

Hints to Private Nurses.

II.—ON THE NURSE'S DUTY TO HER PATIENT AND HIS SURROUNDINGS.

BY MISS E. J. R. LANDALE.

IN the first of these papers I endeavoured to present to my readers some idea of the scope of private Nursing, and the qualifications required to make a good Nurse for the work, and tried to indicate some of the personal details to which attention is desirable, both for the sake of the Nurse and the patient. Let us now think more directly of the patient. Every Nurse will, I am certain, be ready to allow that a Nurse's first duty is to her patient, but there is more in this admission than at first sight appears. In the first place she is there for the patient's good under the doctor. He is the person to diagnose the case, the Nurse has no need to express her opinion, his is the chief responsibility, therefore, unswerving obedience to his orders becomes her duty to her patient. The Nurse has no right to put her own colour and construction on his orders, but she must bring all her intelligence to bear on them, and try to enter into the spirit as well as the letter of the treatment. To do so may require her to exercise a great deal of firmness towards her patients, but she should not worry them about trifles. A most devoted Nurse may be very selfish over the details of her work; when people are sick they are sensitive about details. When it is possible the work should be done in the way the patient likes best. You may think your own way best, but the "best" is to save the patient all unnecessary little irritations. This is a small point too often neglected, because in Hospital wards, where everything goes by clock-work, one is not able to consider the little fancies of each patient, and the methodical Ward Nurse is apt to ride rough-shod over her private patient in a way that is as objectionable as it is unnecessary. Neatness and order in the room is restful to the sick, and the quick, deft, thorough dusting of a well-trained Nurse is quite entertaining to watch. It is, however, quite possible for a Nurse in her devotion to neatness to torture her patient. To make the bed exactly like a Hospital one is neither necessary nor desirable if the bedclothes are to bind down the weak feet that feel them a weight at any time; and it is better to leave the furthest corners undusted for some hours longer than to have to knock against the bed just as the patient is beginning to feel inclined for sleep. Try to grasp what your patients' position is and has been, and what their habits and way of looking at things has been, try to put yourself in their place, and shape your behaviour accordingly.

It is generally best to enter upon a new piece of work with a quiet matter-of-fact manner and few words; to attend to the most evident needs in a sick room, and to do for the patient what has already been done by others. The Nurse, however, should be able to do it in a way that is more comfortable and efficient. There should be no note of uncertainty about what a Nurse says or does when she sees her way to speak or act. The anxious relative says, "Nurse, what food will be required for the night?" and if the Nurse says doubtfully, "I am sure I don't know; do you think?" &c., the poor lady will feel very little helped or comforted; whereas if the Nurse has been quietly considering and forecasting her patient's and her own requirements, and produces a leaf from her note-book with a clearly written out statement of so much beef-tea, so much milk, or whatever may be needed, and a memorandum for the housemaid of the utensils she wishes her to bring, the household will at once realize that she is a person with her wits about her, who will save them anxious thought, and who can be relied upon.

Never allow yourself to look on your patient as a mere "case;" to the other members of their household they are father, mother, son or daughter, as it may be, dearly loved, and till you arrived, as tenderly cared for as they knew how. Make them feel you are there to help and supplement, not to supersede their efforts. Win your way into their confidence gently. For your patient's good be inflexible, but if you can, without injury to the patient, allow the daughter to minister in some way to her mother, the wife to her husband, or the mother to her child. Never make them feel you have turned them out of the sick room, and that they are not wanted there. Of course, there are cases when it is perfectly necessary to keep the friends away from the patient, but there are two ways of doing it, and I would beg of you to reflect how you would like it done to yourself were you in their place. Make it quite clearly felt that it is the doctor's order for the good of the patient that you are carrying out, and not a mere whim of your own. Be particular to treat all the other members of the household with courtesy. Above all things do your work brightly. It is perfectly possible to be full of sympathy for those who are in real anxiety and sorrow, and at the same time to encourage them to be brave and to bear their sorrow without depression.

The servants in a house are often a difficulty to a Nurse. Be very careful from the first to treat them with politeness. Feel grateful to them for all they do for you; they will be quick to know it. Be very particular not to make work for them in small things; tidy up after

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