

ing violently or blueness in the face, in which case it must be at once withdrawn and a fresh start made.

If there are no such signs and the nurse has satisfied herself, by looking, that the tube has not doubled on itself in the patient's mouth, she should proceed to give the feed ordered, pouring only a little into the funnel at first, allowing it to run into the stomach gently and slowly. When all the food is given the catheter should be withdrawn carefully, afterwards again thoroughly swabbing the nostrils. It is well to feed by each nostril alternately, soreness being less likely to result.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Amy Phipps, Miss M. Punchard, Miss N. Windle-Hunter, Miss F. M. Stevens, Miss Marshall, Miss Macfarlane, Miss O'Brien, Miss M. A. Fussell.

Miss Amy Phipps writes that the utensil containing the food to be administered should be placed in a bowl of warm water to keep the temperature up, usually to about 99 degs. Fahr. The temperature should be tested immediately before administration.

Miss Windle-Hunter advises that the tube should be passed into the nose directly backwards and then steadily through the œsophagus until the end of it is in the stomach. Then (1) Air should bubble up immediately and continue to do so till the tube is pinched. (2) There should be no difficulty in breathing. (3) The catheter should have passed easily, without obstruction for twelve inches.

More than one competitor advises that an ordinary glass syringe should be used rather than a funnel; then, should any obstruction occur and the food cannot pass, the piston can be inserted into the barrel and the obstruction gently forced backwards, or onwards. In our opinion, if obstruction occurs in the tube, it should be withdrawn, the obstruction removed, and the tube reintroduced.

QUESTION FOR NEXT WEEK.

How do you care for clinical thermometers? Describe the various methods of taking a patient's temperature and how you would proceed in each case. What points would you impress on a new probationer in connection with the use of thermometers?

WELCOME HELP.

The President of the Society for the State Registration of Trained Nurses acknowledges with many thanks the following kind donations: Mrs. Bartleet, £1; Miss R. Metherell, 5s.; Miss Emuss and Staff, 3s. 6d.; Miss M. S. Rundle, 2s.

REMINISCENCES OF AN L.P.

I had always longed to be a nurse. Before my frocks were lengthened I had dreamed of it. I read of Florence Nightingale, of Agnes Jones, and Sister Dora with fervour. I had pictured myself becoming in no whit behind these magnificent women in skill, ability, and devotion. Imagination had placed me in the forefront of the battlefield, had found me cool and resourceful at the pit-head when the fire-damp had wrought its dread work among many victims. Now my time had come, now I was to buckle on my armour and prove myself. In those remote days of which I write, every other woman one met did not wear a nurse's uniform, and the real article was not a matter of everyday experience. I was accordingly considered something of an heroine, and an object of deep interest to my immediate circle of friends. Fortified by their good wishes and my own self-approbation, I launched forth on my first day in the Hospital. Demurely clad in a dress of dark woollen material, precisely conforming to regulations, three inches on the ground at the back, a cap that did its best to conform and cover my ears, an apron innocent of bib, I was ushered into the presence of the Lady Superintendent. Scrutinising me closely, from my rebellious hair to the sole of my foot, her glance came to anchor at the last-named point. "You don't suppose I shall allow you to go into my wards in those shoes, Miss," she said.

Even at this early stage, a vague sense of impotence had begun to steal over me. I replied they were what I imagined were required. I was quickly assured that different shoes must be sought and found before I could enter "my wards." Damped and dejected, I put on my coal-scuttle bonnet, with its long veil, and sallied forth. Of towns I knew nothing, of shopping less, and long I wandered looking for "suitable" shoes, and wondering what sort of footwear would be so designated. I happened at last on a shop where I perceived shoes of the cashmere variety, guiltless of heels and appearing very "suitable" indeed. I purchased them with great relief, and hurried back to my Hospital.

Tired and hot—it was flaming June—I once more presented myself before the Superintendent. This time my hideous footwear was graciously approved, and I was ordered to go on duty.

I was eyed by the Ward Sister, who was a sweet woman, with Christian resignation. She drew the Staff Nurse (as she supposed) out of

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