

whilst arranging her things, washing up, etc. After arranging the patient for examination, she should examine vaginally with an aseptic hand, gently ascertaining the size of the os, shape of the bag of membranes if it is already formed, nature of discharge, if any, and the condition of the vagina, also, of course, the presentation of the foetus.

If there is time, she will wash and dry her hands and examine abdominally. During these examinations she should have been noting the frequency and strength of the pains and the general condition of the patient. She will then give an enema of soap and water, make the bed properly with clean sheets, draw sheet, mackintosh, and an extra sheet or folded blanket for the patient to lie upon during the labour. The patient should have a bath, or at least a thorough wash; the vulva and its surroundings should be washed with soap, and after with Lysol (1 dr. to water 2 pints), or with Biniodide of Mercury (1-4000). If the patient does not object, the pubic hair should be cut short. A sterile pad of wool soaked in the antiseptic and kept in place by the diaper should be put on if labour is in the earlier stages. The midwife should take the temperature and pulse and record them, and give the patient little drinks of milk, Bovril, etc., to maintain her strength. She should also see that she is as warm and comfortable as the circumstances allow. Douches should *not* be given unless there is an offensive ante-partum vaginal discharge. If such is present, douche copiously with Lysol (1 dr. to water 2 pints) or Cyllin in the proportion of 1-400 at a temperature of 105 deg. F. The mercurial disinfectants are not much use for douching under these circumstances, as the discharge will contain albumen, and this will combine with the mercury and form a useless insoluble compound.

The midwife must be scrupulously clean, careful of decency by avoiding undue exposure, calm but not phlegmatic, cheerful but not noisy, and firm but not harsh or unsympathetic.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss N. Thomson (London), Miss B. Evans (Bristol).

Miss N. Thomson states that the fundamental principles underlying the practice of modern midwifery are those which govern all surgical nursing. The midwife must never forget that nature inflicts wounds in the course of a labour case, and her object must be to prevent germs from obtaining access to these wounds. This all-important fact must be in her mind during the whole of her attendance on the

patient, and govern all her actions. It follows that the fewer vaginal examinations are made, and the fewer douches given, in normal cases, the less chances there are for germs to effect an entrance.

Miss B. Evans points out that the modern midwife, to be safe, must be a disciple and follower of Lord Lister, and the more closely her practice approximates to his teaching, the more successful will the results of her work be.

QUESTION FOR NEXT WEEK.

What qualities do you consider specially important in a nurse who has charge of sick children, and why?

REAL INCIDENT COMPETITION.

A large number of papers were sent in in connection with the Real Incident Competition, and the decision in regard to the best papers did not reach us in time for announcement in our last issue.

We have pleasure in announcing that the judges have awarded the prizes as follows:—

PRIZES.

First Prize (One guinea).—Miss Anna Margaretta Cameron, Bellagio, Pembroke Road, Bournemouth, W.

Second Prize (Fifteen shillings).—Miss S. C. McCall Knipe, 12, Manor Gardens, Holloway, N.

Consolation Prize (Ten shillings and sixpence).—Miss L. E. Jolley, Royal Southern Hospital, Liverpool.

The prize papers will not be published, but we hope to print a selection of the remaining ones in this and forthcoming issues.

A HOSPITAL TRAGEDY.

BY MISS GRACE BAXTER, R.N.

Into the sad bare court of the old hospital a cab rolled rapidly, followed by the usual Neapolitan crowd. "It is a girl!" "She is dead!" "No, she is alive!" "Oh, Madonna, have mercy on her!" and voices were lifted up in tears and lamentations, while the bell was tolled which calls the surgeons to the gate.

The beautiful Teresina was carried gently in, her long black hair hanging over her waxlike, blood-smearred face. Half an hour later Anna, the rival who had killed her, lay dying in the theatre upstairs, with eight wounds in her abdomen and a lie upon her lips, for she would save her murderer from prison at the cost of her soul.

Anna, the pretty coiffeuse who went from house to house combing heads at a penny apiece, had been loved by Peppino until prettier

[previous page](#)

[next page](#)