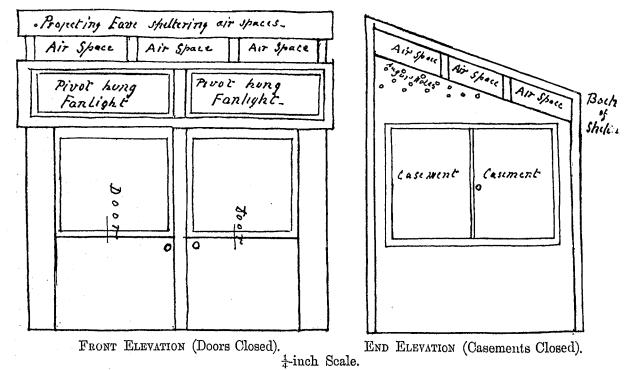
And now a few words as to site and use. If the ground available slopes at all the shelter should be placed at the highest point so that the patient will walk up to it in the morning and down from it in the evening. If possible, it should have an extensive view. Nothing leads to depression like a contracted outlook, and it should not face the quarter from whence come the prevailing winds of the districta South or South-westerly aspect is generally the best in England. Another point of importance is to avoid the proximity of a road which, in these days of motor cars, means a series of dust storms. (Remember this in choosing a bedroom for a phthisical patient.)

phthisis that thorough knowledge on their part would be a strong weapon against the spread of tuberculosis. Miss Todd also alluded to the fact that in the United States nurses are cooperating with the civil authorities in their attempt to stamp out the "white plague."

The American Journal of Nursing devotes considerable space to the work of special "tuberculosis nurses," and one gathers that all over the States these specialists are becoming a very great factor in the treatment of patients suffering with pulmonary tuberculosis in their own homes. An admirable paper on Tuberculosis Work of the Instructive Visiting Nurses'



PLAN OF SHELTER WITH ROOF VENTILATION, ROYAL NATIONAL SANATORIUM (Original Pattern).

Use.—The very name, shelter, tells us its use, which is *solely* for windy and inclement weather. No matter how well it is ventilated a shed of any sort is not the same as the open air; if shade from the sun is required a tree or a large Japanese umbrella will be far better than any shelter yet devised by the wit of man.

## THE WHITE PLAGUE.

In an interesting letter which appeared last week Miss Helen Todd proposed that Queen's Nurses should go through a special course of nursing in a well-managed sanatorium for a few months. These nurses come in contact in their districts with so many sufferers from Association of Baltimore appeared in last month's issue, by Miss Ellen N. La Motte, at the end of which we find the following condensed summary of a visiting tuberculosis nurse's duties.

## SUMMARY OF WORK.

## PATIENT.

1. Instruction.—Such advice given as will tend to promote recovery or improvement. Value of food, open air, rest, and hygienic living. Proper disposal of sputum and use of cups and napkins, &c. Necessity for sleeping alone.

2. Nursing Care.—Bed bath, alcohol rub, attention to bedsores, &c. Very little of this nursing care is required.



