Some Useful Appliances. Dr. Joseph Brown Cooke, M.D., Lecturer on Obstetrics to the New York City Training School for Nurses, gives many

valuable practical nursing hints in his admirable Nurses' Handbook of Obstetrics, of which the second edition has recently been issued by Messrs. J. B. Lippincott Co.

An appliance much more frequently used during labour in the United States than in this country is a



KELLY PADS.

"Kelly Pad," which certainly makes for comfort and cleanliness. It is placed under the patient with its apron draining into a pail, and is covered with a clean towel tucked well under the edges of the pad so that



it will not easily slip out of place. Another illustration which we have pleasure in reproducing is that of a fountain syringe which can be hung on a nail on the wall, and the height can therefore be easily adjusted. The remaining illustration is of a "feeder" designed by Dr. Breck for premature infants.

for premature infants. "It consists," says Dr. Cooke, "of a graduated glass tube with a small rubber nipple at the smaller end and a rubber finger cot at the larger. The cot serves as an air reservoir, and when the nipple is placed in the infant's mouth, slight intermittent pressure on the cot will enable the child to get the milk without any effort beyond that of swallowing.

To fill the feeder the nipple and cot are removed, a cork fitted snugly in the smaller end, and the proper quantity of milk poured in through the larger opening. The cot is then attached to the top, the feeder inverted, and after the cork is removed the nipple is slipped over the smaller end.

The care of the feeder is of the utmost importance, for if germs of any sort are allowed to collect in it the milk will be contaminated and the life of the infant will be greatly endangered. The cot and nipple are to be cleansed with soap and water inside and out, rinsed thoroughly and boiled for five minutes before each feeding.



It is well to have a number of FEEDER FOR PREMATURE feeders, nipples, and cots so that

several of each may be boiled at one time and kept in sterile boric acid solution until they are needed."

Sterilisation of Gloves. Miss E. G. Flaws gives the following directions in the *Canadian Nurse* for sterilising gloves: — After five minutes' scrubbing with soap and hot

scrubbing with soap and hot water, the hands are thoroughly dried with a sterile towel and rubbed with alcohol to remove any moisture. Clove oil is then rubbed into the skin for five minutes and afterwards washed off with alcohol. The dry sterile rubber gloves are then put on.

1. All gloves must be washed thoroughly in warm water with green soap, then turned and washed thoroughly on inside.

2. Rinse in clean, cold water, and test while rinsing with water.

3. Mate and roll in gauze, marking as follows: (1) Very large pairs, two large safety pins; (2) medium size, one large safety pin; (3) small gloves, one small safety pin; (4) other gloves leave unmarked.

 Put all gloves in glove cage and clasp lid tightly.
Put plain water in copper boiler—enough to thoroughly cover entire glove basket.

6. When boiling, introduce glove basket and allow gloves to boil hard ten minutes.

The glove basket must be weighed down with something heavy, so that gloves may be under water while boiling.



