

half respectively), a small toasting fork, tea-pot, cafetiere, and a gruel strainer. As to crockery, feeder, breakfast and tea cups and saucers (two of each, say), a small plate or two, salt-cellar, and pepper-box, two basins for mixing gruel and arrowroot, and table, dessert, and tea spoons, knife and fork, milk jug, and sugar-basin. Now as to "stores"—tea, coffee, cocoa, sugar, oatmeal, arrowroot, small can of condensed milk, Brand's beef-essence, all of which are quickly prepared and may be required at any moment day or night. Two or three table napkins, d'oyleys, and a small tray, or salver, for serving things on, should be included in your list; also tea-cloths, dusters, and a rough cloth or two for washstand use, for the less a Nurse has to depend upon others the better; and trifling as these details may appear on paper, they make up the wide difference between "muddle" and management. A few days will suffice to get all these things together; they are so inexpensive anybody can afford them, and so necessary no one should be without them at such times.

Let me give an illustration of the common sense value of these preparations. A Nurse wants to prepare a cup of milk arrowroot for her patient's lunch. She has no saucepan in her room, and she has to descend to the lower regions to ask the cook for one. That important individual, absorbed in her duties, somewhat ungraciously hands over a saucepan. The Nurse, on inspecting same, discovers an ominous odour of onion about it, and conveys her impression to the autocrat of the kitchen, who indignantly denies the imputation, and says Nurse must take that or none. Nurse accepts the saucepan and the "situation," and goes on to ask the housemaid for a breakfast cup and saucer. That personage, in a somewhat "fluffy" condition from sweeping the dining-room carpet, tardily fetches up the cup and saucer asked for. Nurse says she wants a teaspoon as well. "The plate is downstairs. The parlourmaid is cleaning it; you must ask her for one." That exalted individual is engaged, in some mysterious and subterranean region, in the occupation aforesaid, and when found hands over the teaspoon after bestowing extraordinary pains upon "polishing" it. Nurse ascends to her own department, armed with the dubious saucepan, the cup and saucer, and the resplendent spoon. She finds by her watch that half-an-hour has flown since she left her room. During her absence her fire has gone provokingly low, and has to be "fetched up" with sticks: delay number one. The arrowroot is made at last, but there is no sugar; Nurse forgot that when she was downstairs. Another expedition to the nether regions for the sugar basin. Parlourmaid says the groceries have only just come, and she must unpack them to get the sugar: delay

number two, and Nurse gets her sugar. By this time an hour has flown. When the lady has her lunch taken to her, she says, "I do not think I want it now, Nurse; I will wait for my dinner"; and perhaps the arrowroot is sent away scarcely tasted. The dinner comes an hour afterwards; the patient is too faint to care for it, and more than half is sent away. The Doctor pays his afternoon visit. The patient is fretful and depressed, and before he goes he says to the Nurse, "You *must* not let Mrs. Blank be so long without food. She is quite poorly to-day. This must not occur again."

Poor Nurse! Now if she had been able to make the arrowroot *just* when it was wanted, at a delay of fifteen minutes at the most, how different things would have been! Believe me, this is only a typical case, which occurs in all households, great and small, unless there are wise and necessary precautions taken to prevent them. A saucepan and other needful things would have saved all this trouble and "friction," and worst of all, harm to the patient.

To resume our task of preparation. With respect to things specially required for the time of labour, you will want a piece of waterproof sheeting two yards long, which I generally have cut in half, and a good supply of old sheets or counterpanes (these last are the best if they are quite soft) for drawsheets, and an old thin blanket. Have all these things well aired and put away in the drawer in your room ready for immediate use.

At this point, I may as well refer to those modern "substitutes" for bed and personal use which have been brought before our notice for use in Obstetric Nursing, over the extemporised contrivances we have hitherto used. My women readers, lay and professional, will quite understand the drift of my remarks, when I say that, with regard to these aforesaid "substitutes" over other appliances, the question lies between washing or cremation. Now, having an obstinate prejudice in favour of soap and water, combined with an illimitable faith in the purifying influences of sunshine and fresh air upon all wearing apparel and bed linen, &c., I am distinctly in favour of washing (whenever practicable) over cremation, and, as far as our portion of Nursing work is concerned, believe that common sense laundry arrangements meet all our needs. I may, perhaps, enter more fully into the details of the question, and point out to Nurses the various "substitutes" that have been brought under my notice, and where they are, and where they are not, adapted to Obstetric Nursing in its home aspect. Institutional Nursing is another thing altogether.

(To be continued.)

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