

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—Personally I do not see why trained nurses should not "sip claret, or powder their oranges with sugar," as described by Mr. Maxwell, that is to say if the patient's family can afford to provide such luxuries, but as the majority of the middle classes cannot afford wine for their own table, I do not think nurses have any right to demand it, as some of them do. In America nurses on private duty never expect wine or spirits. Iced water, and fruit drinks, with tea, coffee, and cocoa, provide plenty of change, and are much more wholesome. European nurses seem to think much more of food than we do in the States. Wherever I stay in Nurses Homes and Clubs, there is always grumbling about the food—it is very depressing.

Yours,

AN AMERICAN NURSE IN LONDON.

#### PATRONAGE AND PELF.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—The "Holt Ockley" system of providing for the care of the sick poor is indeed grievously unjust to the poor, and the bitter personal attacks of its founder, Miss Broadwood in her sheet, on the Matrons and others who claim that disease is no respecter of pockets, and that the poor should have the same chance of skilled and efficient nursing as the rich, is disgraceful. Of course, in dealing with this matter your journal is the only one which supports justice to the sick poor, and resents the insulting attack upon the registrationists who are their true friends. The more one sees of the trimming tactics of the commercial nursing press, the more one realises the importance of having a professional organ of our own which is not obliged to pander to patronage and pelf.

Yours very truly,

LATE QUEEN'S NURSE.

#### OBSTETRIC NURSING.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—I think the best result so far of the much discussed Midwives' Act is the impetus it has given to trained nurses to add the knowledge of obstetric nursing to their general training. This is being done by hundreds of well-trained nurses at their own expense, and is bringing nursing into line with medical standards. No amount of argument had any effect on nurses as a class until a standard was defined by a Central Board, and the *quid pro quo* of status was given them in return for the outlay. It would be just the same with a standard in General Nursing. Thousands of nurses would come up to it, who now are content to accept indifferent teaching and training in hospitals, and certificates which stand for nothing.

Yours sincerely,

OBSTETRIC NURSE.

[We quite agree with our correspondent, moreover, the effect of the standard defined and maintained by the Central Midwives' Board is seen in another direction. It has made the untrained midwife realise her ignorance to the extent sometimes of inducing her to ask for removal from the Roll.—ED.]

## Comments and Replies.

*Trained Nurse.*—In applying for an appointment, whether as private nurse or in any other capacity, you should state where you received your training, for how long, and whether you have the certificate of your training school. Also what appointments you have held since, and the dates at which they began and terminated, and what other certificates you hold, such as for massage, midwifery, mental, infectious, or children's work.

*Interested, India.*—Your best plan would be to write to the Matrons of training schools where preliminary examinations are in force, and ask them if they will be kind enough to let you have copies of some of the examination questions which have been set to candidates on former occasions.

*Maternity Pupil.*—In severing the cord after the birth of an infant it is well to remember that in the case of a normal child there is no need for hurry. Further, that if the severance takes place before the cord has ceased pulsating the infant is deprived of some of the blood supply presumably intended for it by nature. In this country a ligature is usually placed on the maternal end of the cord, but this is hardly necessary presuming that pulsation has ceased. At the present day in skilled hands, it is very unusual for anything to go wrong with the stump, but if unclean scissors, or dressings, are used complications, including even lock-jaw, may supervene.

*Probationer.*—Poultices are now so seldom used in hospitals that we do not wonder you have had no opportunity of making one. You should, however, as occasions offers, observe the methods of an expert in this art, and get her to supervise your work as you yourself make poultices, following her instructions. Practice alone makes perfect.

## Notices.

### THE SOCIETY FOR THE STATE REGISTRATION OF TRAINED NURSES.

Those nurses who are working on behalf of the above Society, and are endeavouring to spread knowledge as to its aims, may be glad to know that they can now obtain a Memorandum, giving briefly the reasons why Registration is necessary, from the Hon. Secretary, 431, Oxford Street, London, W. Price 6d. for 20 copies.

Those interested in the efficient organisation of nursing should procure the Annual Report of the Society for the State Registration of Trained Nurses from the Hon. Secretary. Six copies, post free, 7d., or one copy 1½d. It gives a brief review of the history of State Registration.

### CONTRIBUTIONS.

The Editor will at all times be pleased to consider articles of a suitable nature for insertion in this Journal—those on practical nursing are specially invited. The Editor will also be pleased to receive paragraphs, such as items of nursing news, results of nurses' examinations, new appointments, reports of hospital functions, also letters on questions of interest to nurses, and newspapers marked with reports of matters of professional interest.

Such communications must be duly authenticated with name and address, not necessarily for publication, but as evidence of good faith, and should be addressed to the Editor, 20, Upper Wimpole Street, London, W.

### OUR PRIZE PUZZLE.

Rules for competing for the Pictorial Puzzle Prize will be found on Advertisement page viii.

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