answer that they had voted her a medal in consideration of her laudable exertions."

We advise our readers to procure this interesting history.

FEES OF DOCTORS CALLED IN BY MIDWIVES,

For years the question of the payment of fees for Doctors called in by Midwives was one of acute urgency. No provision was made in the Midwives Act, 1902, for the payment of doctors in emergency, and a midwife might send for doctor, after doctor without result, unless she herself guaranteed the fee, which was manifestly unjust.

This was remedied by the Midwives Act, 1918, which provided (Section 14, 1), "In case of any emergency as defined in the Rules framed under section three I (e) of the principal Act, a midwife shall call in to her assistance a registered medical practitioner, and the local supervising authority shall pay to such medical practitioner a sufficient fee, with due allowance for mileage, according to a scale to be fixed by the Local Government Board."

The Minister of Health has now prescribed an amended Scale of Fees for the payment by local supervising authorities to medical practitioners called in by midwives.

The chief alterations made by the new Scale are: (1) A fee of 2s. 6d. is prescribed for attendance at the doctor's surgery; (2) it is laid down that if a doctor finds it necessary to continue to attend later than the tenth day, he shall report to the local supervising authority, giving the reason for his continued attendance. The scale of fees for doctors is: Fee for all attendances by doctor at parturition and subsequent visits during the first ten days, f_{2} 2s.; Anæsthetist, f_{1} 1s.; for suturing perinæum, removal of adherent or retained placenta, exploration of uterus, treatment of post partum hæmorrhage, or for any operative emergency arising directly from parturition, and subsequently necessary visits during the first ten days, inclusive of day of birth, f_{1} 1s. For attendance at or in connection with an abortion and miscarriage and subsequent visits during ten days

CHRISTMAS AT THE ROTUNDA, DUBLIN.

At the Rotunda Hospital during the week preceding Christmas Day an unusual atmosphere of suppressed excitement predominated, not altogether accounted for by the arrival and packing of nurmerous parcels for the mothers' and babies' bran pie.

On Christmas Eve carols were sung by nurses and doctors through the wards, which were prettily decorated. Christmas Day was a busy one. Morning Services were held in the Hospital Chapel. The patients were treated to turkey and plumpudding, which was carved by the doctors. When the bran pie was opened by Dr. Quin the babes began to sing—much to the consternation of a group of pierrots who appeared on the scene to

display their vocal and dramatic powers. Having succeeded in establishing their superiority, the pierrots passed on to the Thomas Plunket Cairnes' Wing, where they were entertained to tea, while the patients and their friends settled down to tea and talk.

A rival troupe of pierrots who had been hovering round in gay costumes, burst into song and dance. Then followed a clever topical sketch by welldisguised assistant masters and students, evoking hearty laughter and applause. (It was not the first time that a Quin won celebrity on the boards !) An impromptu dance was held after dinner by the staff. It is feared the competitive element was partly responsible for the many dances throughout the week. The maids won great admiration for their indefatigable ability with the light fantastic toe. The week's festivities concluded with a delightful evening spent by the nurses and students in the Master's House, by the kind invitation of Dr, and Mrs, FitzGibbon.

AN INDIAN VIEW OF CHILD WELFARE.

A Member of the Royal British Nurses' Association who has travelled far and wide in many lands tells the following story which she considers might bring from the mothers of the East a very valuable lesson to those of the West. This lady was talking to a native gentleman of India of subjects connected with children, when he said, "Ah, but you Western ladies have such strange ideas of what is good for t c children. When your baby goes to sleep, you put it into the darkness, enclose it in four walls. With us it is so different. Our mothers put their babies to sleep on the roof, and when they wish to teach them, it is not to the handwork of man that they point. When one of our mothers cradles her baby at the end of the day, this is what she says : 'Good-night, my little son. See, above you are the great blue heavens. God has given them for your canopy. See the stars, and in the morning the sun will rise in its glory yonder."" The speaker seemed annoyed that any mother could waste such opportunity in forming the mind of her child, and there is much in what he says. Mothers have realised now the importance of fresh air, but they should go further. Would it not avoid, to a great extent, the necessity for so much psycho-analysis if children could be brought closer to Nature, the great Universal Mother, more into harmony with cosmic forces, instead of being shut out from these and imprisoned within four walls. To copy to some extent the ways of the Eastern mother, might at least give an impulse which would avoid the formation of the introspective habit of mind of which, undoubtedly, the seeds are often sown in early childhood. A student of psychology once collected some statistics from which he made the announcement that there was no man of outstanding ability who belonged to a third generation of town dwellers. This conclusion seems to en-dorse the theory that the Universal Mother should be permitted to take a larger share, in her own mysterious way, in caring for the child.

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