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### Editorial.

#### OBSTETRIC NURSING.

IN a book on obstetric and gynæcological nursing recently published in America by Dr. Edward P. Davis the author asserts that a thorough knowledge and drill in asepsis and antisepsis is indispensable in obstetric nursing, and further lays down the rule that "the nurse should consider each pregnant and parturient patient as a surgical patient, and as far as antiseptic precautions are concerned, an abortion or labour must be treated as a surgical operation."

How many lives would be saved if this rule were always carried out, only those who have done obstetric work amongst the poor can form any idea. When aseptic lines are conscientiously followed in the management of these cases "the peril of childbirth" is so minimized that the danger of death need not be seriously considered. But how far we are from having attained this standard at present the statistics of the Registrar of births, marriages and deaths will show.

Great responsibility therefore devolves upon the nursing profession to secure to lying-in

women attendants thoroughly well drilled in the principles of asepsis. How is this to be accomplished?

In the first place trained nurses, and more especially Superintendents of nurse training schools, have as yet scarcely realized the duty, which they cannot legitimately repudiate, of providing efficient obstetric nurses. They are apt to say that obstetric nursing is a "special branch," and to consider that they have done their duty to their pupils in providing them with adequate education in medical and surgical nursing. But we are, as a profession, beginning to learn that we cannot take up this position without developing in our midst the obstetric specialist whose qualifications we are unanimous in considering inadequate, and whom we do not and cannot recognize as a nurse at all, but with whom we have no right to find fault if we do not take pains to supersede her by a more efficient person. The fact is, that it is as impossible to nurse one part of the body only as to treat one part without reference to the whole, and it is only possible to be an efficient obstetric nurse when one has been thoroughly grounded in the principles of medical and surgical nursing.

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