

## OUR PRIZE COMPETITION.

IN WASHING A NEWLY BORN INFANT FOR THE FIRST TIME, WHAT WOULD YOU SPECIALLY OBSERVE? WHAT ABNORMALITIES MIGHT YOU FIND?

We have pleasure in awarding the prize this week to Miss E. Fenn, Halloway Place, Hastings.

### PRIZE PAPER.

In washing a new baby for the first time, observations can be made as to its maturity. The body of a mature child is plump, the skin red, the nails hard and projecting beyond the fingers and toes, the hair generally one to two inches long, all the downy hair having disappeared except on the shoulders, and the skin is covered with vernix caseosa. Under the skin is a good deal of fat, so that it is not wrinkled; and the length of the average child at birth is twenty inches. Its weight must also be ascertained. A mature child at birth generally weighs from seven to eight and a half pounds.

If the baby is premature, it will be less plump, the skin will be redder, the nails soft, and not reaching to the ends of the fingers and toes, and the child will be covered with down. Unless it is born only a week or so before term, the skin will probably be wrinkled. Its length will vary, as also will its weight, according to the duration of pregnancy.

The nurse must also observe the baby's general condition, e.g., its liveliness, colour, strength of its cry, state of umbilical cord, and so on.

The abnormalities which may be found are as follows:—

1. *Hare Lip and Cleft Palate.*—Both these may be present, or one may be present without the other. Hare-lip is never seen on the lower lip. It is due to the two upper halves of the mouth, which develop separately, not uniting before the child's birth. Cleft palate is due to the same cause, and will be detected when the nurse cleanses the baby's mouth at the time of its bath, if this duty has not devolved upon her when the baby was born, in which case this abnormality would be discovered at birth.

2. *Tongue-tie.*—When cleansing the baby's mouth, the nurse will also probably discover whether the baby can suck or not. If not, tongue-tie may be present.

3. *Ophthalmia Neonatorum.*—This may be present as a result of gonorrhœa in the mother, or as a result of the baby being born before the arrival of skilled attendants, in which case some of the discharges may have got into its eyes, setting up inflammation.

4. *Club-foot and other abnormalities of the*

*limbs.*—The limbs should be carefully examined. Club-foot would easily be detected. But the nurse must also look carefully for any other defect, such as a deficiency or a duplication of fingers or toes, and also for any injuries to the limbs that may have occurred during birth. A baby's legs may sometimes show a marked inclination towards bow-leg.

5. *Umbilical Hernia.*—This is due to the bowel in the neighbourhood of the umbilicus protruding and so forming a swelling. It may be caused by undue traction on the cord.

6. *Imperforate Anus and Imperforate Urethra.*—These abnormalities must be searched for very carefully, and it sometimes happens that even though the external orifice of the bowel is normal, the rectum in its lower inch or so may be obstructed.

7. *Other Abnormalities of the Genito-urinary System.*—There may be Phimosi in male infants, although it is unlikely this would be discovered so soon after birth. And in female infants there may be an absence of the vaginal orifice.

8. *Evidences of Syphilis.*—The skin may be wrinkled, especially on the palms of the hands and soles of the feet. The flesh will be flabby; there may be a "syphilitic wig," and the child's face may have the peculiar broadened and flattened appearance in the lower part.

9. *Injuries received during Labour.*—There may be indentation of the parietal or frontal bones, or in rare cases even fracture of the skull. There may also be bruising anywhere on the face and neck. Facial paralysis may also be present. These injuries generally occur only after instrumental deliveries. In breech presentations the jaw may get injured as the result of traction on the after-coming head. And there may also be hæmatoma of the sterno-mastoid muscle. Where there has been a hand or footling presentation, paralysis of the limb sometimes results.

10. Birth marks may be present.

11. There may be the very serious condition of *spina bifida*, due to a cleft at the lower part of the spine.

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Gladys Tatham, Miss G. Fitzgerald, Miss F. Sheppard, Miss S. Simpson, Miss M. Chopping, Miss S. A. Cross, Miss J. G. Gilchrist, Miss D. F. Chapman, Miss M. Macfarlane, Miss A. Reidy.

### QUESTION FOR NEXT WEEK.

Give your method of syringing the eye, the ear, and the nose.

[previous page](#)

[next page](#)