications. The use of ointments is not advisable.

Anxious Mother.—The use of bottles for infants that have long india-rubber tubes has now been superseded by the more hygienic bottles having a short teat which can be easily turned inside out and thoroughly cleaned, or by a straight cell having an artificial india-rubber breast. The only advantage—a very questionable one—of the long-tube bottle was that the infant could be left to draw its contents, while the bottles having only a teat must be held for it till the meal is finished.

Certificated Nurse.—The operation of tracheotomy used to be seen by most nurses during the course of their general training. There are two reasons however to account for the decreasing numbers of tracheotomies in general hospitals—(1) the fact that diphtheria is now much more generally sent to the fever hospitals, and (2) the introduction of serum therapeutics, which have revolutionised the treatment of diphtheria, and made tracheotomy a comparatively rare operation.

Perplexed.—We do not think that probationers should be taken to the operating theatre unless it is recognized that they stay there throughout any proceeding which may be found necessary in the course of an operation. Neither do we understand how a nurse can be expected to be conversant with her duties if called to a case of hernia in a private house, if she is not allowed to be present at operations of this kind in hospital. One direct effect of the presence of nurses in the operating theatre has been to ensure that the conditions under which operations are performed are decent and seemly.

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STANLEY SMITH, Secretary.

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