

accurate report upon the condition of the patient. Make her observations methodically. *Record facts*, and show to the doctor at each visit. In no way must the private nurse alter or interfere with the doctor's work.

Dress.—She must be clothed quietly and hygienically, preferably a dress of washable material. Aprons, etc., should be frequently changed.

Squeaking shoes or high heeled boots are out of place in the sick room.

The hands and nails should be well kept. The hair should be plainly dressed, well combed back. Personal cleanliness is a factor.

It must be understood, however, that neatness of appearance is not always "an outward and visible sign of an inward and spiritual grace." Yet it is essential that these qualities should be combined.

Punctuality and the serving of the patients' meals well are of great importance.

If the Private Nurse is to be successful, she must not carry a hospital manner, methods, and regulations into a private house, especially as regards the time-table she must not be too strict.

The Happiest Hour in my Life.

(Concluded from page 88.)

Many hard working women will sympathise with Miss Emily F. Murray, whose paper on the above subject arrived a day too late for the Competition.

She writes:—

Shall I be considered mercenary if I say that the happiest hour of my life was when I was informed that I need no longer fear want in my old age. I hope not. I am no great believer in the happiness to be extracted from wealth, I have seen too many unhappy wealthy homes for that, but an honest independence to a woman of spirit does certainly make for real happiness. No one who has not been dependent on precarious earnings can realise what it means to know that for the future she is safe.

I was turned out at an early age to earn my living. After a few years all near relations, and they were poor, had passed away. I could always make friends, so that my life was fairly happy, but there was always a cloud looming on the horizon—*poverty-stricken old age*.

I used to imagine coming down to breakfast and finding a blue legal looking envelope on my plate. Of course, I did not hurry to open it. I prolonged the delightful anticipation that it would contain the news that a long-lost and unloved relative had died at the Antipodes,

and left me an annuity legacy duty free or shares in a gold mine, or some tidy sum of money which would make me feel like jumping over the moon.

One morning the postman knocked when I was boiling my breakfast kettle, I ran into the passage—the letter-box was open, and a long blue envelope was on the floor. I pounced upon it. At last, I thought, my Fortune has arrived. I opened it.

It was the Gas Bill!

I really was disappointed.

Twenty years later—I was long past forty, and the excitement of disappointment had become monotonous—my day-dream came true.

I received a letter—in a square white envelope this time—the contents of which informed me that an old lady I knew but little had died and left me £200 a year, and that this will had been made for twenty years!

That was the happiest hour of my life, and it might not have been so had I known all those years that the Workhouse was not looming round the corner of 60th Year Street.

Miss E. E. Please writes:—

The happiest hour of my life was in October, 1894, when my three years' certificate was given to me, and I saw my name in full certifying that I had proved myself a "good and efficient nurse." It may seem trivial, but to me it was a dream of more than ten years realised. I had always been at home, the youngest of the family, of no account, except as "the kid," incapable of any sort of real work, not even going to school much on account of health. Here I was in the "Private Room" at good old George's, one of the Senior Nurses, enjoying every minute of the time, too. I really felt happy. I had *done something*. I felt a fear I might bring discredit on my certificate, by any mischance; I have never lost the feeling that it is to be guarded. My happiness lasted all my nursing life, as a stay in storms and stress.

THIS WEEK'S COMPETITION.

The question which competitors are invited to discuss this week is "How would you nurse a case of enteric fever, what emergencies might occur, and how would you meet them?"

This gives plenty of scope for the discussion of the nursing of one of the most interesting diseases from the standpoint of the nurse—interesting because so much rests with her, and the welfare of the patient is largely in her hands. Is there a nurse who has not spent many anxious hours, in which hope and fear have alternated, dominated by the temperature chart of a bad typhoid case?

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