

The Out-Patient Question.

The following skit from the pen of Mr. G. R. Sims appeared recently in the *Referee* :—

DISHING THE DOCTOR.

A SOCIETY SKETCH.

SCENE : Outside a well-known Hospital.

DUKE (*pushing his way through the crowd with a large bottle in his hand*) : Make way, please. I have to catch the 10.30 Scotch Express.

MARCHIONESS (*with her handkerchief to her eye*) : My dear Duke, whatever brings you here ?

DUKE : I want some cough mixture. They give you a large bottle here for nothing.

MARCHIONESS : I thought you were off to the moors.

DUKE : I go this morning. What is the matter with you, Marchioness ?

MARCHIONESS : I was motoring, and a piece of grit got in my eye. If I had called in Dr. McFee, of Harley Street, he would have made a fifty-guinea job of it. I know him ! So I'm getting it taken out here for nothing.

MILLIONAIRESS (*with baby in her arms*) : How these common people push !

CITY MAGNATE : Yes ; they are all medicine bottles and no manners. What is the matter with you, madam, may I ask ?

MILLIONAIRESS : Oh, nothing. But my baby has been scratched by the cat, and I'm nervous about it. So I've brought it to the hospital. You see, if it's going to be a lot of worry I can leave it, and you can't do that if you go to an ordinary doctor.

CITY MAGNATE : Of course not. I have come to be fitted with new spectacles. My eyes are worrying me very much.

LADY FROM PARK LANE : Could you tell me which door I go in at for cod liver-oil ?

CITY MAGNATE : That. But you haven't a bottle. We have to bring our own bottles.

LADY FROM PARK LANE : Really ? I must run home and get one. My motor is waiting round the corner.

MARCHIONESS : Oh, dear ! (*She covers her face with her hands*).

EVERYBODY : What is the matter ?

MARCHIONESS (*whispering through her fingers*) : One of my servants is in the crowd. I don't want her to see me here.

LADY FROM PARK LANE : It is most inconsiderate of that sort of person to come to a hospital. I'm sure with the wages the servants get nowadays they can very well afford to pay a doctor.

(*The Out-Patients' doors open. Terrific rush.*)

STARVING DOCTOR (*who is passing*) : What business they are doing ! And I have had to pawn my watch to pay my subscription to the *Lancet* !

[CLINICAL CURTAIN.]

Practical Point.

Dr. Foerster has found that it is possible to obtain the sedative action of a narcotic by merely rubbing it on the skin. He uses equal parts of castor-oil and alcohol as the vehicle for three-parts of the drug, and applies it lightly to the skin, covering at once with rubber tissue. The soothing and narcotic action of the drug are soon apparent.

Legal Matters.

THE LEGAL RESPONSIBILITY OF THE PHYSICIAN AND THE NURSE.

The conscientious nurse is naturally controlled, more or less, by a sense of her double responsibility—to the patient whom she serves, and to the physician who aids and directs her services. This feeling of double responsibility is an ethical necessity from which she cannot escape by any quibble even when most perplexed by questions of expediency. It is not the purpose of this article to dictate rules for the nurse whose duties to the patient and to the physician respectively seem to impel her in opposite directions, and who finds herself halting between two opinions. We propose merely to define the legal status of nurse and physician in their relations to the patient.

The law recognises the doctor as having control of the patient, and holds him responsible, eventually, for the outcome.

This principle is clearly set forth by a legal expert, Mr. C. Stuart Patterson, in the *American Journal of the Medical Sciences*. He tells us that the nurse and the apothecary are recognised by the law not as the "agents" of the physician, but as "independent contractors," as are also the consultant and the specialist who may be brought in as assistants in the case. As an "independent contractor" the nurse may be held liable for her own negligence in the care of the case ; but if it can be proven that the nurse or any other "independent contractor" was selected by the doctor and was generally known as unfit for the service required, then the doctor may be proven negligent in not exercising reasonable carefulness in selecting his assistant. Again, if the nurse, at any time after assuming charge of the case, should be incompetent to such a degree that a reasonably skilled doctor ought to notice it, the doctor himself is liable to the charge of negligence unless he insists upon her removal.

While the doctor remains in control of the patient he is held responsible for any and all shortcomings on his own part or on the part of any whom he allows to assist in the case. These shortcomings include failures to employ reasonable and skilful care in attending the patient or selecting his attendants, in giving directions as to the care of the patient and precautions as to his future course. Failing in any of these details, the doctor is liable not only to the forfeiture of his fee, but to the payment of damages for malpractice.

This statement makes it evident that, except under the most extraordinary circumstances, the nurse who obeys her physician has the protection of the law, in the sense that she loads the responsibility for her actions upon the shoulders of her superior.—*The Dietetic and Hygienic Gazette*.

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