

The next point should, perhaps, have been mentioned sooner in this address, but it can come in here quite well. I refer to the *importance of the first dressing*. Of course, the first dressing in any surgical case is important, but, in addition to the usual necessity for the utmost attention to details of cleanliness, there is, in certain eye cases, the necessity of warning the patient beforehand that he must avoid any excitement at any moment, even should he realise, for the first time for years, that he has sight. It is possible for the good result of the operation to be prejudiced at the first dressing.

There is still another point which may be mentioned in connection with bandaging of the eyes. Both eyes may be bandaged, and the *patient may be deaf*. Indeed, apart from any question of bandages, he may be both blind and deaf. It is a useful accomplishment to be able to speak on the deaf person's fingers, though, truth to tell, a great many people who are deaf do not understand this form of language themselves.

The question of *feeding* after eye operations need only detain us for a moment. This really resolves itself, as a rule, into the two points, that for the first few days the minimum of work is to be given to the muscles of the jaws and mouth, and that there is to be as little indigestible material in the food as possible, in order that the patient may not be called to stool inside of three or four days. It is quite possible for an operation wound of the eye to be burst open during any straining at stool. For both of the reasons given it is advisable to give only a slop diet for the first few days after operation, in spite of the fact that the patient may have a healthy appetite and good digestion.

I would like to say a word in conclusion to those nurses who are doing work in remote districts. For them some knowledge of eye diseases and the risks of loss of sight which are run by patients afflicted with them seems to me all-important. To have at least some idea of the differences between a disease which is likely to entail loss of sight if not treated, and one which is less important in that respect, seems to me to be knowledge which will sooner or later repay the district nurse, who must either be self-reliant or of very little use.

I have endeavoured, then, in this short address first to impress you all with the importance of a knowledge of eye work, and of the eye as man's highest organ of sense. If I have seemed to dwell rather much on the operative side of it, that is because this, on the whole, is of the greatest importance.

THE INTERNATIONAL NURSING CONGRESS OF 1915.

A few days before leaving New York I attended a Conference called by Miss Goodrich, President of the International Council of Nurses, where, as her guests around the dinner table, we discussed plans for 1915. There were present Miss Geneviève Cooke, President of the American Nurses' Association; Miss McIsaac, Head of the Army Nursing Service; Miss Delano, Head of the Red Cross Nursing Service; Miss Nutting, occupant of the Chair of Nursing and Health at Columbia University; Miss Noyes, Superintendent of Nursing in Bellevue, with its five allied hospitals; Miss Palmer, Editor of *The American Journal of Nursing*; Miss Riddle, Secretary of the Isabel Hampton Robb Memorial Fund; Mrs. Criswell, Chairman of Arrangements for the Congress; Miss Crandall, Executive Secretary of the Public Health Nursing Association; and myself. Absent unavoidably was Miss Wald, President of the Public Health Nursing Association, who will, however, be present in San Francisco.

THE PROGRAMME.

As finally agreed upon, the outline of our Congress week is as follows:—

The Congress meetings will take place mainly inside the Fair Grounds. The features of the Exposition will, it is said, be very beautiful, and there will be much for nurses to see between meetings. The "Inside Inn" will be our headquarters, and numerous meeting-places will be at our disposal.

To reach San Francisco we plan to have our own special train from New York. This can be more economically managed than ordinary travel, because our stopping places will be only those which we wish to see. We shall therefore speed across the Continent, and visit, going and coming, some of those great natural wonders which no one must miss on a western trip. Arrived at San Francisco, we shall have May 31st for informal receptions to the delegates. On Monday morning, June 1st, necessary business meetings, as brief as possible, will be held, for in this one week the three great branches of the American Nurses' Association must elect their officers, and the International Council will also consider its coming triennial programme. In the afternoon, with the ceremonial already dear to us, of music and flowers, International Day will be celebrated, and we shall hope to receive, as new members, Australia, Norway and Sweden, Cuba, the Philip-

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