

Lesson 18.—Gynæcological Terms and Definitions.

General Review Quiz.
Examination.

PHYSIOLOGY AND ANATOMY.

- Lesson 1.—Introductory. — General Outline of the Body; Different Parts of the Body; Structural Elements of the Tissues; The Cell.
Lesson 2.—Origin of Tissues; Epithelial Tissues; Stratified; Transitional; Simple.
Lesson 3.—Connective Tissues; Connective Tissue Proper; Adipose or Fat Tissue; Reticular and Lymphoid Tissues.
Lesson 4.—Cartilage; Bone.
Lesson 5.—The Skeleton; Long and Short Bones.
Lesson 6.—Flat and Irregular Bones.
Lesson 7.—General Review of Bones.
Lesson 8.—The Joints.
Lesson 9.—Muscular Tissues; Striated or Striped; Non-striated or Plain Attachment of Muscles to Skeleton.
Lesson 10.—Prominent Muscles of the Head and Trunk.
Lesson 11.—Prominent Muscles of the Limbs.
Lesson 12.—The Vascular System; The Blood.
Lesson 13.—The Vascular System continued; Heart; Arteries; Veins; Capillaries.
Lesson 14.—The Vascular System continued; Arterial Distribution.
Lesson 15.—Venous Return.
Lesson 16.—The Vascular System continued; The General Circulation; Some features of the Arterial Circulation; the Pulse and Arterial Pressure; Variations in the Capillary Circulation.
Lesson 17.—The Vascular System concluded; Lymphatic Vessels and Lymph.
Lesson 18.—Lymphatic Glands and Bodies of Allied Structure.

General Review Quiz.
Examination.

MATERIA MEDICA.

- Lesson 1.—Introduction to Materia Medica.
Lesson 2.—Introduction to Materia Medica continued.
Lesson 3.—Alkalies; Potassium.
Lesson 4.—Alkalies; Sodium.
Lesson 5.—Alkalies; Calcium and Magnesium.
Lesson 6.—Metals; Lead.
Lesson 7.—Metals; Iron.
Lesson 8.—Metals; Mercury.
Lesson 9.—Metals; Arsenic.

General Review Quiz.
Written Examination.
(To be continued.)

Home Hospitals.

SOME IDEALS.—THE NURSING STAFF.

WHEN it was suggested a few years ago to some of the leading surgeons in London, that it would be well to organise a Home Hospital upon the lines—with regard to nursing discipline—upon which our leading Hospital wards are arranged, that is to say, with a Sister or Superintendent Nurse in charge, the idea was discouraged, the arguments used being as follows: that thoroughly trained Nurses preferred the entire

charge of the patient, with no medium between them and the medical man; that patients preferred one Nurse always on duty, night and day, the Nurse occupying a second bed in the same room; and that what was needed in the proprietor of a Nursing Home was an amiable female who would look after the housekeeping, not “interfere” with the Nursing, obey the numerous behests of stray patients and Nurses who would use her house as a common lodging house, and accept the blame uncomplainingly for everything that went wrong.

The would-be ideal Superintendent failed to be convinced by the force of the arguments, and being somewhat of an opinionated person herself, straightway departed and opened a Nursing Home upon diametrically opposite lines.

She engaged a thoroughly qualified trained Nurse as Sister-in-charge, to whom she deputed the following duties:—Responsibility for the efficient Nursing of the sick; responsibility for the cleanliness of the house; responsibility for the general order, discipline, and obedience of the Nurses and domestics.

To obtain the efficient Nursing of the sick it would be her duty to attend each surgeon at the operations, with two Staff Nurses, attend surgeons and physicians during their daily visits to the patients, herself receive directions for the medical treatment, and see that they were carried out.

For the maintenance of cleanliness and order, she would each day inspect the patients' rooms, bath-rooms, lavatories, and domestic quarters; report to the Superintendent all repairs needed—and in a house, drains, sinks, taps, pipes, window-sashes, cisterns, boilers, gulleys, &c., require an eagle eye; while to a handy man a Nursing Home, with the constant wear and tear, is a snug little annuity.

To maintain order and discipline, the most efficacious method is to set a good example. To nurse twelve patients, this pioneer Superintendent arranged for a staff of nine permanent Nurses, six for day duty and three for night; by this means each Nurse is responsible for two patients (if light cases) by day, and four (all on the same floor) by night. Certain specified major operations require special Nurses, and these should be charged for in excess of the price paid for general Nursing (most experienced and thoroughly qualified Nurses can be obtained from the Registered Nurses' Society, 269, Regent Street, for this purpose). The Nurse's daily duties will be much as follows: At 8 a.m. she will go on duty, give the patients their breakfast (those who prefer being washed after an early cup of tea and before regular breakfast, can have this done by the night Nurse), thoroughly and carefully wash one patient, dust the room, not omitting the bed rails and frame, arrange the flowers, and carefully prepare the appliances, dressings, and hot water, preparatory to the surgeon's visit. There should be no fussing, hurrying and scurrying when the surgeon appears, his time is usually of great value, and all the little details of his own pet arrangements should be carefully carried out by the Nurse after one instruction. Doctors and Nurses both perform their arduous duties under great mental and physical strain, and the really good Nurse will prove her efficiency by anticipating the surgeon's wishes and requirements, so that his work may be effected with the least possible anxiety. Nothing is more detrimental to the peace of mind of a sick person than to note any forgetfulness on the part of the Nurse; it inspires him with unreasoning distrust.

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