

&c.; ending her twelve hours' duty with a clear and concise report, written for Sister's benefit, in a book kept for that purpose.

In provincial Hospitals, the Surgery is generally attached to the Male Accident Ward, and under the charge of the same Sister. One can easily realise, where the Hospital is the *only* one in the town, what a number of minor accidents and small operations have to be dealt with, particularly in a neighbourhood where there are any factories, mines, or public works in progress. This branch of the Nurse's education is specially interesting, and is calculated to show whether she is equal to an emergency, promptly and coolly applying the knowledge she has acquired. The most frequent cases are bad cuts, burns, and injury from machinery, where hæmorrhage is more or less severe, and required to be speedily coped with. There are many occasions when Sister and House Surgeon are away, and this is a splendid opportunity for Nurse to show her skill in applying a tourniquet effectively, or checking an exhausting flow of blood by pressure. There is much practice here, which is not to be got in the Wards, and being chiefly commonplace, every-day accidents, teaches her to deal with such in a business-like way, and gives that confidence which only comes with experience.

At the end of the second year comes another examination, more advanced than the first; after passing which the title of "Senior Staff Nurse" is earned, and for the remainder of her training time she is generally settled in one Ward, where she becomes Sister's right hand, and at any time when she is absent takes her place. She will have to chart temperatures, give medicines, instruct the Probationer, prepare dressings, and assist Sister at operations. She must avail herself of every opportunity of perfecting her bandaging and splint-padding, and learn to read prescriptions. Sister will probably be glad of her help with the linen too—it constantly wants overhauling and mending; also the store and medicine cupboards want looking through every morning, as everything must be replenished as soon as used up.

The end of the third year brings the final examination—a very important and anxious time. There is a certificate for every Nurse who passes, and there should be, in addition, a prize for the one who comes out with the highest number of marks. The papers this time are stiff enough, but confined to the subjects on which lectures have been given. Besides this she should have three well-padded splints to show, three special bandages, a cotton-wool jacket, and the complete notes, with temperature chart, of one medical and one surgical case.

This final ordeal gone through, behold our

"Trained Nurse," who is well-qualified to take the charge of a Ward, or devote herself to private work. But before doing either, she would do well to take a good holiday—say two or three months—for after three years of hard work a good rest is necessary—the usual allowance of a fortnight a year is much too little to maintain health for any longer period.

The complete training to be had in a general Hospital, of over two hundred beds, should include, in addition to the ordinary cases to be found in Adult or Children's Medical and Surgical Wards, a case of tracheotomy, of typhoid fever, of erysipelas, ovariectomy, and a major operation. By being put on special cases like these, the fund of knowledge is greatly added to. They require the exercise of a woman's best skill and tact, and allow her a little of the much-needed time for study.

I can fancy someone reading this article through, and saying, "But how about antiseptics? They are not even mentioned." Although they are nearly the last thing to be discussed, it is not on account of their want of importance. It is not in all Hospitals that Sir Joseph Lister's splendid *antiseptic treatment* is so thoroughly carried out as it is in the Wards of the Institution which he visits; but still, in modified and slightly different ways, the system is adopted by most Surgeons. Besides carbolic acid, many other agents are used; amongst them may be mentioned Sanitas, boracic acid, thymol, eucalyptus, iodoform, alembroth, &c., and where only a "wash" is required, iodine, or Condy's fluid. Some of these being very active poisons, great care must be employed in using exactly the right quantity and strength ordered by the Doctor, and if a concentrated solution is used, it must be accurately measured. No "antiseptic treatment" is of any value unless the Nurse is *thorough* in carrying it out. No most beautifully cut dressing would prevent ill effects if a Nurse came to apply it straight from another bad case, with unwashed hands, or utensils which had not been properly cleaned and carbolised from previous use.

One word to end with about the books which she will find most helpful, and many of which, if not provided for the use of the Nursing Staff, are not expensive to buy, and will always be invaluable helps to her: they are Quain's "Dictionary of Medicine," Heath's "Minor Surgery," Huxley's "Elementary Physiology," Florence Nightingale's "Notes on Nursing"; and many others might be added.

Now, farewell to our "Trained Nurse." We wish her all success, and may it be said of her by many a grateful patient—

"Her tender mercies freely fall,
Like heaven's refreshing dews, on all."

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