The resident Doctors also kindly assisted in giving lessons on the positions of the organs, etc. I must thank one and all; without co-operation the Matron is helpless. The intimacy arising from the contact with so many of her future fellow-workers is most beneficial to the pupil, taking away much of the strangeness of the new surroundings, and cultivating a spirit of good will.

Thanking you for your patience in listening to me, and your interest in our doings, I now conclude, with the hope that we may all go on with earnest purpose, ever keeping before us the highest ideals.

## Motes on Practical Mursing.

## THE PREPARATION AND AFTER CARE OF PATIENTS FOR SURGICAL OPERATIONS.

## By HANNA KINDBOM,

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To make an operation successful we need to take into consideration the surgeon's skill, the patient's physical condition, and a thorough preparation not only of the field of operation but also of the entire system.

Let us, then, first consider the patient's mental condition. We all have horror and fear of the knife, because we know we are going to suffer pain, and perhaps meet with death earlier than we expect. And we all have a fear of death, because the hereafter is hidden from our eyes with a mist that only death can lift.

A nurse must take into consideration the sentiment of a happy home-life, of the ties of kinship in whatever way they come before her, and use most infinite tact and firmness, meet cheerful and attentive kindness not only towards the invalid, but all those that have her or his welfare at heart, trying to win their implicit confidence for many reasons. No matter how accustomed we nurses are to see suffering, the helpless condition of our patients when they are placed at our mercy, unconscious under the influence of an anæsthetic, must appeal to the heart of every true woman amongst us. We are strangers to them, and as long as we cannot trust our lives in anybody's hands until we have placed implicit confidence not only in their skill but also in their kindness of heart, we must expect our patients to feel the same.

A nurse's first duty is then to mentally prepare the patient, using the method she finds most beneficial, and give opportunities that plainly will show how necessary it is for a trained nurse not only to be intelligent, observant, and bright, but also to possess a thorough knowledge of human

nature, and to be able to show tact, endurance, and patience.

If the patient's nervous system has been irritated from prolonged illness, we generally find it of great advantage to build it up by proper nourishment, massage, baths, electricity, fresh air, and whatever tonics the doctor considers necessary.

Nourishment.—Perhaps the best nourishment will be milk in different forms, such as skimmed milk, buttermilk, peptonized, pasteurized, sterile, Koumyss, Matzoon, etc. Some patients object to milk and seemingly it does not agree with their digestive organs; so we then have to adopt animal food in form of broths and soups made from beef, mutton, chicken, clams, oysters, alternately with liq. peptonoids, beef juices, albumen water, gruels, etc. The juice of fruits such as oranges, grapes, lemons, etc., is very refreshing and helps to keep the bowels in good condition. This diet should be adopted, when the digestive organs are impaired, for an abdominal section one week previously.

Massage.—A gentle but firm friction with lanoline, cocoanut oil, or cod liver oil is soothing as well as nourishing to the tissues, and if the patient is in bed the massage will give the necessary exercise to the muscles.

Baths.—Should not only be given for cleanliness, but cold needle, and fan baths should be given to stimulate the spinal cord and other nerve centres; hot tub or sponge baths to induce sleep at nights, to soothe the patient at any time when restless.

Fresh air should be obtained in the middle of the day, when the weather is pleasant. The patient should either walk a short distance, ride in a carriage, or take a sun bath out on the balcony.

When the patient's general condition is improved she should be prepared as follows:

Systematic.— Digestive organs by special diets and cleansing by giving calomel to regulate the action of the liver three days previous to the operation, purgatives every night and morning if necessary for one week previous to a major operation, two days before any other operation, omitting the dose the morning of the operation. This treatment should be altered according to the patient's condition, the intention being to keep the intestinal tract as clean as possible.

The lower bowels should be thoroughly flushed three to four hours before the operation, the nurse being careful to see that all the injected fluid is expelled. This is especially important in cases of operations on the rectum, organs of generation, and the bladder.

The urinary organs should also be considered and cleansed. A patient should never be allowed to take an anæsthetic, especially ether, before a thorough examination of the urine has taken place.



