

Appointments.**LADY SUPERINTENDENT.**

Miss Kathleen Disney has been appointed Lady Superintendent of the Cork Hospital for Women and Children. She was trained at the London Hospital, where she also held the position of Night Superintendent. She has also been Matron at the Boston Hospital, and at the Royal Infirmary, Preston.

MATRON.

Miss Alice Giles has been appointed Matron of the Hornsey Isolation Hospital. She received her training at Guy's Hospital, and has held the position of Sister at the Royal Portsmouth Hospital, and at the General Hospital, Birmingham. For six years she has been Night Superintendent at the London Fever Hospital.

Miss I. M. Dundas has been appointed Matron at the Reigate Isolation Hospital. She was trained at the Royal Infirmary, Glasgow, and has held the position of Matron at the Glasgow Ophthalmic Hospital, and at the Leith Fever Hospital.

Mrs. Winifred Butler has been appointed Matron of the Liskeard Cottage Hospital. She received her training at the Queen's Hospital, Birmingham, where she has since held the position of Ward Sister.

SUPERINTENDENT NURSE.

Miss Bridget Nugent has been appointed to the office of Superintendent Nurse at the Burnley Union Workhouse Infirmary, which comprises about 180 beds, and has a staff of twenty nurses, including probationers.

Miss Nugent was trained at the Infirmary, Birmingham. After her three years' training she was appointed in that institution as Ward Sister of a male surgical ward, and afterwards of a female surgical ward. When the office of Sister in Charge of the Lying-in Block fell vacant, Miss Nugent was selected to fill it, and held this position up to the time of being appointed at Burnley.

Miss Nugent is certificated for medical, surgical, and obstetric work, and is in possession of the Diploma of the London Obstetric Society.

SISTER.

Miss Edith A. Hurst has been appointed Ward and Theatre Sister at the Bradford Children's Hospital. She was trained at the Royal Infirmary, Preston.

Miss Minnie Morrison has been appointed Sister at the Grantham Hospital. She was trained at the Arbroath Infirmary, and has acted as Staff Nurse at the Royal Hospital for Sick Children, Edinburgh.

Notes on Practical Nursing.**PREPARATION OF OPERATING ROOM SUPPLIES AND THE OPERATING ROOM IN HOSPITALS AND HOMES.**

BY HANNA KINDBOM,

Late Clinical Instructor of Nursing, University of Texas, U.S.A.

(Continued from page 352.)

THE PREPARATION OF THE OPERATING-ROOM IN THE HOSPITAL.

An ideal operating-room should be built without corners and cracks for the dust to settle. It should be light and well ventilated, also light coloured, so that all dirt is easily detected. It should not be large, as the space for dust to circulate is greater and consequently it is harder to keep clean. The walls should be lined with porcelain, large tiles, or painted with several coats of enamel. The floor is best covered with large slates or tiles; it should be slanting towards the sides, allowing all fluids to accumulate there in a specially constructed open shallow sewerage, which is kept immaculately clean and properly disinfected.

The ceiling is mostly made with large skylights, the surrounding parts being constructed like the walls. The north side wall of the operating-room should, if possible, consist of a large window; the lower panes can be painted to prevent exposure to the street.

An operating-room should be situated on the upper floor to prevent accumulation of dust from the street, etc., and should contain only the necessary tables and instruments, sterilizer, irrigator, and chairs, but no other apparatus or cases.

Several small rooms should adjoin the amphitheatre, such as sterilizing-room, anæsthesia-room, wash-room, instrument-room, and store-rooms for dressings and materials used. Back of the wash-room should be two small rooms not connected, one the surgeon's bath and toilet room, and one for the nurses.

The sterilizing-room should contain all modern sterilizing apparatus, a large enamelled table, a porcelain sink with hot and cold water, stationary wash-stands with modern improvements, a stand with solutions and basins; this all to be used by the nurses when engaged in sterilization.

The anæsthesia-room should contain a well padded litter, a table with different anæsthetics, tongue forceps, inhalers, sponges on handles, towels. On the lower shelf of this table, or on an adjoining table, should be all kinds of restoratives in solution, such as strychnine, tinct. digitalis, whiskey, brandy, aromatic spirits of ammonia,

[previous page](#)

[next page](#)