

Military Nursing Notes.

THE RESIGNATION OF MR. BRODRICK.

The resignation of Mr. Brodrick of the office of Secretary of State for War affords an opportunity of reviewing the changes which have been introduced in regard to the Military Nursing Service during his term of office. Trained nurses cannot forget that when the advocates of Army Nursing Reform seemed to be leading a forlorn hope, and when the Matrons' Council, which has always shown itself courageous in the interests of the sick, had been twice refused a hearing by Lord Lansdowne as Secretary of State for War, Mr. Brodrick, on being approached, at once consented to receive a deputation of the Council, and this deputation, which attended at the War Office on April 2nd, 1901, was accorded a lengthy and courteous hearing by his deputy, Lord Raglan, and the reforms then advocated, and embodied in the form of a memorandum, were subsequently substantially incorporated in the Regulations for Admission to the Queen Alexandra's Imperial Military Nursing Service created by Royal Warrant in 1902.

Further, Mr. Brodrick was the first Secretary of State to place a trained and experienced nursing officer at the head of a Government Nursing Department, a reform which sooner or later must be introduced into all Nursing Departments connected with Government offices. He would have proved himself a stronger man, and have given widespread satisfaction to the nursing world, had he appointed on the Nursing Board constituted to govern the new Service the President of the Matrons' Council, Miss Isla Stewart, who had shown that she had the courage of her opinions when for the most part there was a "conspiracy of silence" concerning the obsolete methods which then prevailed in regard to the care of the sick soldier. Conspicuous ability and courage are not qualities for which the Government in these days appears to have great use. Mediocrity is more plastic, and easier to coerce.

But Mr. Brodrick at least showed sound judgment in his choice of a Matron-in-Chief. The lady appointed has ripe experience in Army nursing, and her personal qualifications for the post are such that, with the whole nursing world to select from, no better appointment could have been made. We must, therefore, accord to the late Secretary of State for War his meed of praise for the progress in army nursing matters initiated under his rule at a difficult crisis.

The second volume of "Practical Nursing," by Miss Isla Stewart and Dr. Herbert E. Cuff, has just been published by William Blackwood and Sons, price 3s. 6d. We hope to review it at an early date. In the meantime, so eminently practical a work should be added to every nurse's personal library.

Gynæcological Nursing Examination.

We are informed that an examination of this Society for its certificate in Gynæcological Nursing was held on September 24th and October 1st, the written paper being taken on the former, and the *vivâ voce* examination on the latter, date. On Thursday, October 1st, the candidates presented themselves at St. John's House, where, by the kind permission of the authorities, the *vivâ voce* examination was held. Each candidate, we are informed, has a quarter of an hour's examination in practical nursing details by two Matrons, and then a quarter of an hour's *vivâ voce* by the medical Board of Examiners. Such a test must afford a very accurate idea of the nurse's knowledge of her subject, and the Society is to be congratulated upon the high standard it has already set in its examinations, and which will undoubtedly make its certificate of great value to nurses in the future. The following candidates were successful on this occasion:—

Miss Margaret Anderson, cert. London Temperance Hospital (one year's training); also cert. Birmingham and Midland Hospital for Women (three years' training).

Miss Helen M. Craig, cert. General Infirmary, Worcester (two years, including five months' training in gynæcology).

Miss Martha Hood, cert. Brownlow Hill Infirmary, Liverpool (three years, including three months' special training in gynæcology).

Miss Pinkney, cert. West Herts General Infirmary (one year, including three months' gynæcological training).

Miss Elizabeth Thompson, cert. Adelaide Hospital, Dublin (three years, including three months' special training in gynæcology).

Miss Bessie Wingfield, cert. St. Mary's Hospital (one year), and cert. Chelsea Hospital for Women (two years).

WRITTEN QUESTIONS.

1. What is the cause of a ruptured perineum, and how would you prepare the patient for the necessary reparative operation, if this be performed six months or more after the accident?
2. What procedure would you adopt if directed to wash out the bladder? What solution is most often used for this purpose, and of what strength?
3. How would you prepare gauze-strips for packing the uterus, and how long are these usually left *in situ*?
4. What is a Rigor; and what would you do for the patient who was suddenly seized with one?
5. How would you prepare the sponges or pledgets for an abdominal operation?
6. After an abdominal section, what variations in the temperature and pulse would you watch for; and what conditions would such variations severally denote?

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