

but with love and kindness, with service and sympathy. The new Knight-Errant toils for the orphan and the invalid or the children of the unhappy poor. The Faire Ladies of this age listen not to Minnesinger and Troubadour, nor dim their eyes with tapestry weaving, nor risk their necks with hawk and hound, but for life-work they employ their best powers in developing educational questions, civic reforms, domestic science.

Again, let us repeat, for the sake of emphasis, that not a "Code of Ethics," but ethical principles and daily drilling in whatever may lead to their development and appreciation is the sorest need of the nurses of to-day.

With Miss Nightingale's "Notes on Nursing," Mrs. Robb's "Nursing Ethics," Miss Dock's "Ethics or a Code of Ethics," we have a liberal supply of excellent counsel, which, like Shakespeare, cannot become obsolete. Add to this constantly the company of various good writers (through their books), such as Ruskin's "Seven Lamps of Architecture," Emerson's "Essays," the poetry of Tennyson and others. For daily and emergency use what better rule is there than the Oath of Hippocrates? "With purity and holiness, I will pass my life and practise my art. Into whatsoever houses I enter, I will abstain from any voluntary act of mischief or corruption. In connection with my professional practice, whatever I see or hear in the life of men which ought not to be spoken of abroad I will not divulge, as reckoning that all such should be kept sacred."

Or, as Sir Thomas Browne advises: "Live up to the dignity of thy nature; pursue virtue virtuously; have a glimpse of incomprehensibles and thoughts of things that thoughts but tender-touch."

Thus shall we become so true to ourselves that baseness or falseness to others will be impossible.

And, finally, to quote the Highest Authority, "Whatsoever things are true, whatsoever things are just, whatsoever things are pure, whatsoever things are of good report, think on these things."

### Practical Points.

If cutting instruments are to be boiled, it is always best to continue the boiling for not over three or four minutes, as it blunts the instruments badly. A preferable way of disinfecting them is to wash them well with soap and water, place them in pure carbolic acid for ten or fifteen minutes, remove them with forceps and place them in alcohol.

After using some of the more complicated instruments which it may be impossible to dry very thoroughly after they are washed, they may be dipped in alcohol, which will absorb the remaining water, or they may be placed in an oven for a few minutes. The latter method is probably the better of the two.—*International Jour. of Surgery.*

### Australian Nursing News.

The annual meeting of the Australasian Trained Nurses' Association was held on Tuesday evening, July 9th, at the Royal Society's Rooms, Sydney. The President (Dr. Clubbe) occupied the chair, and there was a large attendance of nurses and doctors. After the minutes of the last meeting had been read and confirmed, the hon. secretary (Dr. Sinclair Gillies) read the report of the Council for the year ending June 30th, 1903. It ran as follows:—

#### REPORT OF THE COUNCIL OF THE AUSTRALASIAN TRAINED NURSES' ASSOCIATION.

The Council of the Australasian Trained Nurses' Association present a report on the work of the Association for the year ending June 30th, 1903.

During the year 130 nurses have applied for registration on the General Register. Of these 115 presented satisfactory credentials, and have been added to the Register. Of thirty-eight applications from candidates for the Auxiliary Midwifery branch, thirty-four have been satisfactory. During the year we have lost three members from death and two from resignation. The present membership is 621 general, and 147 midwifery nurses. The number of medical members is sixty, of honorary sixteen. During the year six general hospitals and one midwifery hospital have been recognised as training schools for nurses. The number of hospitals now recognised as training schools is (exclusive of Victoria and New Zealand) sixty-two. There is evidence of an increasing desire on the part of country hospitals to obtain recognition as training-schools by the Association. While this is very satisfactory in the case of the larger hospitals, the Council feel that it is extremely difficult for a nurse to obtain adequate training in a hospital of less than twenty beds, especially in the country. It is felt that in the event of the institution of a central Examining Board for Registration these small hospitals would be at a great disadvantage.

The annual reports received in conformity with the regulations for recognised training-schools emphasise the fact that in many of the smaller hospitals material and method are both wanting. After careful consideration the Council has formulated a detailed minimum course of training, which will, it is hoped, improve the method of training, but it is felt that in the smaller hospitals the necessary practical experience in nursing varying cases cannot be obtained. The Council would again emphasise the opinion expressed a year ago that the attempt to train probationers in small hospitals is unfair both to the nurses and to the public. In such hospitals trained nurses only should be employed, as is the practice in New Zealand. The necessity for the establishment of a uniform central examination for candidates for registration, such as exists in Victoria and New

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