

GENERAL NURSING COUNCIL FOR SCOTLAND.

Sir John Lorne MacLeod, G.B.E., LL.D., occupied the Chair at the meeting of the General Nursing Council for Scotland, held at 18, Melville Street, Edinburgh, on September 23rd., and 12 Members of Council were present.

The Report of the Education and Examination Committee was submitted by Col. D. J. Mackintosh, C.B., M.V.O., as Convener of that Committee and was approved. In terms of same the names of various Nurses who had passed the Council's Examinations and had now reached the age of 21 were ordered to be placed on the Register.

It was also resolved that Craiglockhart Hospital, Edinburgh, be recognised as an Affiliated Training School in conjunction with Dunfermline and West Fife Hospital, Dunfermline, or the Royal Samaritan Hospital for Women, Glasgow.

The Report of a Sub-Committee who had inspected the Midsummer Examinations, was considered in detail and it was eventually resolved that a circular should be sent to Training Schools pointing out some of the weaknesses in training which the Sub-Committee observed, or which had been brought to their notice by Examiners. It was also resolved that the Examination regulations be amended to the effect of providing that irrespective of the total marks obtained by a Candidate in her Written and Oral Papers she must obtain a pass mark at the Oral and Practical Examinations in order to qualify, and that the regulations in regard to the Final Examination for General Nurses be also amended to provide that irrespective of the total marks which a Candidate may obtain in her Written Papers and Oral Examination on the subjects comprised in Medical Nursing and Surgical Nursing, she must obtain a minimum of 40 per cent. in the Oral Examination on the subjects contained under each of the above heads in order to qualify.

The arrangements for the holding of the October Examination were also considered and approved.

Further correspondence with the Nurses' Registration Boards of the various Australian States in regard to reciprocal re-registration was considered and it was decided to continue negotiations to provide for this.

The Registrar reported that in terms of the Rules in regard to the election of the new Council, an advertisement had been inserted in the principal daily papers and nursing press stating that forms of nomination could now be obtained. He also reported that an advertisement had been inserted in the nursing press reminding nurses of payment of the annual retention fee.

"NURSING HISTORY AS SHE IS WROTE."

Conversation between two tidy damsels in 'bus passing Florence Nightingale's statue.

"That's Nightingale, ain't it?"

"Yes, Florence Nightingale. How nice to 'ave such a pretty nime, instead of Sally Boggs—that's me. No one would put up a effigy to such a nime as mine—no matter how many lamps I carried."

"Never see'd a lamp that shipe before—what she do with it?"

"I can't rightly say, but I've 'eard tell as Florence Nightingale was sent by Queen Victoria to the wars in foreign parts to catch bugs in them dirty 'orspitals for soldiers."

"Law! yer don't say!"

What does the Minister of Education think of this conversation?—Ed.

PRACTICAL POINTS.

CIRCUMCISION BOARD.

Miss Mabel Mackay, R.N., writing in *The Pacific Coast Journal of Nursing*, describes the circumcision board used at Fabiola Hospital which is adopted from the one in use at the Chicago-Lying-In Hospital.

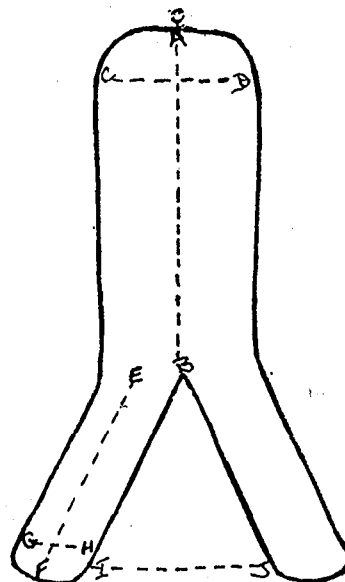
It is made of smooth, firm wood, painted white and then enamelled as a protection against blood stains. The corners are well rounded to prevent injury to the sensitive baby skin.

Dimensions are :—A-B—13 in. ; C-D—6 in. ; E-F—8½ in. Leg length ; G-H—3 in. Leg width ; I-J—5 in. Spread.

Technique of Placing Baby on Board.

Cover body of board with heavy pad. Fold towel to form pillow and place under neck to relieve strain on neck muscles and permit movement of head without discomfort.

Baby is laid on the pad with hips at the angle formed by the forks of the Board. The baby's body and arms are



secured snugly by a straight binder. If an open gown is used the lower part of the gown may be folded over the body and arms, crossed under the board, and the ends brought round and fastened in front with two safety pins.

The legs are extended and fastened in place by a towel measuring 22 to 24 inches in length. This towel is passed once around the board to act as a pad and to prevent the baby's legs from coming in contact with the bare board. It is then passed twice around the leg and thigh and pinned snugly with two safety pins, one at thigh and one at knee. Care must be taken to avoid over-extension of the thigh with resulting strain on the sacro-iliac joint, and to avoid pinching of the scrotum.

The advantages of the board are very evident :—

- (a) It permits ease of operation and ease of handling.
- (b) It is neat and effective.
- (c) It secures firm fixation of the body, legs and thighs.
- (d) Dressings are easily kept in place.
- (e) It fixes feet and knees well out of the field of operation. It avoids the risk of trauma to the baby's thighs and legs inflicted by the fingers of the nurse who is attempting to hold him.
- (f) It avoids the danger of strain of the sacro-iliac joint when too much force is used or where force is applied in the wrong way.
- (g) It eliminates the assistance of an extra nurse.
- (h) It works, and doctors ask for this method of handling in preference to the assistance of a nurse.

[previous page](#)

[next page](#)