works well under alien skies should be set up forthwith in this country, in accordance with the overwhelming weight of medical and nursing opinion.

THE METROPOLITAN ASYLUMS BOARD,

HOSPITALS DEPARTMENT.

NURSING STAFF EXAMINATION, OCTOBER, 1913. At the recent examination held for probationers in the Metropolitan Asylums' Board Fever Hospitals, thirty probationers out of forty-three who entered for the examination succeeded in passing. One Sister, nine staff nurses, and three assistant nurses also passed the examiners.

LIST OF SUCCESSFUL PROBATIONERS.

Gold Medallist.—Probationer B. Hawtin.
Silver Medallist.—Probationer A. Playsted.
Passed.—Probationers A. E. Burgess, M. Hudson,
A. W. Latham, L. G. Smith, A. Bottomley, R.
Long, G. Hawkins, M. M. Williams, C. M. Moore,
D. Forster, E. Pearson, E. P. Forward, A. McEwen,
E. Dillon, E. Ellis, E. L. Garrett, E. Franklin,
M. Bradbury, M. Pugh, H. Lawrence, R. M,
Dunkeld, E. Box, E. M. O'Connor, B. Warner,
L. Harvey, M. A. Jenkins, K. Lawler, L. Hanks.
The total marks obtainable were 600, of which
the Gold Medallist obtained 510, and the Silver

PRIZES AND CERTIFICATES.

Medallist 505. The Probationers are drawn from

the eight acute fever hospitals.

The distribution of prizes and certificates at the General Hospital, Bristol, on November 20th, was tinged with a note of sadness as, on the last occasion, Mr. Joseph Storrs Fry, that good friend and President of the Hospital, who is missed more and more, and who inaugurated the ceremony—associated with the Annual Meeting of the Needlework Guild—presided.

Lady Smyth, who said she thought the Matron (Miss Densham) was a wonderful person to manage the institution with the skill she did, then distributed the prizes and certificates to the following

Gold Medal: Nurse Elsie Perry. Silver Medal: Nurse Janet Basker. Awarded by the committee to the nurses gaining the highest marks for exemplary conduct.

Certificates of Efficiency: Nurses Vera Fisher, Lilian Poole, Milda Baugh, Irene Keys, and Emily Scott. Medical Nursing: 1, Nurse Janet Basker; 2, Nurse Elsie Perry. Surgical Nursing: 1, Nurse Janet Basker; 2, Nurse Elsie Perry. Physiology: 1, Nurse May Bodey; 2, Nurse Elizabeth Newcombe. Anatomy: 1, Nurse May Bodey; 2, Nurse Elizabeth Newcombe. Practical Nursing: 1, Nurse Dorothy Singleton; 2, Nurse Laura Ayre. Nurse Culverwell Memorial Prize (given by Mrs Samuel Hosegood): Nurse Elsie Perry.

PRACTICAL POINTS.

Danger of Abrupt Change of Position During Fever. Some nurses have had sad experiences of the sudden deaths of patients when seated up after diphtheria and other febrile attacks; and the Council of

the American Medical Association does well to refer to Leduc's explanation and warning that when a reclining person sits up suddenly, the heart bumps against the column of blood below it. In health the heart yields, the column of blood sinks down, the blood flows out of the vessels in the brain, and there may be dizziness from the anemia of the brain. If the myocardium is weak, it may not be able to stand the sudden strain on it from this change of position. He has had five patients with pneumonia die just as they were raised to a sitting position; other physicians. have observed the same. Replacing the patient in the horizontal position at once may relieve, but the heart has been given a strain from which it may never recuperate. When a febrile patient sits up in bed, the pulse almost always runs up and grows weaker—the changes more pronounced, the graver his condition; he should always be raised very gradually to the sitting position. By absolutely forbidding the patient to sit up during an acute febrile disease, Leduc adds, the physician renders him greater and more certain service than he can possibly render by prescribing all kinds of heart tonics.

How to Sidestep Pneumonia. The Bulletin, Chicago School of Sanitary Instruction puts tersely some things one should know about pneumonia, and

ends, "If you can sidestep all these, pneumonia will not get you."

It is an infectious or "catching" disease.
 It is caused by a germ which is transmitted

in the sputum and nasal secretions.

3. The germ is almost universally present in the sputum both of the well and sick.

4. The germ does not cause pneumonia to develop in a person whose system is in a high state of vitality.

5. What reduces the vitality so that the germs may develop? In general, lack of the essentials for normal nutrition, namely, air, food and exercise.

6. What conditions render infection especially probable?

Contact with a pneumonia patient.

Working in a dusty, poorly ventilated place. Sleeping in an unventilated room.

Living in rooms that are unventilated or too

hot and dry.

Eating more or less food than the system needs in relation to work, exercise and exposure.

Drinking alcoholic liquors, excessive work, unseasonable clothing, lack of sleep, worry and grief, other diseases.

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