

recommended so highly, but you can't blame me for saving ten dollars if I can."

I said: "No, I can't blame you if you have no choice as to which doctor you call; perhaps it will be all the same to you to get the cheapest."

He said that if he couldn't get it done cheaper, he would be back and engage me. I heard afterwards that he had dickered with an old retired doctor and had finally got him to come for the fee he had paid three years before.

NURSES AND MIDWIVES.

In a letter addressed to the *Eastern Daily News*, Mrs. Colman, Hon. Secretary of the Norfolk Nursing Federation, calls attention to "the valuable opportunity offered to capable young women of securing a year's free training which will qualify them to enter for the Central Midwives' Board Certificate, and, once this is secured, to practice as a nurse-midwife, in a profession where, for reliable workers, unemployment is practically unknown except on grounds of health."

We desire to draw the attention of the Central Midwives' Board to this statement. The Midwives' Act, 1902, does not qualify women to practise as nurses, or confer the right to assume the title of "nurse-midwife." The Act is one "to secure the better training of midwives, and to regulate their practice," and according to Rule 28 of the Rules issued by the Central Midwives Board "The proper designation of a certified midwife is 'Certified Midwife.'" No abbreviation in the form of initial letters is permitted, *nor any other description of the qualification.*

It would appear, therefore, that a "certified midwife" describing herself as a "nurse-midwife" is breaking a Rule of the Central Midwives Board, and is liable to be called to account by that Board for so doing.

The General Nursing Council for England and Wales is constituted, by Act of Parliament, the authority for regulating the formation, maintenance and publication of the Nurses' Register, and to confer authority "to take and use the title of 'Registered Nurse.'" If a woman holds the dual qualification then she should describe herself as "Registered Nurse" and "Certified Midwife," and if she does not then, as a midwife, she has no right to drop from her title the word "certified" and substitute that of "nurse," implying that she holds a qualification which she does not possess.

Mrs. Colman also states: "It is through marriage that our nursing ranks each year are mainly depleted. We need a constant supply of capable young women to train as nurse-midwives."

CENTRAL MIDWIVES BOARD FOR SCOTLAND.

The Examination of the Board, held simultaneously in Edinburgh, Glasgow, Dundee, and

Aberdeen, concluded on the 1st inst, with the following results:—

Out of 136 candidates who appeared for the Examination, 121 passed. Of the successful candidates 30 were trained at the Royal Maternity Hospital, Edinburgh; 44 at the Royal Maternity Hospital, Glasgow; three at the Maternity Hospital, Aberdeen; 10 at the Maternity Hospital, Dundee; four at the Queen Victoria Jubilee Institute, Edinburgh; 19 at the Cottage Nurses' Training Home, Govan, Glasgow, and the remainder at various recognised institutions.

EXAMINATION PAPER.

The following is the examination paper:—

1. What are the diameters of the pelvis which can be actually measured? Give their measurements and importance. What would lead you to suspect a contracted pelvis in a primipara a week before "term."
2. What forms of ante-partum haemorrhage may be met with in the last three months of pregnancy? How may they generally be distinguished from each other? What are the duties of the midwife with respect to them (a) before and (b) after the arrival of the medical practitioner.
3. Define what is meant by the third stage of labour and give the management—(a) When normal; (b) when complicated by severe bleeding.
4. What are the causes of mammary abscess? What measures should be employed to prevent its occurrence?
5. What precautions would you take in the case of a child which has to be reared artificially? What form of nourishment would you select? What ailments may arise from unsuitable food, and how would you correct them?
6. What is "Ophthalmia Neonatorum"? What are its causes, and how may it be prevented? What are you required by the Rules of the Central Midwives Board to do (a) to prevent it, (b) in case it arises?

TRAFFICKING IN CHILDREN.

FITTING THE SENTENCE TO THE CRIME.

At Brentford Police Court last week, Kathleen Kifford, 49, a widow, of The Barons, Twickenham, appeared on remand on summonses for neglecting to notify the Brentford Guardians of the receipt of a child for hire and for parting with the child without notice. It was stated that she was paid £200 for receiving a baby, which within a week she transferred to a woman living in Kent, and paid her £40.

For the defence, Mr. Wilfrid Firth said that the defendant was ill and transferred the child to someone who was registered. It was really better cared for now than it would have been in the hands of the defendant, who had no experience.

The Chairman said that the Bench regarded the offence of trafficking in children as very serious, and they would send the defendant to prison for a month in the second division. They ordered £100 of the money to be refunded and applied by the Court for the benefit of the infant.

[previous page](#)

[next page](#)