

names upon the Register to satisfy the advisers of the Association, the Royal Charter will doubtless be sought to legalise the system. And no unprejudiced observer of the progress of the Association hitherto can doubt that, when that step is decided upon, it will be rapidly taken, and that success will be achieved. But Nurses who are awake to their own interests, and to the manifold advantages to themselves and their calling of being organised as a professional body, will hasten to follow the example set them by the hundreds, if not thousands, of their shrewd fellow-workers who have already made application for Registration.

The next most common inquiry which our correspondents have made is this: "Is the half-guinea fee to be paid once only, or is it a yearly matter." As we read the regulation referring to this matter, it appeared to our minds as clearly implying one single, first and final payment. But we have inquired, and are informed that our supposition was correct. Just as Doctors, as we pointed out last week, have to pay £5 in one sum to secure the Registration of their degrees or diplomas, so Nurses will now be required to pay half-a-guinea in one sum for the Registration of their certificates of efficiency. But it must be remembered that as soon as five thousand Nurses have been enrolled, future candidates will be required to pay one guinea. And it is quite conceivable that when the Royal Charter has been obtained, the larger expenses may, perhaps, necessitate a still higher charge. But in any case now, and probably hereafter, the Registration fee will be charged once and for all.

Finally, there appears to be dire distress caused to many of our readers by the information required by Application Form No. II.: "Must Nurses who sent in testimonials and references when they applied for Membership of B.N.A. send in these particulars afresh for Registration?" The information which we have received upon this point is in effect as follows: The British Nurses' Association was founded for the mutual help of its Members. For the first two years, therefore, all who had been actually engaged in the work of tending the sick for three years and more were held to be eligible for Membership. For a union of women desirous of assisting one another by carrying out benevolent schemes for their individual benefit, it was not urgently necessary at first that all should be of the highest class in the profession. But a Register of Nurses intended for the public is a widely different matter, and the first duty of the Board of Registration is clearly to satisfy itself, by every means in its power, of the professional knowledge and the personal character of those women who seek

to be enrolled upon the Register. Consequently the Board requires other credentials than the mere formal official Certificate of Hospital training or service. But we learn that in the case of Nurses who are still at work in the same Institution in which they were trained, the Board will accept as quite sufficient and satisfactory evidence of character a recommendation from the Matron of the Hospital of each applicant as "worthy in every respect to be enrolled upon the Register" written across the Form of Application No. II. Those Private Nurses and others who are not working in connection with their Training Schools must, it appears, produce the testimonials and give the referees required by the Board.

Such are the chief difficulties which our readers have apparently experienced. We shall be glad to know as soon as possible of any others, or to obtain for them any information which they may require upon this most important matter. There is evidently no need to counsel members of the B.N.A. to send in their applications for Registration as soon as possible. But in view of the large numbers of Nurses unconnected with the Association who are apparently hastening to secure Registration for themselves, we trust that our readers all over the world will bring the subject to the notice of their Nursing friends, and urge upon them as strongly as they can its vast importance, and the great advantages to be derived by every Trained Nurse from her enrolment on the Register.

OBSTETRIC NURSING.

— BY OBSTETRICA, M.B.N.A. —

PART I.—MATERNAL.

CHAPTER V.—DUTIES DURING CONVALESCENCE.

(Continued from page 62.)

WE must resume our duties from No. 97 *Record*, where we left our patient to repose after her first washing and changing after delivery. The next care will be her dinner, which should be served not later than one p.m., and should consist of beef tea or chicken broth, thickened with arrowroot, which I consider preferable to toast, as the food can be taken from the feeder or feeding-tube, and in the recumbent position, slightly raising the head beforehand. And this position must be maintained, so long as evidences of internal hæmorrhage, such as coagula or sanguineous discharge from the vagina, are present. Fluids should not be given too hot at this time; and any sudden or

[previous page](#)

[next page](#)