

Nursing Politics.

A MOMENTOUS DECISION.

THE "Nurses' Journal" for the present month contains an advertisement of the publication of the "Roll of Members, 1899." This, we understand from the official report of the Council Meeting, is to take the place of the Register, for the privilege of admission to which many nurses have paid the sum of £1 rs.

We must draw the attention of Members of the Royal British Nurses Association to several points in connection with this announcement. In the first place the pivot upon which the work of the Association is based is removed, the principle of a Voluntary Register, as a means of protection to the public, and to trained nurses, being the key-note of the work of the Association, as those who were present at the meeting held in St. George's Hall, when the British Nurses' Association was launched, will remember.

It remains to be seen whether those nurses not members of the Association, who have paid a definite sum for the insertion of their names on the Register will think that the Association has fulfilled its responsibilities to them by publishing a Roll of its own members, and then placing in an appendix the names of those who were formerly Registered Nurses, and who now stand in a relation to the Association which we hope they understand, but which we frankly own is incomprehensible to us.

No wonder it was necessary to get rid of the influential and self-respecting members before such a disastrous step was taken!

We presume that the Registration Board is now non-existent, as the Association clearly cannot register nurses if it has no register. We consider that it is the duty of the Association to make this clear to nurses. If they are willing to pay an entrance fee of £1 rs., and a yearly subscription of 5s. for the benefits of membership of the R.B.N.A., that is their own affair; but to accept guineas for registration when there is no Register would be obviously to take money under false pretences.

Another point to which we invite attention is, that though the General Council is the Governing Body of the Association, it has not, according to the report in the "Journal," been in any way consulted on this most vital matter. The announcement that "it has been determined" that the Roll of Members should be issued in a more official and complete form, and the names of those who are not members should be issued separately, was made by the Medical Hon. Secretary in the Report, to the Council of their Executive Committee, and the Governing Body remained dumb! Could subserviency go further?

The Old Nursing and the New.*

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The method of administration of the medicines years ago was curious, and a description of it will probably amuse you. There were what were called the "ward orders" and the prescriptions. There was a medicine closet in each ward, and in it were kept the ordinary standard preparations which were likely to be frequently called for—whiskey, laudanum, paregoric, nitre and such things. From this store was ordered a dose of anything the Attending or Resident Physician might direct. For the regular medicinal treatment of each patient, however, prescriptions were written, which were sent to the central apothecary shop, where bottles were prepared, and labelled with the number of the bed of the patient for whom they were intended. In the ward, there was a small wooden table at the head of each bed, and upon this were placed the bottle of medicine and pewter spoons upon a waiter. The force of nurses, as I have told you, was small, and it was not expected that they should personally administer the various doses to any but patients who were helpless or delirious. All others were expected to take their own medicines, after they had been told by the nurse how many doses a day to take, and been provided with a spoon of fitting size. You can imagine how dirty and unsightly these bottles, spoons and waiters were, and worst of all, how frequently the patients did not take what was ordered for them. They forgot to take their medicine, or poured it out of the window or left it untouched in the bottles. I have often seen the nurse personally administer a dose to some refractory patient whom he suspected of not having taken his medicine as it had been ordered. The patient made a wry face and took the single dose, but patients had little difficulty in getting the better of such a system, and a considerable portion of the medicines ordered was never taken.

The diet was of a character so inferior to what is now provided that it will probably be hard for you to believe what I shall tell you. I speak now of what was called "house-diet." This consisted of a breakfast of coffee and dry bread, dinner of soup, boiled beef and boiled potatoes, with the jackets on, and supper of tea and dry bread. The coffee and tea were prepared in the central kitchen, where milk and sugar were mixed with them. This unappetising concoction was sent to the wards in large tin receptacles, from which

* An Address to the Graduating Class of the Pennsylvania Training School for Nurses, December 15th, 1898.

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