

to be ready with the nourishment as quickly as possible, so that he does not have long to wait for it.

Some hot milk, or even a piece of bread and butter, will often make a wakeful patient go off to sleep again. Then their individual fancies should be studied a little when it comes to the early breakfast. It should not be served too early, and should be placed on each locker before the patients are awakened. If some are inclined to sleep on, it is better not to wake them, for they are pretty sure to rouse presently, as soon as the stir and bustle of daylight begins.

Of course, very sick patients cannot be treated like this, but must be fed as regularly and punctually during the night as the day, the milk never being allowed to stand on the locker from one feed to the next.

Patients should be talked to very little at night. It excites them, and disturbs others to hear conversation going on; but their wants should all be attended to as promptly as possible, for to ignore a request for a drink or a bed-pan, without at least a few words of explanation as to why he must wait a minute, if necessary, is a sure way to make a patient restless, wake him up thoroughly, and prevent his going to sleep again.

Of course, no case ought to be left wet, or soiled, because he happens to be asleep when it would be convenient to change him. Better to disturb him for a bit than to incur the risk of starting a bed-sore. In this, as in all else, there is room for the exercise of quiet tact and judgment, and gentle movements are most necessary so as not to wake more than the one patient to whom you are attending.

The routine of work for a night nurse varies in different hospitals; but, in all, she is responsible, while on duty, for the quiet, warmth, comfort, and order of her ward, for its ventilation, for the proper administration of food, drinks, and medicines, for the carrying out of all orders received from the day Sister in charge, the medical officers, or the night superintendent, for the leaving of the ward and various offices, together with all things used during the night, clean and in good order. Anything broken, lost, or spoiled should be reported to the Sister in charge, and nothing lent or removed from the ward without telling her. Things must be left in their right places, and the ward should be tidy.

A nurse should not go on duty without first hearing the day report, and getting explicit directions—in writing will be best—for the night. She should see that everything likely to be wanted is there, and should on no account leave her ward unattended during the night while she goes to fetch something from another part of the hospital. Whatever "stock work" she has been directed to do, such as padding splints or rolling bandages, should be done

early in the night in case of something unexpected occurring later on.

There are so many things a night nurse may do to help along the work if the ward is heavy, and the day staff are always glad if they find bottles labelled, pinafores mended, buttons sewn on, &c.; and little unlooked-for bits of real help do much to maintain a cordial feeling between the day and night staff of a ward.

With careful management, a night nurse can generally finish her morning work up to time, and so avoid that hurry and bustle which come of want of quickness and method, or of not beginning early enough to get done. Nothing should be left to the last moment, but there should rather be a margin for the unexpected.

Lastly, comes either the writing of the night report, or the giving of a verbal one only, to the Sister, in the morning, according to the rules obtaining in the hospital where the nurse is working. This is good training in observing and in expressing the results of observation, often difficult to a young nurse, who will find, if she attends carefully to this part of her work, an ever-growing power of observing symptoms, and of accuracy and facility in reporting them.

In conclusion, a spirit of loyalty needs to be cultivated by night nurses. They are rather in an isolated position, and loyalty flourishes best in company; but they should certainly seek, in all things, to be loyal to the best traditions of their hospital, supporting its authority, conducting themselves with a quiet dignity and reserve, in accordance with the responsibility of their work, and remembering that the reputation and tone of the hospital rest largely with them during those hours of slackened supervision, and the silent, often unnoticed, work of those who "watch for the morning."

Understood rightly, the solemnity of that watching will grow upon the nurse. Morning after morning she sees the narrow horizon of darkness expanding into daylight, with its wider outlook and clearer knowledge. Dull indeed is that soul who does not respond to the grandeur of the silent sunrise, thrilling with promise of light after darkness, and the limitless possibilities of the fuller life to come, when the term of earth's night duty is at last completed, merged into the joyous service of the "perfect day."

It will doubtless be a source of considerable satisfaction to worried mothers to know that an ingenious Swiss mechanic claims to have invented an automatic baby-nurse. The apparatus, says the *Family Doctor*, is attached to a cradle. If the baby cries, air waves cause specially-arranged wires to operate a phonograph, which sings a lullaby, while, simultaneously, clockwork is released and rocks the cradle. When the crying ceases the wire fails to vibrate, and the cradle stops rocking.

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