## Practical Points.

A Mask for the a Mixture of Chloroform and Ether, or Ether Alone.

The mask, whose shape is well shown in the illustration, is a Administration of modification of one designed by Rosthorn, which is largely used in Vienna. It is simple in form, lies easily on, and fits accurately enough, the contour of the face both in adults and children.

The gutter is intended to collect superfluous liquid which otherwise might run on to the patient's face. The flange is made deeper than in the original so as to better hold a large quantity of gauze, if necessary. When the E<sub>2</sub>C<sub>1</sub> or ACE mixtures are to be administered, it is advisable to cover the frame with



six layers of plain gauze and to leave a margin of  $\frac{1}{2}$  in. or  $\frac{3}{4}$  in. turned up inside the frame. If ether alone is to be inhaled, twelve layers of gauze and a larger margin inside are better, and then in most ordinary cases ether can be administered by the drop method, with plenty of air. In the case of very strong or alcoholic patients, however, ether is better given from a closed inhaler like the Clover or Ormsby. This mask, of course, can be sterilised by boiling or by strong antiseptic solutions. It was made for me by Messrs. Down Bros., of St. Thomas's Street, S.E., who have carefully carried out my wishes.

W. J. MCCARDIE, B.A., M.B., B.C.(Cantab.), Anæsthetist to the General, Dental, and Ear and Throat Hospitals, Birmingham.

How to Sterilise the Nurse.

Before all things if a nurse is to be rendered a safe attendant on the sick from the surgical standpoint, absolute strict per-sonal cleanliness must be her

watchword. Disinfectants may have their uses, but the first essential, without which they are useless, is a copious use of soap and water. A conscientious attention to detail is also requisite. It is now known that the danger of infection to a patient is lest germs which may cause sepsis, should enter his system by the open wound, and therefore every effort is made to keep the wound aseptic. Herein lies the difference between the surgery of the present day and that of a quarter of a century ago. In those days wounds were so commonly infected that they were liberally flushed

with strong antiseptic solution. It should be noted that the need for the use of an antiseptic is dependent on the presence or the fear of the presence of a certain amount of sepsis. The aim of the modern surgeon is to keep a wound *ascptic*, to prevent the entrance of any germs whatsoever. The great precautionary measure is to boil or sterilise by dry heat everything that comes near the patient, for it has been proved that by these methods germs can be effectively destroyed, and sponges, towels, ligatures, instruments, &c., rendered sterile.

Now, unfortunately, the skin of a human being can neither be baked nor boiled. Yet bacteria abound and flourish ou and in the skin, and it is therefore to the cleanliness of her skin, hair and nails, and to the surgical cleanliness of her hands and forearms that a nurse should direct her special attention. For it is in the hands of the doctor and nurse, if not surgically clean, that the greatest danger to the patient lies. She must, therefore, keep her nails cut close, and well trimmed. Then she must scrub hands and arms well in hot soap and water, preferably under running water for ten minutes, with a sterile nail-brush. Turpentine or ether are sometimes used to remove the grease from the skin. Then the hands and arms must be soaked in a strong disinfectant. Whatever is used what the nurse has to bear in mind is that she has to remove completely the surface dirt of the skin, and then to destroy the bacteria in its surface layers. Clean clothes, the protection of the mouth, and other details are matters-of-course, but the all-important thing for the nurse to secure is thorough cleanliness of her M. C. MORRIS. skin.

## **To Sterilise** Rubber Gloves.

Much advice has been given as to how best to sterilise rubber gloves. An American superin-

tendent of experience submits the following plan:-Wash new gloves with wool or ivory soap in tepid water; wash the inside as well. Dry by gentle friction with a soft towel; then powder with commercial talcum, narrow pieces of gauze being dropped into each finger to avoid contact. Each glove is placed in a towel, separate. Sterilise under pressure the same as for gauze, onehalf hour, and dry in the steriliser. Sterilise talcum powder at the same time, to be dusted on when applying, if the surgeon or nurses desire it.

Preparing Hypodermic Needles.

It is claimed that the best way to prepare hypodermic needles for use is to boil the needle for a few minutes in simple water, or in a 1 per cent.

soda solution, taking care that after being boiled it is not touched with anything but a clean piece of sterilised gauze, with which it can be held while being attached to the syringe. If no better plan be at hand for boiling, when required for use the needle may be put in a tablespoonful of water and boiled over an alcohol or gas flame.



