

Our Foreign Letter.

(From New South Wales.)

THE following information from New South Wales concerning the formation of an Army Nursing Service Reserve in Sydney, will be read with interest by our readers:—

NEW SOUTH WALES MILITARY FORCES.

Army Nursing Service Reserve formed under Clause 5, Volunteer Force Regulation Act, 1867.

ARMY NURSING SERVICE RESERVE.

The Governor, with the advice of the Executive Council, having approved of the formation of an Army Nursing Service Reserve under the Volunteer Force Regulation Act of 1867, it shall be lawful for Nurses holding qualification certificates, as hereafter specified, to offer their services for enrolment in such Army Nursing Service Reserve. When enrolled they will be considered as a portion of the Medical Services of the Colony. They must, however, satisfy the Officer Commanding the Medical Services, or his representative, as to their general fitness for this special service.

The establishment and classification is as follows:—One Lady Superintendent of Nurses, one Superintendent, twenty-four Nursing Sisters.

A candidate for the appointment of Superintendent or Nursing Sister must not be under twenty-one years nor over forty years of age, and must have had at least three years' preliminary service and training combined, in a duly recognised civil general hospital.

Members will be classified as "efficient" or "non-efficient," to be reckoned from the 1st July each year until 30th June following. In order to be reckoned as "efficient" the conditions prescribed in these Regulations must have been fulfilled.

No Nursing Sister under the Army Nursing Service Reserve shall classify as an "efficient" on the 1st July of each year, unless during the previous year she has fulfilled the regulations laid down from time to time for such "efficiency," in such places and under such circumstances as may be determined in the rules regulating this branch of the service. A Nursing Sister of the Army Nursing Service Reserve to classify as an efficient will be required to (a) qualify in First Aid; (b) attend annually six lectures on Organisation of Military Hospitals, Hygiene, and Military Surgery. The certificates of efficiency will be issued annually by the Officer Commanding the Medical Services.

A regulation uniform, similar to that worn by the Army Nursing Service (Imperial Service), will be provided, and towards which a capitation allowance of £2 will be granted on joining, and further supplemented by an annual allowance of £1 to each "efficient."

In accordance with the terms of Clause 25, Volunteer Force Regulation Act, 1867, the Army Nursing Service Reserve or any portion thereof, may be called up for duty in case of war, and shall thereupon become subject to the conditions prescribed for the Volunteer Force, and remain subject to such conditions so long as they continue on actual military service.

Miss Nellie Gould has been appointed Lady Superintendent of Nurses, and Miss Johnstone Superintendent.

Professional Review.

HINTS TO PROBATIONER MIDWIVES.

WE have received a copy of "Hints to Probationer Midwives," by Miss Annie S. Pruett, Superintendent of the Union Workhouse Infirmary, Sunderland, compiled for the use of her probationers, published by Mr. Thomas O. Dodd, Sunderland. We are always glad to welcome a book written by a nurse for nurses, at the same time we cannot approve of some of the advice given by Miss Pruett, for which we will explain our reasons. The line of demarcation between the duties of a midwife and of a medical practitioner should be well defined, and surely there can be no question that to prescribe sedative draughts is the province of the latter; but when we bear in mind that the author tells us in the preface that her hints are intended for probationers, and that she leaves those who have had long standing experience to follow their own methods, it is certainly indiscreet, to use no stronger word, to tell them that "sometimes a sedative draught will be necessary," the inference being that the probationer is to prescribe the sedative draught. Then again, in case of hæmorrhage after labour we are told, "if you feel the uterus keep relaxing in your hand, try cold application to vulva, or better still, a hot douche of antiseptic lotion at 114° F. or 116° F., injected well up into the vagina," but we find no directions as to the nature or the strength of the antiseptic lotion to be used, and the absolute necessity of employing a non-poisonous agent, and no word of warning as to the necessity for extreme caution, as the uterus is relaxed, and the fluid, if not injected with the greatest care, may find its way through the fallopian tubes into the abdominal cavity, with the result that death will in all probability ensue.

Again, we know that midwives are frequently told to give ergot after the second stage of labour is over, but we do not think this should be done without definite medical directions, as in the case of adherent placenta serious difficulty may ensue. And what are we to say as to the advice given to a probationer that in case of uncontrollable hæmorrhage from adherent placenta, she must insert her hand "right into the gaping uterus and peel off the placenta from the uterine wall"? It is true she is told "this operation ought to be done by surgeon, but you must do it in his absence to save a woman's life." It is very questionable in the first place if the woman's life would be saved by a probationer who, without the necessary knowledge, attempted this difficult operation. Secondly, we do not think that in such a case uncontrollable hæmorrhage is likely to occur before the arrival of a medical practitioner, and further, no probationer should be left alone to deal with any midwifery case.

We cannot approve of the advice to tie a bandage round the ankles of patients to prevent their leaving their beds. The obvious alternative is to leave a nurse on duty in the ward. With regard to placing the second ligature on the infant's cord, we think it is a safer plan to do this *after*, not before the bath, as the warm water usually causes the cord to shrink, and consequently the ligature may become loosened and useless. A wise piece of advice is, after swabbing the eyes of the child immediately after its birth, not to forget the fists, as they are sure to go near the eyes while waiting to be washed. This detail is often forgotten.

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