

MATERNITY NURSING EXAMINATION.

1. What are the duties of the Nurse immediately after the completion of labour?
2. At what period does the umbilical cord usually separate? And what are the accidents which may occur during its separation?
3. What are the most frequent causes of purulent ophthalmia in an infant? What routine precautions would you adopt to prevent its occurrence?
4. How would you know if a infant is born "tongue-tied," and what might it be necessary for you to do?
5. What are the most usual causes of a rise in the temperature and pulse during the first week after labour?
6. What is a rigor? If the patient is seized with one during the first week after labour what would you do before the doctor arrived?

Practical Points.**Notes on the
Culicidæ of
Dehra Dun.**

In the *Journal of Tropical Medicine*, October 15th, 1903, Dr. F. Wyville Thomson describes a new *Mansonia* with spotted wings, which closely simulates the anopheles. He complains of the ignorance and apathy of the laity in the Himalayan foothills, who still breed domestic mosquitoes by the millions, no amount of advice inducing them to take the trouble of going around to empty or oil their tanks, &c. With regard to oiling, the author has found that a mixture of a little ghi with kerosene seems to spread better, the pure oil remaining in globules unless agitated, Ghi shoots out over the pool quickly, or makes the oil do so.

**Cystitis after
Operations.**

A writer in a German medical journal recommends the use of glycerine as a preventive of the cystitis following an operation, which he considers a bacterial inflammation of the bladder. He avoids the use of the catheter as long as possible. When necessary a soft catheter is inserted, and as soon as the urine begins to flow he applies a syringe and slowly injects twenty cubic centimetres of a 2 per cent. glycerine solution of boric acid. Usually in from five to ten minutes the patient passes urine spontaneously and there is no ill-effect afterwards. It is seldom necessary to repeat the injection. When continued catheterisation is unavoidable the bladder is washed out each time with 500 cubic centimetres of a 3 per cent. solution of boric acid. This had warded off cystitis in nearly every one of his cases.

**Mountain-
climbing and
the Middle-
aged.**

Dr. Zangger, of Zurich, who can have no object in discouraging visitors to Switzerland, sounds a note of warning to those people who combine pleasure with the business of climbing mountains. No person above "a certain age" should attempt mountain-climbing. The danger arises from the changes which take place in the circulatory system towards the age of fifty. The tension of the blood pressure is aug-

mented under the influence of barometric depression at mountain heights; congestion of the pulmonary vessels takes place, with distention of the right ventricle of the heart. These untoward symptoms are aggravated by the rapid changes of temperature and the demands on muscular activity. No person with a weak circulation, concludes Dr. Zangger, should venture on climbing Swiss mountains.

Though the Indian Plague Commission had to announce that the results of its investigations concerning the connection between plague infection and rats were inconclusive, yet the belief is widespread that rats do convey infection, and the old maxim of "Give a dog a bad name," &c., has been made to apply with results of the gravest inconvenience to the rat community. In France, efforts have been made to rid the sewers of them by inoculating them with an infectious disease harmful only to rats; but the practice has been discontinued, perhaps because of the feeling that in destroying rats the method was getting rid of some of the most useful scavengers that exist. In Copenhagen there are no such scruples, and there, according to *La Science Illustrée*, the plain method has been adopted of getting rid of them by paying so much a tail for the rat's destruction. "No good rat but a dead rat," as the Americans might say, and the value of a dead rat, or rather of a dead rat's tail, in proof of its demise, is fourteen centimes. At this rate of payment Copenhagen cleared out in five months 103,786 rats at a cost of about £740. It remains to add that in Copenhagen the rat is suspected of spreading influenza.

**The Abortive
Treatment
of Boils.**

A 2 per cent. carbolic acid solution is used for the abortive treatment of boils. A hypodermic needle is inserted obliquely through the outer edge into the centre and a quantity of the solution injected. The needle is then withdrawn and reinserted at another point of the periphery, &c., &c. The results are almost magical. The process of necrosis is arrested, and the already dead tissue rapidly falls away.

**Olive-Oil
in Bruises.**

In the treatment of contusion, where there is extensive discoloration of the skin, if olive-oil be freely applied without rubbing, the discoloration will quickly disappear. Absorbent cotton may be soaked in the oil and applied. If the skin is broken, a little boric acid should be applied over the abrasion. A black eye thus treated can be rendered normal in a few hours, especially if the oil be applied warm.

**Chloroform
in Maternity
Cases.**

No fatal cases are known, says Miss Dock, to have occurred in parturient women, although in surgical cases death has occurred quite frequently and with great suddenness, from paralysis of the respirations and heart, and ordinarily chloroform is considered much less safe than ether. In giving chloroform to a patient in labour (which a nurse may be required to do) the face must first be oiled with vaseline to prevent any possibility of blistering.

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