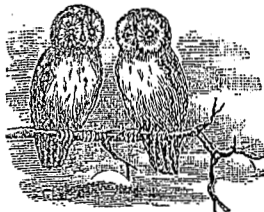


Matrons in Council.

WHAT IS A TRAINED NURSE?

For what length of time should a Probationer be trained in the wards of a Hospital, and how should that training be organised in order to fit her to hold every position in the profession?



MADAM,—Miss Landale and Mrs. Okell have answered the above question so well and satisfactorily that I hardly like to add my opinion to theirs; but there is just one detail in the training of Nurses that I do not think they have dwelt upon with sufficient emphasis, and that is how to train Probationers in the refinements of true Nursing—how to teach them, in the necessary routine and hurry of a hospital ward, all those little niceties which take up so much time, and which constitute Nursing to the educated and cultured person. All those amongst us who have gained our experience in the large Nursing Schools, working always against time, know how difficult it is to find time to do our work with *finish*. The washing of the patients was always a terrible trial to me; it was impossible to thoroughly cleanse each patient daily, and the terrible necessity of having to fix one or two nights in the week—vulgarly known as “toe dabbles”—in which to make a round of feet washing, is peculiarly distasteful. But these attentions cannot be bestowed daily as they should be. Again, serving of food. How uncouth are some of our ward customs, and how accustomed one becomes to the lack of refinement in the ward when waiting on the sick. What a revolution of practice must take place in satisfying a private patient. And again, *manner* is not nearly sufficiently cultivated in our Nursing Schools. The voice, the footsteps, door closing—in fact, all true courtesy—these qualities may be innate, but they certainly are little cultivated by training in the majority of our Nursing Schools, nor appreciated at their true value in the ward, or we should not meet the numbers of uncouth and noisy Nurses we do. Why should not these details be made part of the training of our Probationers, and the cultivation and possession of such virtues count towards Gold Medals and other glories? For instance, make *gaucherie* the bar complete to a Matronship, and how much charm would be added to the average Nurse? Let the croaky-voiced and ambling women gain a livelihood in some more congenial sphere; only, make it impossible by selection and training that they should survive in the sphere of Nursing.—Yours, “A MATRON WITH NERVES.”

[We must own that in part we sympathise with our highly-strung colleague, and we think that every day the refinements of Nursing are receiving more and more attention from the Superintendents of our Nurse Training Schools. Much, of course, can be done by example, as women are naturally very adaptive. It is a recognised fact that the *tone* of a whole Hospital is often inspired by the Matron, either for good or evil.—ED.]

Medical Matters.

INTRAVENOUS INJECTIONS.



By a considerable number of physiologists, especially since the germ theory of disease became generally accepted, it has been urged that the surest and quickest method of combating illness would be by injecting into the blood those medicaments which have a directly destructive effect upon the bacillus which produces the malady. There is much to be said in favour of the theory, and especially does it appeal to those who hold that germs are the fountain and origin of all human sickness. Experiments have for long been carried on, as to the particular results which follow the additions of certain drugs to the blood stream. It was at first asserted, and the view had much plausibility, that it was hardly wise, if indeed it was not dangerous, to make the blood current the battlefield between the germs and their destroyers. Nature, however, is great and will prevail; and the experiments to which we allude have shown that it is possible to inject no inconsiderable quantity of even so deadly a poison as the sublimate of mercury into the veins, not only without danger, but, apparently, with good results. A most important article which appeared about a fortnight ago in a German medical contemporary, appears to prove that the intravenous injection of quinine gave the most rapid and most beneficial results in some cases of malignant malaria in which it was employed. And in cases of cerebral syphilis, where other modes of treatment had remained unavailing, the effects which followed injections of perchloride of mercury in the proportion of one grain to a thousand of water, were extremely successful. In five or six minutes after the injection had been given, salivation occurred, and the specific benefit of the drug seemed to be more rapidly secured than when it was given by the mouth. Finally, the author of the paper shows that, by injecting the same sublimate solution into an hydatid of the liver, cures were rapidly effected in most obstinate cases. The parasite was simply poisoned, and the customary signs of its presence appear to have rapidly subsided. Theoretically, it is impossible to dispute that the best results must be attained by the direct action of a drug. The chemical changes which take place in medicines, which are administered by the stomach, before they are finally absorbed into the blood, it is well known, render in many instances the effects more than doubtful; whereas, by their direct action on the blood, whatever re-

[previous page](#)

[next page](#)