

tion, and dies at last, a prisoner of the French, in an impromptu hospital.

This part of the book is most emphatically the best. Mr. Capes is always at his best when following the varying fortunes of two or three characters with a breathless personal interest; but Ninon does not charm as did the young girl in the adventures of the Comte de la Murette. Her author has not taken so much pains with her—or does not know her so well.

There is real pathos in the final scenes of the life of the poor creature who may or may not have been Dauphin of France. The idea is a wonderful one, and is on the whole worked out with the skill of a practised hand; one touch only seems wanting to make the romance a great one.

G. M. R.

A Woman Doctor.

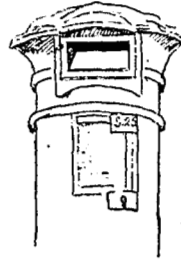
I know a woman
Who lives life with a childlike zest
And has a heart for all things human;
And well she loves the world, and best
Whatever in the world is loveliest;
Yet cannot wholly scorn the rest—
Vice, dirt,
And poverty, and helplessness, and pest.
Not hers to avert
From the prone wretch beneath the wayside palm
The virtuous Levite skirt:
She asks not, What is his desert?
But, Is he hurt?
That found,
She pours her cunning oils into the wound
And tends the wastrel with the costliest balm.
For this she made
Herself a Good Samaritan by trade:
Cloaked her large heart
And bounteous feeling
Behind the faculty and art
Of healing:
That oftentimes those whom she relieves
Give, kneeling,
Thanks for that day they fell among the thieves.
—F. E. G., *Westminster Gazette*.

What to Read.

- “British Nigeria.” By Lieut.-Colonel Mockler Ferryman.
“Charlotte Brontë, George Eliot, Jane Austen: Studies in their Works.” By Henry H. Bonnell.
“The Unemployed and the Powers of the Guardians of the Poor.” By J. Theodore Dodd, M.A.
“Is Liberty Asleep?” By Allen H. Bright.
“The Magnetic Girl.” By Richard Marsh.
“The Promotion of the Admiral.” By Morley Roberts.
“A Red Red Rose.” By Katharine Tynan.

Coming Events.

- Meetings to discuss State Registration of Nurses:—
March 19th.—Royal United Hospital, Bath, 3.30.
March 26th.—The Pioneer Club, 5, Grafton Street, St., W., 8.15.



Letters to the Editor.

NOTES, QUERIES, &c.

Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.

MR. DOUGLAS BRYAN'S SCHEME FOR NURSING ORGANISATION.

To the Editor of the “British Journal of Nursing.”

DEAR MADAM,—I have read with much interest the letter on “Nursing Organisation” in your issue of February 21st, and regret that the fact that I have been remarkably busy lately does not allow me to give as much time to a discussion of its contents as its merits demand. At the present moment, when the question of the registration of trained nurses is again very much to the fore, any letter dealing with some practical and concrete suggestions is most welcome, as most of us have a rather vague idea that registration must be done somehow or by somebody, without offering any very clear plan.

The point in the letter which is chiefly to be praised is the fact that it admits the training value of small institutions and the necessity for their recognition. Without this the whole organisation by which these institutions are nursed would be wrecked and very valuable material lost. I would go even further than Dr. Bryan and accept a training of, say, four years, in two or three smaller and special hospitals of reasonable size, without the two years in a major hospital, provided, of course, that the nurse's testimonials and examinations were satisfactory. The two years' training in a major hospital after previous work will always be difficult to obtain unless committees and Matrons change their opinions and systems considerably.

From his Major Training-Schools I see Dr. Bryan demands midwifery, which, unless such schools as St. Thomas's, Bart.'s, Guy's, &c., enter into an arrangement for their pupils to train at some lying-in hospital, is impossible. I think that whilst midwifery should be obligatory for every registered nurse, it should be learnt, as now, in separate institutions for lying-in cases, after the nurse's general training is completed. Gynæcological nursing will also be an extremely difficult thing to pack into a three years' training at a large general hospital with a special ward or wards. Less than three months is of no use to a nurse, and it requires a very simple sum in arithmetic to see that it is impossible to pass all the nurses who join, say Bart.'s, through Martha (the gynæcological ward) except at a breakneck speed, which would be of little use to the pupil and very upsetting to the ward itself. The education of the gentle touch is so much in gynæcological work and is not learnt in a month.

I am averse to any separate certificate being issued for gynæcological and monthly nursing, or perhaps I should say to any nurse being registered without being able to pass in those subjects. I do not consider any modern nurse properly trained without a knowledge of gynæcological nursing. After a nurse has passed a “pass examination” in the three sub-

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