

OUR PRIZE COMPETITION.

DESCRIBE A MODEL THEATRE FOR GYNÆCOLOGICAL OPERATIONS, AND WHAT IT SHOULD CONTAIN.

We have pleasure in awarding the prize this week to Miss M. Ramsey, S.R.N., Enmore Road, South Norwood.

PRIZE PAPER.

The model theatre for gynæcological operations must be a circular chamber, also clean and warm without being hot. The system of heating by hot-water radiators is preferable; * ventilation is obtained by the windows opened at the top, through which the air filters by means of fine wire gauze. The walls should be white tiled and the floor tessellated parquetry—only carried out in stone, which is easy to cleanse after operations. Good light is essential—preferably from a glass dome—and ample means of supplying artificial light. There should be a plentiful supply of hot and cold water at all times, made to turn on and off with the foot, thus keeping the hands aseptic. Sinks should be of porcelain.

The sterilisation-room should adjoin theatre, and should contain high-pressure steam and instrument sterilisers. Several drums, sufficient for a good supply of sterile dressings, towels (many tailed), roller, and T bandages, overalls, masks, swabs, packs, safety-pins, &c.

The sterilisation-room should be sufficiently large to permit of the anæsthetic being administered before entering theatre (if there is not a special anæsthetic room). The anæsthetist will require a high stool and the following articles: Gas and ether apparatus, ethyl chloride apparatus, anæsthetic ether and measure, chloroform, mask, drop bottle, some lint and gauze, 14 in. by 6 in. gag, tongue forceps, swabs and swab-holder, hypodermic syringe, hypodermic solutions of morphine, strychnine and ergotine, capsules of amyl nitrate, towels, receivers, vaseline, stomach tube and large glass funnel, porringers.

These articles should be neatly arranged on a glass-topped table which can be wheeled into the theatre.

An operating table which will permit of the Trendelenberg position, and of proper height, width and stability, is essential, also artificially warmed.

Instrument cupboards, which must be airtight and contain: Scalpels, dissecting, vul-

* So far as we know, the system of heating an operating theatre by means of hot air enclosed within hollow walls has not been adopted in this country. It obviates the possibility of dust on or behind radiators.

sellum, pressure, and pile forceps, scissors (straight, curved, sharp and blunt points), various needles, needle holders, Paquelin cautery, Fergusson's and Sims' speculums, uterine and bladder sounds, directors, silver probes, including Playfair's, pessaries, cervix dilators, curettes, retractors, clamps, Volkmann's spoons, swab-holders, catheters, tenaculums, &c., drainage tubes, syringes.

Wide glass-shelves should be provided for the various antiseptic lotions required; also for stock swabs and dressings, tampons, &c.

The following articles will also be needed in the model theatre: Thermometers, both clinical and ward (the temperature of the theatre during an operation should be maintained at 70° F. approximately); porcelain dish of quicklime for the instrument cupboard, nailbrushes, lotion and washing bowls, receivers, pails, footbath, rubber gloves, urine-testing apparatus, vaginal and uterine douche apparatus, irrigators, stethoscope, Kelly's cushion. A large cupboard containing a good supply of mackintoshes, sheets, blankets, jaconet pillows, large and small towels, overalls, caps, hot-water bottles, Clover's crutch, straps, &c. Glass jars containing ligatures and suture materials. Gas cylinders (extras). In theatre cupboard for emergency use: brandy, sal volatile, digitalis, atropine, normal salt solution, also a battery.

Many more articles could be quoted where expense is no object, but the essentials only have been given.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Jane Selby and Miss Gertrude Anderson.

QUESTION FOR NEXT WEEK

Say what you know about premature infants. How a nursery for such infants should be equipped in hospital.

Miss Maxwell and Miss Pope, in their book on "Practical Nursing," point out that "the delicate nature of the diseases peculiar to women renders it highly desirable that the nurse should display consummate tact in gynæcological cases. Otherwise she may alarm the modesty or wound the sensibilities of a patient. Now the surest foundation for such tact is a knowledge of the principles of gynæcology and deftness. Hence the nurse should spare no pains to acquire both. It is especially important that she should familiarise herself with the position in which a patient is placed for gynæcological examination, operation, and treatments."

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