

tions from his skin; and will not be permitted to sit on the bed or handle the bed clothes, but will be allowed to sit on a chair by the bedside at some little distance from the patient.

16.—Visitors will also be required to wear a wrapper (to be provided by the Board) covering their dress when in the Wards, and to wash their hands and faces with carbolic soap and water before leaving the Hospital, or to use such other mode of disinfection as may be directed by the Medical Superintendent.

17.—Visitors are strongly urged not to enter any omnibus, tramcar, or other public conveyance, immediately after leaving the Hospital.

[We are greatly indebted to Dr. Thomson for kindly complying with our request for information on this subject.—Ed.]

Comments and Replies.

Irish Matron.—No definite pronouncement as to what constitutes efficient training in maternity nursing has, so far as we are aware yet been defined, probably because so few general nurse training schools take any steps to secure education in this important branch to their pupils. Maternity nursing falls therefore to a great extent into the hands of specialists which is much to be regretted from the point of view, both of patients and nurses. A few months' training in midwifery, and in monthly nursing, are given at lying-in hospitals to women who need not necessarily have had any previous general training. Queen Charlotte's Hospital is no doubt right in the axiom it lays down that every midwife should receive some training in monthly nursing, and every monthly nurse should have training in midwifery. Our own view of the case is that every mater-

nity nurse should have a sufficient knowledge of midwifery to enable her to attend to her patient with necessary skill in the absence of the doctor, for it must be remembered that the emergencies of maternity nursing are many, and want of knowledge on the part of the nurse may cost the patient her life. She should, of course, hold a certificate of general training.

Nurse Peters.—In our opinion it is best to leave the stump exposed to view, in a newly performed amputation, though it is well to screen it from the patient's view by means of a properly arranged cradle and sheet. The advantage of this plan is twofold. (1) The nurse passing up and down the ward can instantly detect any oozing, and (2) the patient is not disturbed by periodical examination of the stump, a very real advantage in the case of a nervous patient.

Private Nurse.—If milk is unobtainable, as is sometimes the case when travelling, an excellent substitute in an egg flip is sodawater. A beaten up egg, half an ounce of brandy, caster sugar to taste, and the addition of soda water, so that the glass is three-parts full, make an excellent pick-me-up, more especially if crushed ice is added.

Miss Preston, Bristol.—You should obtain "Practical Nursing" by Miss Isla Stewart, Matron of St. Bartholomew's Hospital and Dr. Herbert Cuff, Medical Superintendent of the North Eastern Hospital, Tottenham. It is an excellent Handbook of Nursing. It is published by William Blackwood and Sons, Edinburgh and London. A second volume is, we understand, to be published shortly.

Staff Nurse, Fulham.—You would find the Natural History Museum at South Kensington full of interest and instruction, and you should by no means fail to see the beautiful models of the malarial mosquito and the tsetse fly, which occupy cases in the central hall, and which have recently been described in our columns. They give a wonderful idea of the development and the methods of procedure of these pests.

<p>VIROL is recom- mended</p>		<p>as a fat food for the young.</p>
<p>is recommended by doctors.</p>		

Patron—H.R.H. THE PRINCESS OF WALES.

ALEXANDRA HOSPITAL, FOR CHILDREN WITH HIP DISEASE, QUEEN SQUARE, BLOOMSBURY.

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STANLEY SMITH, *Secretary.*

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