

growth, and their power of manufacturing toxins, or merely as a chemical antidote to the rheumatic poison, we do not know, but there is no doubt as to its efficacy. It often acts best when combined with an alkali, such as bicarbonate of soda. Under its influence, the pains subside, the temperature comes down, and the patient soon feels much more comfortable. The nurse should watch for signs of an overdose, which are buzzing in the ears, and a peculiar deep gasping condition of the respiration; sometimes delirium occurs, or a feeling of faintness.

In chorea, absolute rest in a quiet room is essential, and one often feels that the noisy ward of a children's hospital is hardly suitable for these patients. Salicylate of soda may be given, but it is generally also necessary to soothe the irritated cells of the brain; for this purpose bromide of potassium is useful, and some cases do well on large doses of arsenic.

Unfortunately, both rheumatic fever and chorea are apt to leave the patient more susceptible to attacks of the organism so that relapses and repeated attacks are not uncommon.

### The President of the General Medical Council on Nurses' Registration.

The following reference to Nurses' Registration was made by the President of the General Medical Council in his opening address at its recent session:—

A measure providing for the Registration of Nurses was on February 27th introduced in the House of Commons as a private member's Bill; and it has since been printed. The Bill proposes to create a General Council for the United Kingdom, whose duties shall include the framing of rules for "regulating and supervising and restricting within due limits the practice of registered nurses." Such rules are to be subject to the approval of the Privy Council; but no provision (such as exists in the Midwives' Act) is made to ensure that the rules, before being approved, shall be submitted to this Council for consideration. The Council has already informed the Lord President that it regards such a provision as necessary, in view of the conditions and responsibilities of medical practice. On calling the attention of the authorities to the above-mentioned omission, I was informed that, should the Bill be proceeded with, steps would be taken, in accordance with the terms of the Privy Council's communication of March 18th, 1910 (*Minutes*, vol. xvii., p. 181), to procure the insertion of a suitable amendment on the lines of that proposed for the new Midwives' Bill.

### Our Prize Competition.

We have pleasure in awarding the prize this week to Miss Amy Phipps, St. George's Infirmary, Wapping, E., for her article on the question:—

#### WHAT CARE SHOULD BEDPANS AND LIKE UTENSILS, ALSO SPITTOONS, RECEIVE IN ORDER TO PREVENT ODOUR AND INSURE PERFECT CLEANLINESS?

It is of the first importance that bedpans, urine bottles, etc., should, except when in actual use, be kept in an airy, well-ventilated place, right away from the sick room. It is preferable that bedpans should be kept in a rack, made to hang upon the wall, where they can be in fresh air. They should always be kept covered in their passage to and from the patient, and with advantage a little disinfectant may be placed in the pan before use, care being taken, however, that it does not come in contact with the patient's skin. After use excretions should be emptied, and the pan sluiced first in cold water, then with some disinfectant (carbolic, 1-20), and finally washed with very hot water, a mop being used to clean handles, etc. The mop also must be kept clean and as aseptic as possible. An excellent plan is in vogue in many institutions for rendering bedpans, bottles, etc., absolutely safe and sterile.

A special iron steriliser is kept for the sole purpose of boiling up such articles once or twice a day. In this way we are quite certain that any germs that may have been present are rendered harmless. Any excreta ordered to be kept for inspection should be placed away from the sick room, and covered with a cloth wrung out in carbolic lotion (1-20).

For a case of fever, and, of course, especially typhoid, a strong disinfectant should be placed in the pan, such as perchloride of mercury (1-1000), and after use the pan should be cleansed, a little of the solution left in it, and covered with a towel wrung out of the same. A special pan should be strapped and kept for these cases. Failing possibilities of sterilising, the articles should once a day be well washed in a large tub of very hot water, with some disinfectant powder. All lavatories, etc., should be kept well flushed with water and disinfectants.

Spittoons should be made of earthenware, with a lid of the same. Before use they should have a small amount of antiseptic lotion put inside, except in a case of unsound mind. In such case Izal may be used with safety, or a little water only may be put in. It must be borne in mind that sputum is comparatively harmless whilst it is moist, but if allowed to dry the germs become active, and it is then that they

[previous page](#)

[next page](#)