

likelihood that more than once she will, in the absence of a regular medical attendant, be called upon to help in emergencies of the most serious nature, every nurse should be taught with great insistence the names, location and anatomical relations, of all the superficial arteries in the body, and the proper direction in which pressure should be applied to control hæmorrhage.

I now add brief outlines of lessons to show the manner in which it seems to me anatomy could be taught, so as to be one of the most interesting though difficult studies, and in such a way that the nurse would appreciate its value and importance, and not be disposed to resort to cramming, a practice as valueless as it is injurious.

*Eye.*—Ball, optic nerve, lids, orbital cavity, lens, iris, cornea, retina, lachrymal duct, infra-orbital foramen, branches of III. nerve, VII. nerve, sympathetic, ophthalmic artery, termination of facial artery, ophthalmic vein, facial vein, recti muscles, c. f. nursing cases of conjunctivitis; iritis, danger of sloughing of cornea from pressure; protection of other eye, sympathetic disturbances of other eye as in glaucoma. Action of drugs on pupil, pupil in various diseases, and in surgical cases. Symptoms in meningitis. Possibilities of diphtheritic infection. Measles. Connection with nasal cavities and meninges.

*Naso pharynx.*—How related anatomically to mouth, eye, ear, larynx. Eustachian tube; purpose subserved by turbinated bones, ethmoid bone, &c. Regio respiratoria; regio olfactoria. Epiglottis. Swallowing. Requisite cleansing of mouth in typhoid, scarlet, and other fevers, with reference to possible complications, middle ear disease, deafness, mastoid disease, by extension of process. Sources of blood and significance of hæmorrhages from nose, ear, pharynx, in cases of fracture; watery discharge from ear in such cases. Cleansing mouth of phthisis patients, paralysed patients, &c., inhalation, pneumonia; sordes, blue line on gums in lead poisoning (sulphides); reflexes through various ganglia and nerve connections; ear cough; sympathetic ear disturbances in teething (otic ganglia), &c.

*Hand.*—Study as a whole rather than for details, the quadrumana; grasping power; the perching of birds; how they can sleep without falling off, carpus, phalanges; location of blood vessels in fingers, palmar arches, precise location of joints with reference to wrinkles, thenar and hypothenar eminences pointed out; advantage of palmar flaps; Aristotle's experiment; mode of arresting hæmorrhage; nails, nature of tissue; functions; claws of animals, hoofs; nutritive value of jelly; hand contrasted with foot as to function, vascularity, &c.; classes of muscles (flexor and extensor), mode of attachment.

*Tibia and fibula.*—Subcutaneous portions, malleoli, groups of muscles, vessels, Pott's fracture, relation to subsequent deformity, inversion, eversion, how foot should be held while plaster dressings are applied, club foot, plantigrade (man), digitigrade (cat), pinniform (seal), step. Ingrowing nails (anatomy of nail bed), shoes, deformities. Foot and hand compared for diagnostic purposes in obstetrics.

The above are scattered notes simply showing that much valuable information can be grouped around the anatomical facts required for practical purposes by a nurse. Classification, generalisation, comparison, simplification, abbreviation are good aims for the nurse's teacher. If I might briefly outline about what is indispensable in anatomy to a nurse I should say:

*Bones.*—Names and appearances of all bones except those of carpus and tarsus and such bones of skull as sphenoid, temporal, &c., when disarticulated. Location of all long bones and seat, of commonest fracture, their articulations. General characteristics of vertebræ and ribs.

*Muscles.*—Three histological types of muscle tissue. Name and location of the more conspicuous superficial muscles, as given in list above. All the important groups of muscles and their action. What positions of body, head, limbs, relax these muscles. Action as levers of muscles. Mode of attachment. Innervation.

*Nerves.*—Names and approximate distribution of cranial nerves; names and approximate distribution of spinal nerves. Histology of a nerve, modes of stimulation. Chief nerve points in leg and arm, for electric stimulation. Brachial plexus, lumbar plexus, sacral plexus, in general terms as to function and distribution. Reflexes explained, ganglia.

*Brain.*—Relative size, significance of weight, convolutions, sulci. Main divisions: hemispheres, lobes, Sylvian fissure, fissure of Rolando, circle of Willis. All the exits of cranial nerves at base of brain. Pons Varolii, crura cerebri, medulla, cerebellum. White and grey matter. Fourth and lateral and fifth and third ventricles, if (and of course everything here should be) illustrated by dissection. [Sciatic nerves, greater and less, origin and course.]

*Viscera.*—Name, approximate location and size, brief histological description of all viscera of known function. Function, one or two common diseases that characterise each, and mode of causation, emphasising lungs, stomach, kidneys, heart, bladder, uterus, mamma.

*Arteries.*—Histology of its coats, c. f. vein, lymphatic. Systemic, pulmonary and portal circulation, capillaries. Name of chief vessels to brain, face, neck, arm, forearm, thigh, leg, foot. Relations of brachial artery of femoral, of popliteal, anterior and posterior tibial. Structures of neck.

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