It is of interest to observe how nurses are made, from the following paragraph in a lay contemporary :---

"Unable to give the necessary time to a course of hospital training, a lady I know became a nurse, as she says, 'in a modest way,' as assistant to village doctor. At first, under his guidance, she attended an invalid whose case wanted only careful watching, but no special knowledge of surgery or medicine. In her leisure hours she read all the books the doctor recommended. Continuing in this way she became skilful. The doctor trusted her more and more, and wishing her to have a wider field for her work sent her to a London physician, who soon found out her value and to whom she has proved a most valuable adjutant. Although not a hospital-trained nurse her services are in constant demand with his patients. She is specially cheerful of nature, never makes a fuss about anything in any house she may enter, and is an adept at cooking for invalids. Hers, for a lonely woman, is not a bad example to follow."

The futility of the contention of the opponents of Registration that the public who desire information as to the nurses they employ should apply to the authorities of the hospital which trained them is apparent. How about those nurses who have not gone through the formality of hospital training, but are yet "in constant demand"?

On the production of a certificate signed by a maternity nurse at Belstead, near Ipswich, the infant child of a baker was buried. By the coroner's order the body has now been exhumed.

A nurse should always work under medical direction, and the writing of certificates of death is absolutely outside her province. In regard to midwives, the Midwives' Act expressly provides that certification under the Act does not imply that a midwife is authorised to grant any certificate of death, or still-birth. In the case of a child which shows evidence of ill-health it is of course the duty of a midwife to represent to the parents that a medical practitioner should be consulted; in the case of a still-birth, presumably she should acquaint the coroner for the district that such has occurred in her practice.

A Social Gathering for Nurses was recently held at Marycourt, Bridgwater, when the Ladies of the Committee of the District Nursing Association entertained the guests, and a lecture on X-Rays was given by Dr. Bird,

The Executive Committee of the Stockton and Thornaby Nursing Association, in presenting their report to the annual meeting, said :----"An analysis is given of the variety of surgical and medical cases, showing the extent of the work done by our nurses in alleviating suffering in our midst, and the general hygienic knowledge they impart in the art of nursing in the homes they visit must be beneficial as a means of education in the proper methods of caring for the sick. Our thanks are therefore due to the Matron and nurses for having done their duty so nobly and well. Patients have frequently during the past year written thanking the Association for the help they have received and have given such testimony both in word and deed."

Our readers, says the Medical Press and Circular, will remember the action for negligence taken against a London surgeon last year on account of the accident of leaving a foreign body in an operation wound. A somewhat similar case has just occurred in Canada, and as the points involved are not peculiar to Canadian law, it is worthy of mention. An operation for strangulated hernia was about to be performed by Dr. Bence, who brought with him a rubber water bag for the operation-table. This he handed to the nurse, directing her to fill it "like an ordinary hot water bottle." She, misinterpreting his instructions, filled it with boiling water, whereby the patient suffered painful but. not severe burns. The nurse had not been employed by the operator, but by the ordinary attending physician of the patient. An action for damages by negligence followed. The judgment given decided that Dr. Bence was justified in expecting that, a nurse would understand the filling of a hot-waterpad, and that it was not his duty to supervise such details of the nurse's work. There had been, in consequence, no negligence on the part of the defendant. It is of interest that the case was decided by a judge sitting alone; if it had been tried by a jury it is not unlikely that the result would have been different.

In an interesting article on Nursing in South Africa, Miss E. Chadborn describes nursing organisation there.

The properly-trained nurse is becoming gradually more and more of a feature in South African life, so that now without a three years' certificate from a recognised hospital it is impossible to get good work.

Knowledge of midwifery, or, at least, maternity work, is also a necessity, as in the general hospitals maternity cases are admitted, and nurses are expected to have some knowledge of the work.

She describes the system of training at one of the principal hospitals, culminating in Cape Colony and Natal, with an examination held by the Medical Council for the Colonial Government, after which the successful candidates are registered as trained nurses, and receive the Medical Council Government certificate; to obtain this requires thorough surgical, medical, and maternity knowledge, and is a necessity. for nurses trained in the Colony before they can obtain any hospital post as Staff Nurse, Sister, or Matron. This is as it should be.

The first copy of a new Quarterly Journal, The. Canadian Nurse, has made its appearance. The Editor is Miss Helen MacMurchy, M.D., and her



