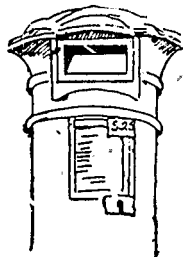


Letters to the Editor.



Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.

RECIPROCAL TRAINING.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—I was interested to note from your report on State Registration in New Zealand, in your last issue, that reciprocal training is a question which is engaging the attention of the authorities there as well as elsewhere, and that small and special hospitals are to be nursed from the large general hospital of the district under the supervision of the Matron.

I have for long believed in the principle of the affiliation of small hospitals with large general hospitals, and that it is to the benefit of pupils to enlarge their experience in connection with these minor and special hospitals, having seen the plan work admirably. The only disadvantage, so far as my observation goes, has been that it is rather upsetting, from the point of view of discipline, for a probationer to pass for a time under the direction of a Matron with views which differ from those of the Matron of her training school. If the Matronships of the affiliated institutions were filled by graduates of the general training school this disadvantage would disappear, and the continuity of the plan of training would be unbroken.

I am, dear Madam,

Yours faithfully,

A CONSTANT READER.

NURSING IN 1910.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—I always look forward at the end of each year to your summary of the principal events of the past year, with its broad outlook on nursing events all the world over. I have had sufficient insight into journalism to know that it must involve a large amount of work, and I should like to thank you for recalling to our memories events of so much interest and importance. For me, in spite of discouragement in some directions, the year ends on a note of hopefulness, for it is evident that we must be carried forward with the onward wave of progress, and that we, too, in the not far distant future, may hope for organisation and legal status, if not on grounds of justice on those of expediency and, indeed, necessity, if we are not to fall behind other nations in nursing efficiency.

With all good wishes for the New Year, for yourself, and the Journal which you so ably conduct,

I am, dear Madam,

Yours faithfully,

MARIAN EDMUNDS.

A RASH REMARK.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—May I direct attention in your valuable journal to a nursing point which, amongst the multitude which have received consideration in its columns, I do not ever remember to have seen mentioned? I mean the care which should be exercised in the presence of patients of speaking of their condition before them.

Recently, when I was allowed to visit a dear little friend for a few moments, who had been very seriously ill, the nurse in charge of him said casually over his bed: "He is better to-day, but he is not out of danger yet." The wan cheeks flushed, the wistful eyes dilated, and in spite of every effort to quiet him a raised temperature was the result of the nurse's rash remark that evening.

It seems to me so strange that nurses so often speak before their patients, as people speak before servants who are waiting at meals; as if, because they say nothing they are deaf and blind. They are very far from either as a rule. The senses of a patient seriously ill are often unnaturally acute, and it is impossible to be too careful in speaking of their condition before them. Perhaps some young nurses may read and remember.

Yours faithfully,

AN ANCIENT.

Comments and Replies.

Midwife, Birmingham.—Much importance is now attached to the length, as well as to the weight, of an infant, and shortly after birth, and at intervals afterwards, both length and weight should be ascertained and charted. They form together an excellent guide as to the progress made by the child.

Private Nurse, London.—It is not advisable for a nurse in attendance on a private case to witness the patient's will if other witnesses can be obtained. If the will should be contested later she may be subpoenaed as a witness when nursing another patient in a different part of the country, and be put to inconvenience and expense.

Notice.

CONTRIBUTIONS.

The Editor will at all times be pleased to consider articles of a suitable nature for insertion in this Journal—those on practical nursing are specially invited.

Such communications must be duly authenticated with name and address, and should be addressed to the Editor, 20, Upper Wimpole Street, London, W.

Advertisements and business communications should be addressed to the Manager, BRITISH JOURNAL OF NURSING, 11, Adam Street, Strand, W.C.

OUR PRIZE COMPETITION.

Rules for competing for our Prize Competition will be found on page xii.

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