

spent half their income in advertisements, the meeting unanimously (with the exception of those representing the Society), passed the following resolution: "That this meeting has heard the statements made with deep regret, and does not believe a single one of them." and "this meeting" was composed of working men and working women who had been patients themselves, or whose friends had been patients.

Mr. Osborne, with grand spirit, writes that he "will not hold his peace." No one wants him to do so. We all sadly need a little humour in hospital work, and in the hospital press, and so long as he will kindly continue to write we are sure, at any rate, of one smile.

Yours faithfully,
SYDNEY HOLLAND.

THE WHOLE NURSING QUESTION.

To the Editor of "The Nursing Record."

DEAR MADAM,—Week after week instances occur and are reported in your valuable paper in which the need of some body which could exercise control in nursing matters is abundantly proved. Instances of neglect of the sick, of pseudo-nurses bringing the profession into disrepute, of the need of the exercise of disciplinary powers even in the ranks of trained nurses, of the chaotic condition of nursing education are frequent. One institution gives a certificate at the end of three months, and guarantees employment afterwards; another certifies its probationers without any examination; and yet another gives a thorough course of practical training, and certifies its nurses only after a fairly stiff examination. Every institution does what is right in its own eyes, and then the efficient and the inefficient are turned loose upon the public, and all expect £2 2s. a week, besides board, lodging, washing, and travelling expenses. Can we wonder that the public consider the "trained nurse" of to-day dear at the price, and hesitate before they engage her. My experience is that a private nurse, now-a-days, is thought of, and treated, very differently from what she was ten years ago; indeed, the public is becoming shy of her altogether, and before long she will be a drug in the market.

Surely the remedy for this condition is, first of all, to have a public enquiry into existing evils, which are so glaring and so well known, as to demand immediate attention, and then to institute a central nursing council which shall determine the minimum qualifications for a trained nurse, and then we may legitimately demand legal protection for properly qualified nurses, by means of registration by Act of Parliament. Of course there would be opposition to a public enquiry on the part of those interested in hushing up abuses, but it is a point for the public to consider whether they think there is most likely to be right on the side of those who desire an enquiry, or those who shirk it. If they consider that the former are likely to have right on their side, that they desire to protect the public, and to organize the present chaotic state of the nursing profession, then let them come forward and help those who are working for this measure of justice, for, after all, those nurses who are asking for an enquiry into the whole nursing question are asking for it quite as much on the public behalf as on their own.

I am, Dear Madam,
ONE WHO DESIRES IT.

THE ADMINISTRATION OF POISONS.

To the Editor of the "Nursing Record."

DEAR MADAM,—I read with much interest your article on the Administration of Poisons last week, and I fully endorse your remarks. The lax way in which new probationers in hospitals are often allowed to give medicines is a matter of amazement to me, and I cannot but believe the practice to be a most dangerous one. Then, again, of course, definite instruction should be given in the properties and effects of drugs, but how often is this done? I believe that at Guy's Hospital some instruction is given to the nurses in dispensing, by the head dispenser, but I do not know of any other hospital where definite lessons are given, and any thirst for knowledge on the part of an intelligent probationer is usually met by an unqualified snub. The business of a nurse is to *obey*, we are told. If she gives the dose prescribed on the bottle no more is required of her, and so, she has to pick up as best she can the symptoms, say of opium or mercurial poisoning, the knowledge that iodide of potassium or chloral may cause a rash, and the hundred and one other things that it behoves her to know. I very much hope that when the happy day comes when a minimum curriculum of education is required of British nurses some knowledge of drugs and their properties will be required of candidates before certification.

I am, Dear Madam, Yours truly,
A REASONABLE WOMAN.

THE ABDOMINAL AORTA.

To the Editor of "The Nursing Record."

DEAR MADAM,—Will you allow me to ask, through the medium of your valuable journal, a question on a subject with regard to which I have never been able to find any information in the ordinary text-books. One is taught, that in cases of severe hæmorrhage from the uterus, or lower extremities, other means having failed, the abdominal aorta should be compressed. Of course this can be done. In a fairly thin subject it is quite easy to feel the pulsation of the aorta, and there would seem to be no difficulty in compressing it against the spine, but, what exercises my mind, is how long would it be safe to keep up such compression? This is precisely what one is never told. It seems to me that if the entire blood supply were cut off for any length of time that mortification would supervene, added to which the venous circulation, having returned the blood to the right side of the heart, the circulation being impeded by the obstruction of the aorta, there would be an engorgement, to an even dangerous extent, of the vessels of the upper part of the body; but this is all pure theory on my part, and may be quite wrong. I shall be extremely grateful if you will kindly enlighten my ignorance. I really am,

ONE WHO WANTS TO KNOW.

[In theory, of course, the compression of the aorta is simple. In practice, it is rarely needed, and still more rarely carried out. Indeed, in fat people it would probably be impossible. Then, it is only needed in sudden emergencies—especially after labour; and would only be required for a few minutes, during which a clot would form in the mouth of the bleeding vessels, or the doctor would use some local application. In either case, when the pressure was gradually removed, the ordinary circulation would be restored.—ED.]

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