

pioneer work from her husband's? Would not such a woman have consulted and planned with such a man as a matter of course, the two being one in spirit? Does it *ever* matter who does the good pioneer work, so long as the work is done? I have lived ten years since I wrote those articles. Many great men and women, and good men and women of many lands, have passed my way. I sometimes think the very best were never known. Quite a roll of 'golden deeds' might have been written here during the recent floods. Think of men working night and day over their waists in water, in danger every instant, to save other people's property; of a man who threw himself into a raging current to save a strange child, and saved it; and—but you want chronicles of Kaiserswerth, not chronicles of Copiapo.

"With this post I am writing to Germany, and hope to put you in touch with a lady who can be useful to you, more so than I can at this distance."

All we want is justice for Frederika. From what we know of her character, she would be the last to claim any credit for her work. But she had inspiration, and we believe the nurses of the world owe her much.

Why are the lessons she taught to be forgotten? The good Pastor soon took to himself another wife, and lived long in love with her. Together they enjoyed their work—happy people!

But our heart goes out to pretty, bright-faced Frederika, whose valiant spirit initiated and accomplished so much, who was cut off in the flower of her youth, and who has lain silent in her little grave meanwhile.

There are chronicles. That is the important point. Miss Lina Mollett quoted from them. Now who is going to tell us more of Frederika? What more appropriate than that memory of her should be kept green in the pages of *Unterm Lärzuskreuz*?

The Passing Bell.

There has died recently at the Convent, Wigton, Cumberland, in the eighty-second year of her age, one of the few remaining nurses of the Crimean War, Mother Mary de Chantal, R.R.C., known in the world as Maria Louisa Huddon. Miss Huddon entered the Convent of Mercy, Bermondsey, in the year 1851, and with other members of her community went out to the Crimea in 1854, serving for eighteen months under Miss Florence Nightingale. For the last forty-eight years she has worked at the Convent at Wigton, where she was universally beloved. She received the Royal Red Cross for her services in the Crimea from Queen Victoria at Windsor in 1897.

Practical Points.

Bathing a Patient in Bed.

In the north this is aptly termed "blanket bathing," and it can be made either a most refreshing, comforting performance to the patient, or a chilly, disagreeable, and harmful one, according to the skill of the nurse who carries it out.

"Where is the skill in just washing a patient?" asks the few months' probationer, cock sure of most things.

The experienced nurse knows better, and could suggest many things to her junior.

To start with, aim at being quick as well as thorough. Get everything you are likely to want together *before* you begin. Don't start washing your patient under an open window and dash off to shut it just after removing his warm shirt, though this is better than leaving it open, as I have known some nurses do. Have some empty vessel near by so that in the case of a dirty patient the water can be entirely changed, as well as a can of hot water to replenish the basin, and keep its contents at an even temperature. Keep, if possible, two old blankets especially for the bath, so that they can be aired and dried daily. Warm the blankets, as well as the towels, shirt, and sheets you are going to use. Remove the top bed clothes, leaving one warmed blanket in their place; roll the other under the patient, folding it round his limbs on each side.

If he is feeble and chilly, have one or two hot bottles in the bed and spread a second blanket over him, though this is not usually necessary. A bath towel should be laid under each limb as it is washed; there should also be no more dampness than this towel and under blanket can absorb. Uncover one part at a time, wash and dry it, covering it up warmly before the next is begun—one arm, one leg, chest, and abdomen. The last can be washed under the blanket. To get at the back for any bad case it is best to have an assistant to help roll the patient gently over, though I deprecate the plan obtaining in some hospitals of having two nurses, one on each side, washing him at the same time. Too much skin surface is exposed, and chilling is the result. Have everything ready in the way of clean under and draw sheet, as well as any application for the back. It can all be done now while the patient is on his side, and one turn does for everything. One more "don't." If your new patient is an accident, or bad medical case, *leave him alone*, dirt and all, for several hours (in the way of washing I mean), otherwise it is quite possible to wash away the remaining spark of life. The normal hospital rule of washing cases on arrival has always been to me anathema. "The doctors must not see him dirty" is the cry. "Why not?" If they have any sense they would know additional fatigue is bad for him just then, and would, we hope, trust the Sister to have him washed at a more appropriate time.

If they have not this trust—well, the Sister must try to gain it.

When the bath is finished, put on the warm shirt make the bed quickly and give some light nourish-

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