

is more white and more sharply defined, and the substratum is redder than in the coated tongue of trivial or chronic disease. There is no tongue more instructive and distinctive; a glance gives the alarm, and first suggests pneumonia or typhoid fever, then acute bronchitis or acute rheumatism.

The Furred or Shaggy Tongue

is less distinctive, and more often chronic than acute, signifying disuse more than anything else; the circumstances under which this tongue occurs are for the most part restriction of diet and want of wear and of saliva; it is generally dry and then promises ill, and it occurs more often in chronic than in acute disease, though it may occur in pneumonia, typhoid fever, and acute rheumatism. It generally tells of long illness of such a sort as to restrain the saliva and to prevent solid food being taken.

The Incrusted, Brown, and Dry Tongue

succeeds the plastered and furred variety; the elongated papillæ are separated and caked over with a brittle fissured crust, largely consisting of vegetable organisms, oidium albicans and micrococci, with detached epithelium and extraneous and miscellaneous matters. This is the tongue of the typhoid state and calls for liquid nourishment and alcohol, and is of grave prognosis. It is the tongue of long-continued prostration or failing vitality; the essential factor is long suppression of saliva and pyrexia is generally present. It may occur in many depressing and exhausting diseases, especially such as are nearing a fatal close.

The Red, Smooth, and Dry Tongue

is naked, bare, and raw-looking, and is produced by the lingual epithelium failing to grow properly; the denudation may succeed gradually upon health, as this gives way to disease, or upon the encrusted tongue, the crust wearing away. It is generally associated with pyrexia, and always with deficiency of saliva; it represents a later phase of disease than the encrusted tongue, for it often succeeds this and takes longer to produce. The circumstances under which it is produced suggest that, though suppression of saliva may be contributory, some special cause of exhaustion, often by discharge, is also present. The diseases with which it is associated are mostly sub-acute, and the fever is often hectic.

Nurses, whose duty it is to cleanse the mouths of patients, have special opportunities of observing the condition of the tongue in disease.

Appointments.

MATRONS.

Miss Helen McInnes has been appointed Matron of the Port Talbot Sanatorium, South Wales. She received her training at the Fir Vale Infirmary, Sheffield, and has since held appointments at the Town's Hospital, Glasgow, the Infirmary, Selly Oak, near Birmingham, and the Union Infirmary, Stockport. She has also had experience in private nursing, and holds the certificate of the London Obstetrical Society.

SISTERS.

Miss M. M. Dobbin has been appointed Sister at the Beckett Hospital, Barnsley. She was trained at the Royal Hospital, Belfast, where she has also held the position of Sister.

Miss Edith Blayney has been appointed Sister at the Royal Victoria Hospital, Belfast. She was trained at Guy's Hospital, London, and holds the certificate of the London Obstetrical Society.

Miss M. L. Mullin has been appointed Sister at Sculcoates Union Infirmary, Hull. She was trained at Fir Vale Union Infirmary, Sheffield, where she has since held position of Staff Nurse and temporary Sister.

Miss Elizabeth Anna Smith has been appointed Sister at the Ruchill Hospital, Glasgow. She was trained at the Royal Hospital, Donnybrook, Dublin, and at the City of Glasgow Hospital, Belvidere. She has also held the position of Charge Nurse at the East Parochial Hospital, Dundee.

QUEEN'S NURSE.

Miss Payne has been appointed Queen's Nurse at Fair Island, Shetland. She was trained for three years at the Infirmary, Portsmouth, and gained experience in maternity work at the Glasgow Maternity Hospital. She holds the certificate of the London Obstetrical Society.

CHARGE NURSE.

Miss Sarah Taylor has been appointed Charge Nurse at the Union Infirmary, Burnley. She was trained at the Chorlton Union Hospital, where she has also held the position of Charge Nurse.

PARISH NURSE.

Miss Amy E. J. Scanlan has been appointed Parish Nurse at Sedbergh, Yorks. She was trained at the District Hospital, Grimsby, and at the Hospital for Women, Soho Square, W., and has acted as District Nurse at Sowerby Bridge, Yorks. For more than a year Miss Scanlan has held the position of Sister at the West Ham and East London Hospital.

STAFF NURSE.

Miss Katherine Thorburn has been appointed Staff Nurse at the Hospital of St. Francis for Infants, Hampstead. She was trained at the Royal Infirmary, Derby.

[previous page](#)

[next page](#)