

Difficulty in micturition is often present. If there is pain and greatly distended bladder, hot fomentations may be applied with benefit. Never use a catheter, except by the Doctor's express orders. Many patients cannot micturate in a recumbent, and must often be raised to an almost upright position. Never fail to give every support possible, and give your *whole mind* to what you are doing; for an involuntary lessening of the power in your arm may startle your patient considerably, feeling, as she does, how entirely dependent upon you she is for support, and it will make her feel nervous in future. If a catheter must be used, let it be scrupulously clean, warm, and made flexible in hot water, thoroughly well oiled, and very gently inserted. It has always to be borne in mind the extreme weakness of the patient, and what a terrible addition to her troubles, cystitis would be.

I think I have now touched upon most of the difficulties with which a Nurse has to contend in a case of Phthisis, but ask to be allowed a few more words to speak of the attentions to the body after death—"laying out," as it is usually called. If the death has been very gradual, it is well to tie a towel all over the head, enveloping ears and nose, for in turning the body to wash it, the blood, which for hours has been congesting in the lungs, is very likely to flow out from ears, mouth, and nostrils; for which, if you are not prepared, the consequences are most distressing; therefore, it is best to attend to the head last.

In performing these duties, I always think that Nurses should be very, very gentle and reverent, remembering that *that* body was the temple of our Lord, remembering all the suffering it has borne, thinking of its resurrection, and feeling honoured to be the one to prepare it for its tomb—for is it not an honour to prepare one for her last sleep, the awakening from which will be in the presence of the great Judge of all the earth?

S. E. VAUX.

AMATEUR NURSING.

THE subject of this article must, for some time past, have been a source of apprehension, if not dismay, to all who are engaged or interested in Nursing work.

Whence come these mysterious birds of passage, if I may so call them, who have found a fitting resting-place in our Hospitals? And for what end? These women can derive no real benefit from their brief term of Hospital training (?). They are of little use there, and still less elsewhere. What means this strange rush of women into the Nursing ranks, who never can do

Nursing service? There must be some strange confusion of mind as to the serious duties and responsibilities of Nursing amongst these amateurs, who are claiming admission into our Hospitals, and having their claims allowed.

At this conjuncture of affairs, it may not be amiss if I make a feeble attempt to dispel some of the mists and misconceptions that at present obscure the Nursing horizon. I will consider the Nursing art in relation to the Hospitals, the public, and the future of the Nursing profession.

To begin with the Hospital side of the question, and if I appear to digress I must ask the indulgence of my readers, as the digression will lead up to my point.

Hospitals were founded and endowed, and are still supported, for the shelter, care, and treatment of the sick and injured poor, for whose tending Doctors and Nurses are, of course, indispensably necessary. The teaching opportunities afforded by the aggregation of the sick and injured naturally led to the formation of Schools of Medicine in connection with the Hospitals, which, if of no particular use to the patients, were, and are, of immense benefit to the Medical profession, and through them to the public, who are thus supplied with skilful Surgeons and Physicians. In this way the better off part of the community derive as much advantage from the Hospitals as though they were the actual participants of their benefits; and, again, the skill and reputation of the Medical profession give fame and honour to the Hospitals.

Now, on precisely parallel lines, I contend that the teaching opportunities of the Hospitals should be made available for the formation of Schools of Nursing, which will be of immense benefit to the Nursing profession, and give to the public a good supply of skilful and reliable Nurses, and extend still more the benefits of the Hospitals to the community at large. And I entertain not the slightest doubt that in the near future the skill and reputation of the Nursing profession will confer honour on the Hospitals.

Now, with all this I hold the opinion that the teaching opportunities afforded by our Hospitals, whether to the Medical or Nursing professions, should be regarded in the light of privileges rather than rights, even though they have been paid for, which is a matter of detail rather than principle. These privileges should neither be lightly conceded nor carelessly taken. The recipients should regard them in the light of a trust, to be turned to account for the good of sick and suffering humanity—talents to be rendered up with usury of good works in the fulness of time. So earnestly do I entertain these views, that, were an event so unlikely and unfortunate to occur as to lead the governing authorities of any Hospital

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