

3. *Material Relief*.—In necessary cases patient is supplied sick diet (usually milk and eggs); cots, wheel-chairs, rubber rings and other requisites are lent by the association. Clothing, &c., furnished when necessary.

4. *After Recovery*.—After patient has improved sufficiently to return to work he is regularly visited (at longer intervals) and advice given to him or his family which will tend to maintain improvement or ability to work. Patients grow very careless about themselves when in this state, and much is done to prevent possible relapses in health as well as a return to careless habits.

FAMILY.

1. *Instruction*.—Family is instructed in proper care of patient, necessity for food, fresh air, &c. Instructions given in preparation of suitable food. If patient is bedridden, family is taught how to give bed baths, prevention of bedsores, &c.

2. *Prevention*.—Advice as to necessity of isolated dishes; care of patient's linen (bed linen and clothing). Necessity of destroying sputum and of patient having a room to himself, &c.

COMMUNITY AT LARGE.

1. *Discovery of Cases*.—Incipient cases discovered in households of old patients and sent to doctor or dispensary for diagnosis and treatment. Patients in later stages discovered by inquiry among friends and neighbours, and all such new cases visited and families safeguarded.

2. *Fumigation*.—After the death or removal of the consumptive patient the house is reported for fumigation to the city Health Department. In reporting such houses the amount of fumigation required is specified (whether whole house or only one or two rooms).

3. *Registration of Cases*.—All cases given to the nurse after the physician's diagnosis are reported by her to the State Board of Health, which provides the association with all supplies (napkins, cups, &c.) which are needed for distribution among these patients.

Saving of Wage-Earners.—A quarter of the number of cases under this supervision have been able to return to work, if not to their former employment, at least to some modified form of work. These cases are not physical but economic cures, who have been able to return to work after being under supervision or treatment from periods varying from several weeks to as many months. Sufficient time has not as yet elapsed to judge of the permanence of these cures, but from a wage-earner's standpoint they are satisfactory, and would probably not have occurred without the care of the nurse.

Probation Days in the Early Eighties.

By MACK ALL.

One of the first duties of a probationer is to bury her ideal nurse. Some of the ideals have been manufactured from books and glimpses into hospital wards on visiting days, others created from the remarks of grateful patients, and uniform bonnets. Mine was a home-made article; I had often described her in MSS. She was given to holding patients' hands, and discoursing feelingly of both worlds. She bathed the aching brow of poets with Eau de Cologne, and she was never tired, or irritable, or commonplace. With this ideal in my mind I arrived at Z Hospital. It was the time of evening, called in the North of Ireland "day-la-gone," when all the poetry and sentiment of the day hold high festival. My first disappointment was to be refused admission; however, on satisfying the gorgeous individual in gold braid who guarded the portals that I was a *bonâ-fide* nurse, my box was allowed in. I sat on it while he finished his pipe and a description of a battle, in which he had taken part and received a medal. He then condescended to show me the Matron's room; and as I divided my attention between watching a fight among women in the street, and a picture of the Madonna in the room, the Matron entered. She had not been told of my arrival, and had forgotten my very existence. A letter in her own handwriting reassured her, and she pointed out the way to the nurses' dining-room and dismissed me. I wandered about, opening doors of kitchens and bathrooms, but at last I found a large barely furnished apartment, with long tables and about two score chairs. At the fire two girls in nurses' uniform were toasting their feet, one was making cap strings and the other reading a "yellow back." The latter remarked.

"You are a new pro. I suppose," and went on with her reading, without waiting for a reply. After what seemed a very long time, a servant came to show me my cubicle. I followed her up flight after flight of stone stairs, until we reached the top landing.

She opened the door of what looked like a large cupboard, but when the gas was lit I saw it was the corner of a room; and from behind the curtains on three sides heard such remarks as,

"What a shame to put day nurses in our quarters!" and "Goodness! Don't say it's time to get up, I have only slept an hour."

Then a bell clanged, and there was a scramble for the bathrooms. The servant, after

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