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Editorial.

THE PLACE OF THE FEVER HOSPITAL IN THE
NURSING CURRICULUM.

The very interesting and able article which we published last week by Dr. Knyvett Gordon, Lecturer on Infectious Diseases in the University of Manchester on "The Position of the Isolation Hospital in the Training of a Nurse" raised various points which might usefully be discussed in the columns of this journal, and we should be glad to receive the views of Matrons of Fever Hospitals and others having experience in this branch of work, on the debatable points indicated. Thus:—

Practical Questions.

What is the best curriculum for the nurses in a fever hospital, so as to afford them a thorough insight into infectious nursing?

Over how long a period should the training extend?

Should it be taken before or after the general training?

At what age should probationers enter infectious hospitals?

The Age of Probationers.

An interesting point is brought out by Dr. Gordon, who advocates that training in infectious work should be taken first, one of the principal reasons for his opinion being that the applicant can begin her nursing education in a fever hospital at twenty or twenty-one, or some two years younger than she would be accepted at a general hospital. But, is there any valid reason why this condition should exist? Both the ward work and the practical

nursing are as arduous in a fever hospital as in a general hospital, the nursing in the former institution including the care of every kind of infectious disease, and of patients who are far more frequently delirious than those in a general hospital. The practical lesson to be gathered here is that if girls are physically and mentally fit to begin their training in a fever hospital at twenty or twenty-one, there is no reason to fix the age limit for probationers in general hospitals at twenty-three. The girl who can under supervision nurse scarlet fever and diphtheria is equally well able to attend on pneumonia and nephritis, so that the distinction as to age limit appears to be purely arbitrary, fixed by conservative custom.

The Affiliation of General and Special Hospitals.

The more important question, therefore, is the definition of the place of the fever hospitals in the nursing curriculum. It is undeniable that if in these institutions the training of probationers is seriously undertaken, from the theoretical and practical standpoint, they afford valuable facilities for training in a large variety of medical cases. Ward management, hygiene, sanitation, bedmaking, the personal care of the patient, can all be taught efficiently, but the course of training received in a fever hospital only cannot be regarded as complete.

But the work in most general hospitals is limited to experience in the care of medical and surgical cases, even typhoid and diphtheria now going to special hospitals. Once more, then, we are thrown back on the need for closer relations between the

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