

do all in our power to aid. There are many special hospitals with training-schools attached, and the women who enter these schools do not receive training in all branches of nursing. Graduates of these schools are not, as you know, eligible for membership in our association *unless* they have had such other additional nursing work as may be considered by our council to make up for the deficiencies of their training. In making this regulation we were not actuated by the desire to exclude any. We simply felt that as an association we could not stamp with our approval those who were not fully qualified. Many of the individual women who are trained in these schools would be an acquisition to any association; and we should be only too glad to welcome them if by post-graduate work they qualified themselves for membership.

The large general hospitals should make provision for receiving such women for a definite period of time, and thus give them the further experience they need. This should not be a difficult arrangement to make if the nurse would stay for a period sufficiently long to warrant the superintendent in counting her as one of the regular staff. If trained only in surgical work, for instance, one year of medical could be added in a general hospital and a certificate granted. I cannot see any grave objections to this, and if it were the custom it would be a help in our large and growing schools, where every year an increase of the staff is necessary, and the output of nurses is correspondingly increased.

Again, nurses trained in large general hospitals should be enabled and encouraged to take post-graduate work in special hospitals. What nurses, for instance, trained in a hospital without nervous wards are fitted to take care of the cases of nervous prostration to which they are so frequently called in private practice? or how can they properly care for contagious cases without special training? These are cited as but two examples of the need.

In our own county association it should be possible to do a great deal of post-graduate work. We have been trained in different hospitals and probably have been taught different methods of work. Can we not compare notes and try to take for our own the very best from all schools? If we strive at each meeting to exchange thoughts on nursing subjects, we *must* be the gainers. Often the question is asked by nurses who take no interest in the work done by our associations: "What good will it do me? You ask me to spend my hard-earned money in paying fees. What can you give me in return?" It is not easy to convince these nurses that while the return seems intangible, it is very real and most helpful. We do not receive interest *in cash*, but we most surely receive an interest, *trebly* paid, when we find ourselves as the years go on working with a greater knowledge, broader minds, and higher aims.

What State Registration for Nurses Means.*

By SISTER IGNATIUS,
Of Mercy Hospital, Chicago, Ill.

Self-preservation is said to be the first law of Nature. Every creature, from the tiniest insect to man—the grand masterpiece of the Great Creator—one and all, following the instincts of Nature, practises this law.

Man, when his life is in danger, either stricken by disease or accident, at once seeks the aid of his fellow-man; his intelligence makes him call for a physician, and he wants a good one at any cost, verifying the truth of the words, "A man will give all he has for his life."

Physicians some years ago sought to protect their good names by weeding out of the profession men who were not properly qualified, and whom they were pleased to dub "quacks."

This object they attained by securing a law which required State Registration, and this law enforced State Board examination, which compelled each man to prove that he had attained the standard of knowledge necessary to satisfy the State Board of Examiners that he was qualified to be entrusted with human lives.

Pharmacists then took up the thought, and, following the example of the physicians, who must be legally qualified to prescribe, determined that the druggist must be legally qualified to prepare the prescription, consequently must have State Registration, which implies State Board examination. By this means unqualified persons are excluded from the profession, and better service is secured for the public.

To give an idea of the necessity of the registration law for pharmacists I will relate a fact regarding an examination which was held at Springfield in December, 1882. When the law was first enforced fifty-seven men and one woman came up for the examination, making fifty-eight candidates for State Registration. Three men and the woman passed a successful examination, making the result fifty-four failures and only four successful candidates, one of the four being the first woman who took the State Board examination in Illinois.

The result of this examination and others goes to prove the necessity of a law to elevate the standard of education in materia medica and pharmacy in general.

The State law now requires that the physician and pharmacist possess a certain amount of knowledge in these branches of science before they are entrusted with human life.

The trained nurse has now become an adjunct to

* Read at the meeting of the Illinois State Association of Graduate Nurses, Chicago, February 9th, 1903.

[previous page](#)

[next page](#)