

The Midwife.

The Central Midwives' Board.

THE REVISED RULES.

It is interesting to compare the revised rules recently published under the authority of the Central Midwives' Board with those which were in force up to the end of April. In the first place they have noticeably gained in clearness of arrangement, brevity, and simplicity.

Under *Section B* married candidates are now required to submit their certificate of marriage as well as of birth or baptism, and the certificate of good moral character must now be signed by two persons of position acceptable to the Board.

Under *Section C*, in the event of a candidate being prevented by illness from attending or completing her examination after having paid the fee, and being accepted as eligible, she may be admitted to a subsequent examination on payment of a fee of ten shillings and sixpence.

It is noticeable that throughout the rules puerperal fever is now referred to in the plural, not the singular.

"The care of children born apparently lifeless" is added to the subjects for examination.

The former *Section D* "regulating the admission to the Roll of women already in practice at the passing of the Midwives' Act" has now disappeared, and its place is taken by the "Rules of Procedure on the Removal of a name from the Roll, and on the Restoration to the Roll of a name removed." Under these rules the accused person is to be served with a notice of the accusation against her, by registered letter, to her last known address, at least fourteen days before that appointed for the hearing of the case.

Provision is also made that notice in writing, by registered letter, of the removal of the name from the Roll, and of the cancelling of the certificate, shall be sent by the Secretary to the person found guilty of the offence, and to the Local Supervising Authority of the district within which she resides.

Under *Section E* the midwife is now advised that when engaged to attend a labour she should take an opportunity of visiting the patient in her own house, to advise as to personal and general arrangements for the confinement.

It is also enjoined that when called to a confinement a midwife must take with her a bag or basket furnished with a washable lining. We are glad also to note a regulation that "the Local Supervising Authority may, in the case of untrained midwives, use its discretion with regard to insisting upon the carrying of a catheter and appliances for giving vaginal injections." Many of the midwives still on the Roll have no idea how to use these appliances, and they are a danger in unskilled hands. In the new rules midwives are not enjoined, as formerly, to carry "an anti-

septic lubricant for smearing the fingers, catheters, douche nozzles, and enema nozzles before they touch the patient."

Duties to Patients.

In connection with the duties of the midwife to the patient, the rules state that a midwife, after the commencement of the second stage, must stay with the patient until after the expulsion of the placenta, and as long after as may be necessary. It is noteworthy that a midwife recently summoned before the Board, against whom one of the charges was that she left the patient unattended after the commencement of the second stage of labour, explained that while in attendance on the patient in question, she was summoned to two others needing her attention, and as the first patient had not progressed far, she left her to attend the others. As such emergencies not infrequently occur in midwifery practice, it would be useful if the rules gave some indication as to the line to be pursued by the midwife in such circumstances.

The midwife is enjoined to wash the patient's external parts under certain conditions, and not to use flannel or sponges, but "material which can be boiled before use, such as linen, or burnt afterwards, such as cotton wool." From a practical point of view, for using with soap, lint would be preferable to either linen or cotton wool.

General.

It is laid down that "no midwife shall follow any occupation that is in its nature liable to be a source of infection, or shall (except under special circumstances) undertake the duty of laying out the dead."

The exceptions are preparing for burial the body of a lying-in woman, a still born child, or an infant dying within ten days, or a dead body in a case of non-infectious illness, provided that she is not attending a midwifery case at the time.

It would be interesting to know if the Midwives' Board considers the occupation of a trained nurse as one that is in its nature liable to be a source of infection.

Conditions in which Medical Help must be sent for.

After enumerating the above, the Board has now added a regulation that "after having complied with the Rule as to the summoning of medical assistance, the midwife will not incur any legal liability by remaining on duty and doing her best for her patient." The addition of this rule was desirable, as some midwives, having summoned medical assistance, considered that they were prohibited by the rules from remaining with a case, and this did not conduce to the good care of the patient.

Notification of Death and Still-birth.

Amongst the forms now drawn up for the use of the midwife is one providing for the notification to the Local Supervising Authority of a death in the midwife's practice, and also one of still-birth.

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