various metal polishes, which not only tend to destroy the plate but may become lodged in cracks and crevices when dried.

If instruments are to be kept in glass cases designed for that purpose it is advisable to place small blocks of camphor on the shelves to absorb any moisture.

A word may be said as to the care of special instruments. Catheters, of whatever material, should be always washed in cold water (to prevent coagulation of possible albumen) from the eye downwards, and if of metal should have stilettes replaced after use.

No metal instruments must ever be exposed to mercuric solutions or they will readily turn black. With regard to scalpels, the care of these may depend largely on the individual opinion of the surgeon. They may be boiled, with protected blades, for three minutes; they may be exposed to carbolic 1-20, or held with back of the blade downwards in steam, but after every operation should be sent to be resharpened. The necessity for repairing, replating and sharpening should be reported and have immediate attention, and, where possible, the instrument replaced until the original is again in order.

Delicately made instruments, as lithotrites or cystoscopes, will need constant attention, and their perfect order must be kept up by careful scrutiny, even if not actually in use.

It is gratifying to have so many excellent papers sent in on this subject, as the care of surgical instruments is of the first importance in surgical nursing. How to care for and clean them should be an item in the training of every nurse. Yet, unfortunately, this is not always included in their practical training, especially in large hospitals.

We highly commend the papers sent by Miss H. G. Morgan, Miss S. A. Cross, Miss G. Tatham, Miss V. M. Warry, Miss L. Peacock, Miss E. Marshall, Miss F. Williams, Miss M. MacMahon, Miss E. Please, and Miss S. A. G. Lett. Miss Morgan advises that instruments should be brushed with a nail brush which has been kept in carbolic (1-20); that when instruments have been used for septic cases it is well to put them into a solution of 1-20 carbolic for ten minutes; that joints and screws should be lubricated with liquid paraffin before putting away to prevent rust. To prevent rust, even in presumably air-tight cupboards, a porcelain dish full of quicklime, to be changed when inert, may be kept inside, as the lime absorbs any moisture in the air.

Instruments with ivory handles can be sterilised by being placed in absolute alcohol for an hour.

Miss Cross advises that all instruments not in daily use should be gone over systematically at short intervals, and dulness, specks of dirt or rust removed at once; bare fingers should never be used.

Miss Emily Marshall says Lysol is now very much used in the cleansing of instruments as it does not injure them, and adds that nurses should be careful never to put away an instrument unless it is in perfect order.

Miss F. Williams writes: "Every instrument should have its special place—so that it may be easily found when required Instruments must be kept in air-tight cases. It is convenient to hang artery forceps on a rod. Knives should be kept in a special rack, and needles should be put into a cushion made of cotton wool and lined, and covered over with a piece of lint. A correct list should be kept of all instruments in use."

Miss Lett thinks that to be sure that instruments are dry after cleaning, they should be placed on a towel in front of the fire or even in the oven.

QUESTION FOR NEXT WEEK.

Describe in brief the disorders of the nervous system which occur after pregnancy.

THE AFTER-CARE OF OPERATIONS ON OUT-PATIENTS.

We have spoken with several Matrons on the "After-Care of Out-patient Operations." One experienced Matron, who hopes to have masks used after throat and nose operations, had some interesting views on the matter. She thought that the influx of school children sent by the London County Council made it very difficult to give all the time and attention necessary in out-patient rooms; and that the "caretakers" in charge of the children should be persons with more experience of work for which they are responsible; the plan of treating the large number of children was not popular with many surgeons, who were convinced the work would be better done through well-organised School Clinics. Then she had a word to say about mothers. Poor mothers were a timorous race. If too much was made of the serious nature of operations on the throat and nose, they would not bring their children to be operated on. If a mask was provided,

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