

(e) ORAL AND PRACTICAL.

The practical examination will embrace such work as bed-making; cooking of simple dishes for invalids; bandaging; preparing fomentations, poultices, baths, packs, steam-tents, enemata, and hypodermic injections; taking temperatures and pulse and respiration rates; testing urines; dressing ulcers and bedsores; and administering medicines.

The oral examination will include all the subjects of study.

5. A nurse will be permitted to divide this examination into two parts. For example, elementary anatomy and physiology and hygiene may be taken during the second year, and the remainder during, or at the end of, the third year of training. A fee of ten shillings will be required for the complete examination. If a nurse fail to pass the examination, she will be permitted to enter again on payment of a further fee of five shillings for each subsequent examination. Failure in one or more subjects will not necessitate re-examination in subjects in which the nurse may have satisfied the examiners.

6. The responsible medical officer may allocate the duty of teaching between himself and his assistants. The Board suggest the following scheme of instruction, which may, however, be modified to suit the special requirements of each hospital:—

FIRST YEAR.—*Tuition*: One hour each week on elementary anatomy and physiology; one hour each week on medical and surgical nursing.

SECOND YEAR.—*Tuition*: One hour each week on hygiene and dietetics; one hour each week on medical and surgical nursing.

THIRD YEAR.—*Tuition*: One hour each week on medical and surgical nursing; one hour each week on infectious diseases.

7. The lecturer will advise probationers as to the text-books that they should use.

Special care should be taken to secure that probationers receive adequate training in the practical use of medical and surgical appliances. The nurses should be encouraged in independent reading and study in connection with their work. A small library containing books likely to assist them in their studies should be entrusted to the matron for the use of the nurses.

8. The Board will periodically intimate when and where examinations will be held.

Two examinations will be held each year—in May and November.

We propose to consider this new departure in detail, as it affects the economic condition and professional status of nurses so trained.

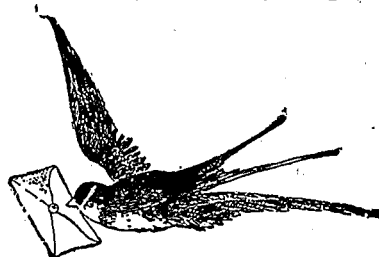
Practical Points.

The Salt Pack. Dr. Jonathan Hutchinson considers the salt pack the most effectual remedy for getting rid of the irritation and synovial effusion of rheumatic gout. A flannel soaked in a saturated brine of common salt is wrapped around the affected joint, covered with oiled silk and a bandage, and kept on over night.

Our Foreign Letter.

SCUOLA CONVITTO REGINA ELENA,
POLICLINICO, ROMA.

(Concluded from page 75.)



From a Neapolitan newspaper we hear of a first course for "Red Cross volunteer nurses" ended by 15 days' work

under Miss Baxter's direction at the Gesu à Maria Hospital, the President of the Committee, Professor Jappelli, addressing a letter of thanks to Miss Baxter in the name of the Red Cross Committee, expresses their keen satisfaction at "seeing their nurses working side by side with those most expert ones, the Blue Cross nurses" (Miss Baxter's pupils). He also expresses his profound admiration for her "great culture and capacity," and for the "sense of infinite pity" with which she dedicates herself to the public good.

Regarding cholera, the papers give very little news, but Naples is not yet on the decrease, unlike Venice, where it seems to be at an end, the usual influx of bathers from the Trentino beginning to take place. One of the infermiere at the Gesu e Maria has died of it within 24 hours, I believe. Miss Baxter merely mentioned that they had nursed the poor woman (a favourite with them all) till she was carried off to the Isolation Hospital; but that she had died the next morning.

The sanitary authorities have been making every effort to stamp out the dread illness, and were it not for the invincible ignorance of the southern people they probably would have succeeded. There is only a stray case now and again in Rome—always to be traced to food imported from other towns, or to infection before reaching here—and it is the same in other central and northern towns. But in the towns and provinces of the south the people not only fail to denounce any suspicious case, but hide it even after death whenever possible, for fear of being carried off to the "contumace" building, where they would be kept until certainty of being not even bacilli carriers was secured.

In one village in Sicily the arrival of a disinfecting apparatus caused a tumult, which ceased when, after pelting the police with stones, they succeeded in setting fire to the stove, and leaving only its carbonised remains on the spot. Remembering some of the scenes we went through when nursing the earthquake victims, it is easy to realise the impossibility of calming a body of a certain class of them when once excited, and the still greater impossibility of trusting them not to evade sanitary regulations in one way or another.

These regulations have been promulgated far and wide, and have evidently in many instances

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