HOW WOULD YOU PREPARE A CHILD FOR OPERA-TION, MORE ESPECIALLY IN REGARD TO DIET?

We have pleasure in awarding the prize this week to Miss Jane McNeillie, Knockcoid, Ervie, Stranraer.

PRIZE PAPER.

There can be no unnecessary refinement of care taken by the nurse entrusted with this important duty. The purpose of the various means employed and precautions taken in the preparation is to bring the child to the table in the best possible condition to undergo the There are many circumstances operation. which must be taken into account, such as the nature of the ailment, age, natural constitution and temperament, present state of health, habits, the probable post-operative conditions, &c.; and it is well to have the confidence of the little one, who will thus bear the general and local preparations better, and, indeed, be quite interested in the special attentions. These include previous bathing of the patient; free washing of the body with soap; thorough scrubbing and purification of the part to be operated upon, and covering it with dressings wet with an antiseptic solution; clearing out the bowel, usually by the administration of a brisk cathartic, followed in twelve hours by a soap-and-water enema; and two hours before the operation it is well to administer another enema. The nurse should satisfy herself that the whole of the enemata has been evacuated. In intussusception, &c., neither laxative nor enema is permissible.

The preparatory diet is of the utmost importance. This applies to a healthy as well as to a sick child to whom an anæsthetic is to be administered; the former, with unimpaired appetite and good digestion, must be kept under strict supervision for at least twenty-four hours previous to the operation, to prevent any addition to the limited milk diet allowed, which consists of warm milk and water, beef-tea, or thin soup free from fat, the last small cup of either of these being given four hours before the operation.

Reasons for this Restriction in regard to Diet.—(1) An overloaded bowel interferes with the free movements of respiration, and contains toxic materials which are liable to prejudice the patient's recovery, so it is necessary to withhold all articles of diet which leave a considerable amount of undigested debris, such as fruit and vegetables. If it happens that through mistaken kindness on the part of friends the child has been given these or trashy and indigestible foods, such as pastries, the surgeon must be informed at once, as the operation may have to be postponed.

(2) In order to prevent or modify sickness, which is apt to occur in the semi-conscious stage during the administration of the anæsthetic or as the effects are passing off, the stomach should be empty. The stomach contents may be thrown into the pharynx by reflex action, though the patient is not sufficiently conscious to complete the ejection of the vomit. There is great danger of the matter finding entrance to the trachea and choking the patient or setting up laryngeal spasm, or even inducing pneumonia at a later stage.

After the final enema the child's toilet should be carefully made-special attention paid to the nails and the hair-and clean clothing put on; the garments must be warm, loose-fitting, and so arranged that the field of operation can be easily exposed. The theatre dressing is renewed after re-shaving and thoroughly sterilizing the site of operation. Failure to secure asepsis on account of acute pain or in "immediates " must be reported to the surgeon, who may prefer the nurse to complete the sterilization under the anæsthetic, and to catheterize the bladder (when the operation is about the abdomen or perineum). When it is elsewhere the child must be coaxed to micturate just before bringing to the table.

The nurse should humour the child, and guard against either over-excitement or dread of the ordeal, and this more especially as the anæsthetist is taking the patient in hand and until the preliminary stage of anæsthesia is over.

THONOURABLE MENTION.

The following competitors receive honourable mention :--Miss W. M. Appleton, Miss Rose E. S. Cox, Miss P. Thomson, Miss B. James.

QUESTION FOR NEXT WEEK,

What do you understand by the term "carrier"? How does a person become a carrier? What diseases are disseminated by carriers?

AN AMERICAN TEA FOR THE N.U.T.N.

^{F-}An American Tea h.s been arranged by the London branch of the National Union of Trained Nurses, to be held in the grounds of the Fulham Secondary School, Munster Road, Fulham, on June 28th, from 4 to 7. Tickets IS., including tea, may be obtained from the Secretary, 46, Marsham Street, S.W. Guests are asked to bring a small present to sell, and to buy one in aid of the funds of the Union. Music and other amusments. No. II Bus from Liverpool Street and Victoria passes the door.



