

## PRACTICAL POINTS.

## Please Kill that Fly.

The Women's Municipal League of Boston have issued the following invitation to the public :—

Please Kill that Fly!

Why?

Because:

1. Flies breed in manure and other filth.
2. Flies walk and feed on excreta and sputa from people ill with typhoid fever, tuberculosis, diarrhoeal affections, and many other diseases.
3. One fly can carry and may deposit on our food 6,000,000 bacteria.
4. One fly in one summer may produce normally 195,312,500,000,000,000 descendants.
5. A fly is an enemy to health, the health of our children, the health of our community.

A fly cannot develop from the egg in less than eight days; therefore, if we clean up everything thoroughly every week, and keep all manure screened, there need be no flies.

Will you help in the campaign against this pest?

Adhesive  
Plaster in  
Wound Dressing.

In applying adhesive plaster to retain dressings following a surgical operation, the surgeon is frequently annoyed by the failure of the plaster to stick to the skin. This difficulty can readily be overcome by spraying with ether the surface to which the plaster is to be applied. The ether causes the skin to dry quickly, and the adhesive plaster quickly takes hold. Cotton should always be placed on the gauze. By so doing, the plaster not in contact with the skin can be readily turned back by cutting in the centre. The dressing can be changed, and by the use of tape the adhesive bandage is again adjusted, thus avoiding the annoyance and pain of removing the plaster at each dressing.—*Internat. Hosp. Record.*

The Vacuum Bottle  
in Infant Feeding.

Dr. H. H. Killinger and Dr. F. O. Touney describe in the *Journal of the American Medical Association* the use of the vacuum bottle in keeping an infant's food warm over several feeding periods. The milk was heated to a temperature of 150 degrees Fahrenheit and transferred to vacuum bottles which had been previously warmed. The bottles were kept at room temperature and opened at intervals for temperature readings and bacterial tests. It was found that this method of treatment was quite as efficient from the standpoint of elimination of bacteria as the best pasteurising processes now in use. The temperature of the milk remained germicidal for from six to ten hours, depending on the temperature of the place in which the bottle stood. After that time and as the temperature fell below 115 degrees Fahrenheit the bacteria

began to multiply rapidly and soon reached enormous numbers.

It is thus evident that it is not safe to heat the milk to the proper temperature for feeding the child and keep it in the bottle at that temperature for any length of time.

At feeding time remove the cork and test the milk with a thermometer. If it registers above 115 degrees, fill the nursing bottle and allow it to cool to the proper degree of warmth. Should it be below 115 degrees Fahrenheit throw it away as unfit for use, as bacteria will have multiplied in it. If the bottle is placed in a warm place after being filled with milk at 115 degrees Fahrenheit it will retain the proper heat for about ten hours. Milk heated to only 100 degrees Fahrenheit becomes dangerous in two hours.

## APPOINTMENTS.

## MATRON.

**Hospital for Diseases of the Throat, Golden Square, W.**—Miss Margaret Burrows has been appointed Matron. She was trained at the East London Hospital for Children, Shadwell, and at Guy's Hospital, London, and has held the position of Sister in the children's ward at Addenbrooke's Hospital, Cambridge, Out-patient Ward and Home Sister at the East London Children's Hospital, and Sister-in-Charge of the Convalescent Home at Bognor. At present she is Assistant Lady Superintendent at the East London Children's Hospital.

**Ashburton and Buckfastleigh Cottage Hospital, Ashburton.**—Miss Edith Brown has been appointed Matron. She was trained at the General Infirmary, Burton-on-Trent, and has been Staff Nurse at the Royal Infirmary, Sheffield, and Sister at the Victoria Hospital, Blackpool, the Royal Infirmary, Oldham, and the Hospital for Women and Children, Leeds.

**Victoria Cottage Hospital, Guernsey.**—Miss Rosa Kicke has been appointed Matron. She was trained at the Devon and Exeter Hospital, Exeter; and subsequently held there the positions of Sister and Night Superintendent; after which she was appointed Matron of the Cottage Hospital, Bridgend, Glamorganshire.

## NURSE MATRON.

**Isolation Hospital, Richmond, Yorkshire.**—Miss Anita D. Parnaby has been appointed Nurse Matron. She was trained at the Royal Free Hospital, London, and has since held appointments at the Brighton Sanatorium, the Plaistow Hospital, St. Bartholomew's Hospital, Rochester, St. Peter's Hospital, London, and the Isolation Hospital at Muswell Hill.

## ASSISTANT MATRON.

**Western District Hospital, Glasgow.**—Miss M. E. Griffith has been appointed Assistant Matron. She was trained at the Town's Hospital, Glasgow, where she has also been Charge Nurse and Night Superintendent. She has also been Night Superintendent at the Western District Hospital, Glasgow, and is a certified midwife.

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