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Editorial.

A CONSCIENCE LIMIT.

Under the regulations of the Medical and Pharmacy Council, by which nurses are registered in the Orange River Colony, the offences for which they are liable to discipline include failure to obey the orders of the medical attendant.

Assuming this provision to be incorporated in an Act of Parliament, is it desirable for failure to obey the orders of the medical attendant on the part of a nurse to be punishable by law? That the duty of the nurse to the medical practitioner in charge of a case includes the carrying out his directions in relation to the treatment of a patient everyone will agree. That the practitioner should be able to rely with confidence on the nurse for so doing is also evident. But the question is, is it just to the nurse to bring her within the arm of the law if, in exceptional cases, circumstances should arise in which she cannot carry out the instructions received without violating her conscience, and failing in what she considers to be her duty to the patient, to whom she certainly has obligations? We unhesitatingly say that such legislation would be both tyrannous and unEnglish. We desire to make our position quite plain. It is this, that in the event of a nurse receiving directions which she cannot conscientiously carry out, the law should hold her justified if she informs the medical attendant that she is unable to do so, and makes it plain that she is willing to give up the case. Otherwise the position of a nurse would be quite intolerable.

Of course, no nurse is justified in receiving directions and failing to carry them out without plainly declining to do so at the time, or reporting such failure to the medical attendant on his next visit with her reasons for her action. We will mention three illustrations within our own knowledge, and leave our readers to judge as to their merits.

A physician going round a hospital ward

ordered a patient to be got up at once, expressing the opinion that the case was one of hysteria and wanted rousing. The Sister of the ward, believing the patient to be in a dying condition, deferred carrying out the order until the next day. Before the next day came the patient was dead, and an autopsy revealed a cerebral tumour. To ourselves it happened, when holding the position of Ward Sister, for the House Physician to order a mutton chop for an enteric patient with a very high temperature. Pending the arrival of the Visiting Physician, we refused to give solid food, much to the annoyance of the young medical officer in question. Before the arrival of his chief, however, he thought better of the order and removed from the head board the diet sheet, on which he had inscribed the words "mutton chop."

In another case, this time a private one, the patient was a mother who had two devoted sons—officers in the army. They had been constant in their attendance on her, but eventually had returned to their duties—one being stationed in Scotland—with many injunctions that they were to be summoned by telegraph at once if there were any change for the worse. On the visit of the surgeon one morning we asked him if he did not consider the patient was dying, and whether we ought not to summon the relatives. He thought the condition of the patient the same, and that we should not disturb her sons, who had just got back to work. We, however, took it upon ourselves to telegraph to them at once. Only one arrived in time to see his mother alive.

It may be argued that the nurse in each instance was justified, and that any disciplinary body would hold her so. The question is, should she be *liable* to discipline under such conditions? Be it remembered further that in the case of the Orange River Colony the Court of Arbitration between medical man and nurse is composed entirely of the colleagues of the former. Had any Matron or nurse had a seat on the Board which framed the above regulation, no doubt its injustice would have been realised.

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