

OUR PRIZE COMPETITION.

DESCRIBE THE NURSING CARE OF PULMONARY TUBERCULOSIS IN REGARD (1) TO THE PATIENT; (2) TO THE COMMUNITY.

We have pleasure in awarding the prize this week to Miss Dora M. Wilkins (Tuberculosis Health Visitor, Greenwich), Lee Park, Blackheath.

PRIZE PAPER.

THE NURSING CARE OF THE PATIENT.

When nursing a patient suffering from pulmonary tuberculosis it is very important to have the case in a separate room. A sunny, airy room should be chosen, or better still, a shelter erected in the garden if this is at all possible.

Let us assume the patient is in the advanced stages of pulmonary tuberculosis, and is more or less confined to bed and is nursed at home. The bedclothes should be light and warm, care being taken to protect the blankets well with the sheets in case of accidents with the sputum. A proper sputum cup and flask should be within easy reach of the patient, and in these should always be kept some suitable disinfectant. Rags or paper handkerchiefs, which are immediately burnt after use, should be used instead of linen handkerchiefs. The greatest care must be exercised in handling the sputum; the contents of the sputum cup after previous disinfection should be emptied down the lavatory and well flushed, or burnt in the fire, the cup and flask being thoroughly scalded or boiled in a vessel kept for the purpose, the nurse's or attendant's hands well washed and disinfected before touching anything else.

Care with the patient's back to prevent bed-sores.—The bed should be placed so that the air has free circulation round it, and the window wide open day and night. If the patient complains of cold, apply extra blankets and hot-water bottle, the latter being well protected to prevent burning. The window must not be closed.

The room should have all unnecessary furniture and hangings removed, the floor being covered with linoleum in preference to carpet, as this is easily washed and disinfected. Dusting should be done with a damp duster.

The patient should have his own feeding utensils, and these should be washed up separately and kept apart.

Should hæmoptysis occur, keep the patient very quiet in a recumbent position, give ice to suck, and an ice-bag may be applied to the chest. Reassure the patient and send for the doctor.

Encourage the patient in personal hygiene and keep him cheerful.

THE NURSE'S DUTY IN REGARD TO THE COMMUNITY.

Nurses are provided by the Public Health Authority for visiting cases of pulmonary tuberculosis in their own homes.

The nurse investigates the home conditions of the consumptive, chiefly with regard to overcrowding and sanitary defects, and the care of contacts.

The patient, if in the early stages, is recommended to go to a Sanatorium, where he learns how to take care of himself and protect himself from being a source of infection to the community.

The nurse urges the "Contacts" to attend the nearest Dispensary for examination. If found by the Tuberculosis Officer to be suspicious they will attend for some time, so as to be kept under observation.

If the tuberculous patient has left his home for a Hospital or Sanatorium, or has died at home, disinfection of his room and bedding is always urged.

Many advanced cases have to be nursed in their own homes, as sufficient hospital accommodation is not provided for these patients. The patient is always advised to have a separate bedroom, and shelters are sometimes provided free of charge where there is a lack of accommodation, and it is possible to erect one in the patient's garden.

Sputum cup and flask are provided by the Public Health Authority, and the nurse gives the patient advice on the care of the sputum and the importance of personal hygiene.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss M. James, Miss T. Roberts, Miss P. Thomas, Miss J. Jennings, Mrs. E. Taylor, Miss Henrietta Ballard.

Miss H. Ballard writes:—"No person suffering from tuberculosis must be employed in any capacity dealing with food, such as kitchen work, cooking, waiting, or dairy farming or selling. Women suffering from same must not be allowed to feed their children, or prepare food for family."

Mrs. E. Taylor writes:—"It is absolutely necessary to treat this complaint as infectious, and all friends and relatives must be made to realise this and take necessary precautions to avoid contact with patient."

QUESTION FOR NEXT WEEK.

Describe how to care for the bed-pan, urinal, spittoon, and baby's bottle.

[previous page](#)

[next page](#)