

But it is only the first step, and the uniformity which has already been obtained in this matter is the best possible proof of its advantages.

The next advance to be made is the determination of a well-defined curriculum of Nursing education, because, to all who understand the subject, it is palpable that unless the three years' training is utilized for definite instruction and education, it is more than possible that that time might pass away and leave the probationer as ignorant at the end as she was at the beginning of the term. We quite expect that there will be a great outcry raised by all who disapprove of improvements, in any shape, against the details of any uniform curriculum; but that opposition is doomed to fail exactly as the opposition to the three years' system has failed.

The benefit and safety of the public is the first consideration, and the efficient work of nurses for medical men is the next. Whether Hospital authorities or Nurses like the innovations or not are matters which need no argument. We must realize that they exist for the public, and that the public does not exist for their convenience. If that fact were only sufficiently recognised, many of the criticisms which have already been advanced would never have been uttered. It is beyond all question that, even at the present day, with the great advances which have been made in the last ten years, the training of Nurses is still most deficient. There are some who think that it would be well for Parliament to take up this matter at once, and to appoint a body on the plan of the General Medical Council, whose duty it should be to lay down the necessary rules of study, and to conduct the necessary examinations—and, in fact, to define the necessary course of education through which every Nurse must pass before she could be registered. It is pointed out that this would follow the precedent of the medical profession, in which educational matters were in a most backward condition until the Medical Council, acting under the authority of the Medical Acts, defined both the term and the subjects of professional study. As we have frequently said, we do not hold this opinion ourselves, because we believe it to be more in accordance with English custom and habit that the State should not be asked to interfere in professional matters, except finally to

give a legislative sanction to a work already well commenced.

The great advances that have been made during the last decade in the Nursing world encourages some to believe that, as in the next few years still further improvements will be effected, it would then be time enough to ask for Parliamentary action. There are others, however, who do not agree with this view, for whose opinions we have the highest respect; and they urge that until the question of legal registration of Nurses is definitely settled there will be no peace or rest in the Nursing world. Consequently, they argue that the sooner Parliament can be approached upon the question, and a Nursing Act be passed, the better it will be for every interest concerned. This course we understand will at any rate, be attempted, and we therefore feel bound to place our opinion once more on record, that it would have been well if the Royal British Nurses' Association had recognised the duties devolving upon it, and the national importance of the work entrusted to its care; if the voluntary registration now in force could have been continued until a definite agreement amongst the managers of Training Schools could have been arrived at, respecting the subjects and the details of the system of a uniform education of Nurses. However it come, whether by a voluntary or by a compulsory system of registration, it is at any rate certain that the inevitable progress of evolution in the Nursing world which is leading to greater unity amongst the heads of the Nurse Training Schools will inevitably lead to a definite uniformity of system in the work of those Institutions.

Lectures on Elementary Physiology in relation to Medical Nursing.

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LECTURE IV.—THE EXCRETORY ORGANS.

(Continued from page 243.)

A PATIENT may be reduced to a state of almost complete collapse shortly after a burn; his hands and feet may become cold, his pulse slow, perhaps irregular, and his skin bedewed with a cold and clammy perspiration; all of these being signs of heart failure, and due to the extreme exhaustion

[previous page](#)

[next page](#)