

Queen Alexandra's Imperial Military Nursing Service.

POSTINGS AND TRANSFERS AT HOME.—*Staff Nurses*: Miss K. A. Allsopp, from Aldershot to Princess Louise Hospital, Alton; Miss E. Close, to Royal Victoria Hospital, Netley; Miss F. A. Dawson, from Alton to Cambridge Hospital, Aldershot; Miss C. M. Williams, to Royal Victoria Hospital, Netley.

POSTINGS AND TRANSFERS ABROAD.—*Matron*: Miss A. L. Cox, from Shorncliffe, *Sister*: Miss E. M. Denne, from Woolwich, *Staff Nurses*: Miss E. L. McAllister, from Netley; Miss A. A. Steer, from Millbank, all to s.s. *Plassy* for Indian troopship duty.

The following ladies are held in readiness for service abroad:—*Sisters*: Miss L. E. Mackay, Miss E. S. Mason, Miss W. Walker. *Staff Nurses*: Miss G. M. Smith, Miss E. M. Perkins, Miss M. E. Wilkin.

Appointment.—The undermentioned lady to be Staff Nurse, provisionally—Miss E. Close. *Resignation.*—Staff Nurse Miss W. M. Jay resigns her appointment.

Our Five Guinea Prize.

Fourteen Papers were received in competition for the Five Guinea Prize offered by this Journal for "The Best Article on Some Practical Nursing Subject of about 2,000 words in length, with Illustrations."

The two best of these Papers were marked of equal value, and upon the recommendation of the Examiners we have divided the Prize, and have awarded £2 12s. 6d. to—

Miss ELEANOR S. FOUNTAIN,
Assistant Matron,

Her Majesty's Hospital,
Stepney Causeway, E.,

for her Paper on "The Art of Bedmaking," and £2 12s. 6d. to—

Miss AGNES M. SILVER,
Brighstone Rectory,
Isle of Wight,

for her Paper on "The Care of an Infant for the First Twenty-four Hours of Life."

Miss Fountain's article appears this week, and we shall publish Miss Silver's at an early date.

Several of the remaining twelve Papers were excellent. We therefore propose to publish the following as space permits:—

1. "The Feeding of Delirious Patients," by Miss Hannah M. Turner.
2. "Nursing in the Outpatient Department," by Miss E. C. Evans.
3. "The Home Nursing of Pulmonary Tuberculosis," by Miss Annie E. Windsor.
4. "Removal of the Sick: Simple and Easy," by Mrs. Alfred Paine.
5. "The First Twenty-four Hours of a Child's Life," by Miss Mary A. Harvey.

The Art of Bedmaking.

By Miss ELEANOR S. FOUNTAIN.

In dealing with this very important part of a nurse's work, we will first take into consideration the bed itself.

BEDSTEAD.

The best kind of bedstead for a sick person is an iron one fitted with a chain spring, and furnished, if possible, with rubber casters; it should be about 3 ft. wide, and, while for a bedridden case a rather high bedstead lessens fatigue for the nurse, for a patient who can just manage to get in and out of bed, a low one is advantageous. The idea of having a wide double bedstead, so that the patient may be moved from one side to the other, is not a good one. The amount of assistance that a nurse can render the patient is much diminished if she cannot get at him easily on either side; but in some cases of protracted illness it is found a great advantage to have two beds of the same size placed side by side, the patient to be lifted from one to the other when necessary, and the vacated one moved away.

In this case the foot of the fresh bed should correspond with the head of the other. The patient can then be moved by two nurses standing between the two bedsteads, one lifting the upper, and other the lower part of the body, with the minimum amount of disturbance. As the moving takes place the patient describes a semi-circle, the nurses having complete control over the movement. This plan is far preferable to that of having a nurse on each side of the bed when the one on the "off" side must necessarily be dragged across the vacated bed if she is to maintain her hold of the draw sheet in which, if this method is adopted, the patient is usually moved.

BEDDING AND BEDCLOTHES.

It need hardly be mentioned that a feather bed is most undesirable for a sick person; a good hair mattress and feather pillows are the best equipment, the blankets should be light and warm, the sheets of liberal size, and the quilt light and porous.

POSITION.

The bedstead should be quite clear of the wall, so that the patient may be easily approached from either side, and, if possible, it should be arranged so that the light falls on the bed from the back or side.

The nurse should be thoroughly acquainted with the condition of the bedstead and bedding, and should never let any defect that may occur remain unrectified.

MAKING OF VACATED BED.

A patient who is well enough to be removed from his bed while it is being made, should be settled quite comfortably on a couch or easy chair, be suitably wrapped up, and if necessary supplied with a hot-water bottle. The bedclothes should then be

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