

Nursing Echoes.

* * * All communications must be duly authenticated with name and address, not for publication, but as evidence of good faith, and should be addressed to the Editor, 20, Upper Wimpole Street, W.



THE prize of five shillings is this week awarded to Miss Lilian M. Jackson, of the North Eastern Hospital for Children, Hackney Road, for the best Nursing Echo, which we print below.

"IT may be interesting to my fellow-nurses to note the extreme importance of the choice of dressings in any case of an aseptic wound:

such as excision of *nævi*. I give instances of two cases:

The first being that of a child aged 15 months, with a *nævus*, lozenge shaped and about one inch in length, reported to be growing rapidly, situated above the angle of the lower jaw. The *nævus* was excised and sutured, dressed with dry blue gauze and sal alembroth wool; the patient was seen three days after and the wound was found to be healing by first intention; the child was brought up, however, two days later having torn off the dressing, causing the wound to break down and suppurate, so that the intention of the surgeon to leave only a thin scar was obviously frustrated.

In the other case the patient was 11 months old, the *nævus* being situated over the frontal bone, size one inch, the feeding vessels being plainly visible. This *nævus* was also excised, ligatured, and sutured; dressed with flexible collodion and sal alembroth wool painted on firmly, extending over an area of three inches, a pad of absorbent wool and two turns of bandage was placed over the whole.

Result.—Healed by first intention, leaving slight scar.

In both cases an anæsthetic was administered."

Our American contemporaries are always interesting. The *Nursing World* has now instituted a Nurses' Parliament, a question being set for each month, and three dollars and two dollars being given for the two best essays, which must not exceed two hundred words. The following were the questions and answers for May:—

"May—What may a nurse do to prevent sepsis in surgical cases?"

FIRST PRIZE.

To prevent sepsis the Nurse must exercise a constant vigilance in excluding from the wound before, during and after operation, all forms of micro-organisms. She must see to it that her own hands and person are faultlessly clean, that the field of operation is rendered aseptic by appropriate antiseptics, and that all instruments and materials connected with the operation are sterile. Using proper vigilance she will handle no unsterilized thing after her hands have been prepared unless she again sterilizes them, and she will see that if instruments, sponges, ligatures, &c., are accidentally dropped upon the floor they will again be sterilized or set aside. To prevent admission of germs she will see that her head and the heads of the surgeons are covered with aseptic caps or towels; she will keep the floor moist, exclude visitors, do no hand-shaking, and refrain from coughing or sneezing over the field of operation. She will remember that water not boiled is a fruitful source of bacteria, and that even the air may contain septic germs. She will also remember that sterilized water is wonderfully effective in purifying wounds, and that an abundant supply should be on hand.

A. SEPTIC.

Atlanta, Ga.

SECOND PRIZE.

To prevent sepsis in a surgical case every precaution must be used in preparing for the operation, in conducting the operation, and in opening and dressing the wound afterward. All instruments, sea sponges, gauze sponges, gauze pads, ligatures, sutures, solutions and towels must be perfectly sterile. The hands and arms of operator and assistants must be thoroughly cleansed and soaked up to the elbows in corrosive sublimate. Gowns which should have been washed and ironed in a perfectly clean place are provided for operator and all assistants. Laundries are often anything but aseptic, and one must have an eye to the things which proceed therefrom. The patient should have been thoroughly bathed and the seat of the operation scrubbed, shaved if necessary, and prepared with an antiseptic pad. The room should be clean, sweet, sunny, and devoid of woollen fabrics of all kinds. In dressing the wound afterwards the same precautions should be observed with regard to hands, instruments, basins, dressings and irrigating solutions.

B. ELLIOT.

Victoria General Hospital,
Halifax, N. S."

FROM the *Trained Nurse* we learn that "another Training School has adopted the three years' course. The Brooklyn Homœopathic Training School has made its course three years instead of two, the change to commence October 1st. The Nurses will enter in classes, one class coming in each year. Heretofore Nurses have entered as vacancies have occurred." We are always glad to record the fact of any hospital extending its training to the three years' term, as we feel sure no woman can gain the theoretical knowledge, and practical skill necessary, to fit her to rank as a thoroughly Trained Nurse in less time, and the higher the standard, the nearer we get to the goal of our professional ambition—the efficient nursing of all ranks of the community.

We have never recognised that any detail of work which it is necessary to perform for the

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