

cavities by tapping. A valuable hypnotic in nephritis is potassium of bromide and chloral hydrate gr. xv *a.a.*, and is frequently ordered. The diet should be light and nourishing, and consist almost entirely of milk; lemon water, imperial drink, barley water and gruel, are also given. The temperature, pulse and respirations should be taken and charted four-hourly.

The mouth needs much attention, and should be cleansed before each feed, glycerine, borax and lemon are often used, followed by a mouth wash of carbolized water, or myrrh and borax; but if the mouth is very foul, hydrogen of peroxide, vol. 50, will be found most efficacious.

The patient should be hot sponged morning and evening and careful attention paid to the back and all bony prominences; if there is incontinence a mixture of ung. zinci oxid. and ol. ricini, or ol. olivæ and spiritus methylatus, well rubbed in, will lessen the chances of bed-sores.

The chief complications to be watched for and guarded against in nephritis are:—

1. Œdema of the lungs or glottis.
2. Uræmia.
3. Excessive dilatation of the heart in debilitated patients.
4. Albuminuric retinitis may be present if the acute attack arises from a pre-existing chronic state.

After the more acute symptoms have subsided, the uses of the diaphoretic, diuretic and purgative are moderated, and at this time iron is usually prescribed, combined with quinine. The diet should be gradually improved.

The greatest care at this time should be taken to guard against a relapse. The patient should always wear flannel or wool all over the body, and avoid every possible exposure. In some cases he is detained (if in hospital) until all traces of albumen have disappeared. Afterwards a change of air to a warm and well protected region with bracing air and dry sub-soil is very beneficial. Baths should frequently be employed to promote action of the skin.

HONOURABLE MENTION.

The following competitors are awarded honourable mention: Miss A. L. Clarkson, Miss E. Fenn, Miss M. D. Hunter, Miss F. Sheppard, Miss Daisy Fairbank, Miss Florence Jenkins, Miss J. J. Jackson, Miss M. Punchard, Miss O'Brien, Miss J. G. Gilchrist.

QUESTION FOR NEXT WEEK.

What are the signs and symptoms of puerperal sepsis? How does the condition originate? What precautions would you take to prevent its occurrence?

THE MATRONS' COUNCIL.

REGISTRATION AND PRIVATE NURSING.*

By Miss CHRISTINA FORREST.



I am asked to speak as to the State Registration of Nurses. I must speak from my own point of view, because I understand that best, and my point of view is that of the Matron of a body of private Nurses. I have been that for over twenty years, and I have also necessarily seen much of other people's point of view, particularly that of medical men and of the public on whom our work depends, and I think that I can say that most of those who think on the subject at

all think that Nurses should be registered by the State, and so many say, what I feel strongly from my own experience—Why not?

I can only say what a terrible difficulty it is in engaging Nurses never to know till taught by bitter experience how little they know. (There also is the other side of the picture—never to know till happy experience of her work shows how much a nurse knows.) People say to me but surely you only take trained Nurses,—we do only take Nurses who have been in hospital work for three years but what they have learnt in those three years it is impossible under present circumstances to ascertain, there is no standard which they must reach before claiming to be considered and paid as a trained Nurse. They may have passed an examination but no one knows what that examination has been.

Education and a standardised test then stands first among the reasons for State Registration. Education for at least three years which time is needed to secure,—1st, The certainty born of repetition, 2nd, For the inculcation of discipline, and 3rd, For the authorities to gain a thorough knowledge of a probationer's character before she is allowed to sit for the State examination and unless the probationer succeeds in passing that examination she should not claim the title of trained Nurse or enter on the life of a private Nurse or claim a trained Nurse's fee. I lay stress on a *private* nurse because more is demanded of her than of any other nurse and on *fees*, because one of the many reasons for the shortage of nurses at the present time is the knowledge that half trained and untrained nurses demand and get equal fees with the fully trained because there is nothing at present to tell the public or medical men what women wearing nurses' uniform know.

* Presented at the Meeting held at Bournemouth, July 25th, 1913.

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