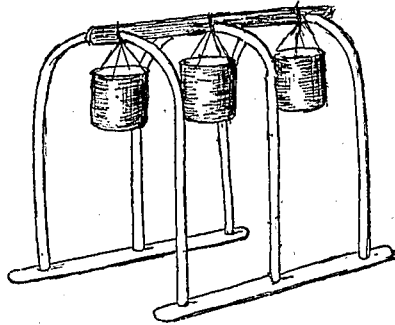


turn the sponge, not using the same side twice, use plenty of water.

Do not dry your patient unless it excites her not to, then gently and lightly pass the towel over the skin. Do not worry her with conversation while sponging.



IMPROVISED ICE CRADLE.

Watch the pulse and note any sign of collapse—experience will teach a nurse best the signs which show a patient has had as much as her system can stand.

Take the temperature twenty minutes or half-an-hour after the process is over.

*Ice Cradles* are often used in cases of prolonged pyrexia—if an ordinary ice cradle is not at hand, an abdominal cradle from which are hung (if possible) six or eight cans, to hold the ice, will answer the purpose, place three cans down either side of the patient and two over him; taking care they do not in any way touch him—use a sheet to cover over all; have a small blanket to cover the patient over the lower limbs.

For reducing localised inflammation the following are the most common treatments in use:—

*Evaporating Lotion.*—When this is ordered the nurse must remember that the application must be kept cold and moist; the heat from the inflamed part soon warms the lint, which, if left warm, would do more harm than good. If a limb is the affected part, carefully arrange the bed with a good mackintosh, and place a receiver under the limb. Then put a jar, partly filled with the lotion to be used, in a convenient position with a strip of lint, one end of which must be placed well in the lotion and the other end on the piece of lint over the affected part. This will act as a syphon, keeping the piece quite moist. The nurse must remember to replenish the lotion and empty the receiver. If the limb is a leg, the whole thing can have a cradle over to keep off the bed-covers, which can be put on in the usual way, only left open at the foot instead of hanging down or having the usual "pocket" made. See that the good

leg is warmly covered—usually the patient is allowed a blanket next to him. If splints are applied, the syphon can hardly be used; then a nurse must make it her duty to remember to keep the lint cold and moist, having two pieces of lint in use, so that the one piece has time to be quite cold before being applied again. Leave the bed open in the same way.

*Leiter's Tubes* are used to keep up a steady flow of cold, and can be applied to almost any part of the body; mostly used for the head, chest, or abdomen. They are a coil of metal tubes. Place these over the affected part and have a receptacle containing ice-cold water placed above the patient's head (as in diagram) from which an india-rubber tube supplies the water to the coil of metal tubes placed on the patient. When the water has circulated through these it is conveyed by another rubber tube to a vessel on the floor ready to receive it. The nurse must see that a piece of lint is kept between the patient and the metal tubes; also that the higher bucket is kept well supplied with iced water, that the water runs freely (occasionally a good blow down the tube may be necessary) and she must remember to empty the receiver.

*Ice*, in one form or another, may be used for any of the objects mentioned earlier in this paper. The following are some of the ways in which it is applied.

*Ice-bags.*—Break the ice into pieces (a good strong cap pin five or six inches long is a good extemporary pick for breaking ice) that are easily passed into the bag, and when full place the bag on a flat surface to exclude all air before screwing the cap on. Then apply it to the affected part with a piece of lint placed



LEITER'S TUBES APPLIED AS ICE CAP.

between it and the patient; if applied for a hernia suspend the bag from a cradle so that the weight does not rest on the patient, or if for

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