

presence of undigested food, blood, pus, worms, or any foreign body. Note if there is painful straining or if hæmorrhoids are present.

Skin.—Note if this is hot, dry, cold, clammy, or if the patient perspires more at one time than another. Note any rash, eruption, redness, discolouration, swelling, cuts, or scratches.

Position.—Note if the patient is prone to lying in any particular position—with knees drawn up, for instance. Note the face: if the eyelids are fully closed during sleep, if the mouth is open, and if the hands are clenched. Note any twitching or grinding of the teeth. Note if the patient is particularly sensitive to light or sound, and winces at strong light or sudden sound.

Drugs.—Note the action of any drugs taken. Always be prepared for any idiosyncrasy on the part of the patient towards certain drugs.

Pain.—Notice if this comes on at stated intervals or is irregular. If it is affected by food or position or action. Notice the patient's position during the pain. Note if the pain be sharp, stabbing, dull. Note the effect of any drugs or other means used to alleviate the pain. Note if the patient is flushed or pallid during pain, or if collapse follows. Note expression of the patient's face during pain. Note the exact site of pain. If the patient is a child, note the cry—if a persistent wail, or a short, sharp cry, or paroxysms of crying.

Discharge.—Note if there be any discharge from uterus, ears, eyes, nose. The nature of the discharge, and if blood-streaked or offensive.

Sputum.—This must be noticed and its appearance reported on—whether thick, frothy, rusty-looking.

Bedsore.—must be looked for daily, and should the patient suffer from bedsore, this must be immediately reported.

Wounds.—The nurse must look out for hæmorrhage. She should keep a record of the date of operation; also of drainage tubes removed or stitches removed.

Instruments and Appliances.—It must be noted that these are kept in their correct position. Should an extension be used it must be noted that the weight is properly slung, and is not allowed to rest upon the bed.

Weight.—Where it is possible the patient should be weighed weekly, and a record kept.

In *nervous diseases* the after-effects of any mental excitement must be observed and reported on.

Incontinence of urine or fæces must always be reported.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss K. Parry, Miss F. L. Pearce, Miss C. Ryder, Miss G. Campling, Miss A. Fryer, Miss S. Trew, Miss Emily Marshall, and Miss F. C. Carter.

Miss K. Parry mentions several important points: Any variation of temperature when taken at different times and in different places. Careful observation of the eyes: whether pupils are dilated, unequal, or contracted; and any movement of the nostrils (*alae nasi*) or epistaxis. The condition of the mouth: if foul, teeth decayed, tongue furred, dry, cracked, or tremulous, and if straight when protruded. Also if breath is offensive, and condition of throat—if free from redness, swelling, ulceration, and patches. Observe if there is any muscle wasting, paralysis, or pain on the movement of any limb. Any deformity, any defect of speech or want of comprehension, any deafness or discharge from ears.

Miss G. Campling writes:—Phthisical and nerve patients must have their weight regularly recorded, sputum disinfected, and special note of temperature before and after exercise. In the nursing of any case, besides the routine observations a nurse should always be ready for possible complications, and according to diagnosis keep a sharp look-out for all points connected therewith, reporting *effects* of treatment, carefully administering medicines, and noting *results*.

Miss C. Ryder observes that in nursing in a private house the routine may be different than in a hospital ward, but observation must be as keen. Everything for the use of the sick must be kept separate for the patient's use, and the nurse must carefully observe economy, and guard against extravagance in the use of expensive surgical stores and medical appliances. Patients take note of these things.

Miss Emily Marshall writes "that in a private house the points to observe are cleanliness, antiseptic precautions, thorough and careful ventilation, special care as to the keeping and administration of medicines, and special care as regards poisons, which latter should always be under lock and key. . . . The care of the patient's diet tray and food makes a great difference to the patient's comfort and well-being. . . . In a private house it is also advisable to write down in a report book the doctor's name, address and telephone number, and telegraphic address."

QUESTION FOR NEXT WEEK.

Describe a case of Cerebro-Spinal Meningitis, and how you have seen it treated.

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