#### The British Journal of Mursing Supplement. October 22, 1921 264

The Secretary also reported that in conformity with the Board's Resolutions of July 25th, 1918, and October 14th, 1920, he had placed on the Roll the names of 15 women holding a certificate of having passed the Examination of the Central Midwives Board for Scotland, or the Central Midwives Board for Ireland.

#### PENAL CASES.

A special meeting of the Central Midwives Board was held at I, Queen Anne's Gate Buildings, S.W., on October 13th, when charges alleged against three midwives were heard, with the following results:

Struck off the Roll and Certificate Cancelled .-

Eleanor Harmer (No. 1510).

Censured .- (Report asked for from Local Supervising Authority in three and six months' time):

Sarah Jane Pulley (No. 5782).

In the third case, that of Midwife Emma Jane Martin (No. 32376) the Board found the charges not proved; they dismissed the case, and awarded the midwife fire ros. costs.

## CENTRAL MIDWIVES BOARD FOR IRELAND.

### EXAMINATION PAPER, OCTOBER 4th.

1. How would you diagnose a transverse presentation? How will the labour proceed if this condition is neglected?

2. Describe fully how you prepare a bedroom and bed for a confinement. Also, how you

prepare the patient.

3. What is the routine treatment of the breasts and nipples of a nursing mother? How do you treat cracked nipples? To what condition may they give rise?

4. How would you give a vaginal douche? What are the solutions generally used? Mention

strength.

5. Describe in detail the operation of ligaturing and cutting the umbilical cord. What is the after-treatment of the cord?

6. Give brief definitions of the following:-(a) Second stage of labour, (b) Involution of uterus, (c) Thrush, (d) Cystitis, (e) Placenta praevia.

## AN ORDER IN COUNCIL.

An Order in Council has been issued transferring to the Minister of Health the following powers, amongst others, hitherto exercised by the Home Secretary under the Factory and Workshop Act, 1901:-

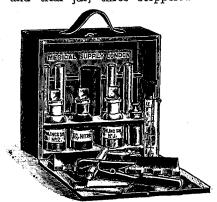
Prohibition of the employment of women after childbirth.

Making of wearing apparel where there is scarlet fever or small-pox.

Provision of homework where there is infectious disease.

## AN "ANTE-NATAL" TEST OUTFIT.

A very useful "Ante-Natal" test outfit is supplied by the Medical Supply Association, Ltd., 167-185, Gray's Inn Road, London, W.C.1, which should be of considerable use both to ante-natal centres and to individual midwives. The size of the case, when closed, is 7% inches by 7% inches by 3% inches, and it contains test tubes, urinometer, and trial jar, three stoppered labelled



bottles for Fehling's solution (No. 1 and No. 2), and nitric acid, a nickle-plated spirit lamp, test-tube holder, and litmus papers. When the case is closed the stoppers cannot come out of the bottles even if the case is turned upside down, as this is prevented by the sliding shelf above. The cost, as illustrated, is 17s. 6d., post free.

The outside of the case is varnished, and it presents, in compact form, a most useful addition to the outfit not only of the midwife, but of the

private nurse.

# INDIAN MEDICAL DIPLOMAS.

In the Legislative Assembly at Simla on September 28th, there was a long discussion on a motion protesting against the decision of the British Medical Council to withhold recognition of Indian diplomas unless the training in midwifery were raised to a higher standard.

The Times reports that the members generally characterised the tone of the British Medical Council's communications as discourteous, and emphasised the impossibility of complying with its requirements within the specified time. The resolution as finally adopted urged the local Governments, in view of the decision of the British Medical Council, to make more satisfactory arrangements for practical training in midwifery, in order to bring the standard in India up to that of the British Universities, and requested the Secretary of State in the meantime to use his influence to induce the British Medical Council to reconsider its decision.

It is to be hoped that the General Medical Council will continue to insist on a higher standard of midwifery in India, it is very necessary.

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