Think again of the freedom of spirit animating national and international gatherings of self-governing nurses. Materialism may endeavour to quench it, may offer the worldold bribe "all these things will I give thee if thou wilt fall down and worship me." But the free spirit will rise as it has ever risen, unquenched and unconquerable. Nothing can daunt it, for even Death himself comes as a friend who holds the key of life.

OUR PRIZE COMPETITION.

DESCRIBE HOW TO GIVE A NASAL DOUCHE, THE ARTICLES USED, AND DANGER TO AVOID,

We have pleasure in awarding the prize this week to Miss Janie Vance McNeillie, Knockoid, Ervie, Stranfaer.

PRIZE PAPER.

A nasal douche is administered with the patient in the sitting position, his head slightly inclined forwards over a basin suitably placed, or held by him, for the reception of the fluid as it leaves the nostril. He must open his mouth wide; this causes the soft palate to close the posterior nares, then the tube should be directed up one nostril, and the return current will soon begin to flow down the other, thus the whole nasal cavity will be effectually washed out.

The articles used are a basin to catch the escaping fluid, a douche-can or vessel with indiarubber tube, provided with a U-shaped elbow to fit the edge of the vessel, and fitted with a vulcanite stopcock, an additional piece of rubber tubing being attached with a vulcanite or glass nose-piece, placed not more than two feet above the patient's head, and containing the saline or prescribed solution. Or the douche may be given by the use of a Higginson's syringe, a large glass syringe with the necessary tubing and nozzle, or any suitable syphon apparatus by which a steady flow of the solution is obtained.

To avoid the danger of the solution flowing down the larynx, instruct the patient to maintain the attitude above described. The mouth must be free from any loose or movable material, and must be kept open. Insist that he breathe rather noisily at first, and that he resist any desire to swallow or close his mouth. The soft palate closes up the passage from the nose to the throat, and the fluid passes up one nostril, travels round the back of the septum to the posterior opening of the other nostril, down which it flows.

As it is dangerous to use the solution too hot, it is well to have definite instructions from the doctor as to the temperature as well as the quantity, and the special antiseptic he pre-scribes. Ordinarily the surgically-clean vessel and tubes and nose-piece are warmed by letting a stream of plain sterile water at a temperature of 100° F. run through; and then the solution to be employed-also at a temperature of 100° F. (which can be easily cooled or regulated as directed), till it reaches the nose-piece. It is introduced gently and carefully, and a steady flow maintained by regulating the stopcock or by continuous gentle pressure and working of the Higginson's syringe. Cease before the fluid is all used, so as not to introduce air. If the patient complains of pain in the ears, discontinue the use of the nasal douche, and report to the doctor, who may wish to have it discontinued.

HONOURABLE MENTION.

The following competitors receive honourable mention :---Miss C. G. Cheatley, Miss G. L. Sheppard, Miss F. Stanley, Miss M. Robinson, Miss J. Pitman.

Miss Cheatley writes :---" Great gentleness is required in syringing or douching the nose, as too much force might send the discharge or mucus into the passages leading to the ears, and set up septic trouble there."

Miss Sheppard writes in relation to the danger to avoid :—"(I) At the back of the nasal cavities, on each side, is the opening of the Eustachian tube, which leads into the middle ear, and if any force is used in giving the douche, some of the discharge may be driven up the tube into the ears, and there set up inflammation. Some cases of ear disease originate in this way. (2) Never force the lotion into the nose when it is blocked by inflammatory swelling. (3) Be sure to impress upon the patient to keep his mouth open, or the lotion may run down the back of the nose into his throat. (4) Do not have the lotion too hot or too cold."

QUESTION FOR NEXT WEEK.

What is intussusception? How would you prepare the patient for operation, and what instruments and dressings would be necessary?

We are officially informed that the Report of the Committee on the Supply of Nurses, which is being awaited with much interest, is at present being considered by the Army Council, and is not yet available for publication.



