

CHAIN OF OFFICE FOR THE PRESIDENT.

The Council considered a design for a Chain of Office for the President. The design was referred to the Education Committee for further consideration.

HOSPITAL DEATH DANCE.

The President brought before the Council the great scandal exposed in *John Bull* of the callous conduct of Staff Dances being permitted in close proximity to wards containing dying patients at Hackney Hospital. It was agreed that the Council petition the London County Council to prohibit music and dancing in corridors and near the wards of the sick under their charge.

LEAFLETS OF THE PAGEANT EPILOGUE.

It was agreed to reprint in leaflet form the Epilogue written in 1920 by Miss Wilhelmina Mollett to the Pageant in the Evolution of Trained Nursing and the Right of Life to Health, for distribution, in support of the vocational spirit in nursing.

NEXT MEETING OF THE COUNCIL.

It was agreed that the next Meeting of the Council should be held on Saturday, February 21st, at 2.15 p.m. The Meeting then terminated.

CLASSES ON ADMINISTRATION.

Arrangements are being made by the Council of the British College of Nurses to organise classes on Nursing and Domestic Administration to be held probably in April, May and June, 1931.

By the kind consent of the authorities of General and Special Hospitals, classes of Fellows and Members of the College will be conducted on a tour of inspection of the Matrons' Departments for administrative instruction.

Those who wish to attend these classes are requested to communicate as early as possible with the Secretary, British College of Nurses, 39, Portland Place, W.1, as the number is limited.

OBLIGATION.

When Fellows and Members wish to take the Obligation in Scotland, they are requested to inform the Secretary at the British College of Nurses, 39, Portland Place, London, W.1, when the necessary documents will be forwarded to them for this purpose.

THE BOOK OF REMEMBRANCE.

In the event of the death of a Fellow or Member of the British College of Nurses, the Secretary would be greatly obliged if the relatives or friends would send notification of the fact, at once, to her at Headquarters, 39, Portland Place, London, W.1.

The names of Fellows and Members who pass on are inscribed in a beautiful Book of Remembrance.

FIXTURES, 1931.

On January 22nd and 29th, and on February 5th, Dr. Frederick Heaf (Medical Superintendent of Colindale Hospital), delivered Lectures at the College on "The Treatment of Pulmonary Tuberculosis," which were exceedingly up to date and instructive.

February 21st.—Monthly Meeting of Council. 2.15 p.m.

February 24th.—Meeting of Tutorial Group. Subject for discussion: "Wounds and Their Treatment." 8 p.m.

February 27th.—Miss K. M. Latham, R.R.C., and Miss A. M. Bright will be "At Home" to Fellows and Members at the British College of Nurses, 39, Portland Place, W.1. Impersonations of Dickens' Characters and Tea, 4-6 p.m. Please notify the Secretary of intention to attend.

LECTURES, 1931.

The following Lectures have been arranged to be held at 39, Portland Place, W.1:—

February 12th.—Dr. Frederick Heaf, B.A., M.D., M.B., M.R.C.S., L.R.C.P. Fourth Lecture on "The Treatment of Pulmonary Tuberculosis." 5.30 p.m.

February 19th.—Dr. Stanley Wyard, M.D. Lond., M.B., B.Sc., M.R.C.P. First Lecture on "Recent Developments in the Treatment of Cancer." 5.30 p.m.

February 26th.—Second Lecture. 5.30 p.m.

March 11th.—Dr. R. G. Cochrane, M.B., M.D., M.R.C.P., M.R.C.S., L.R.C.P. One Lecture on "Leprosy."

March 26th.—Mr. Alan Todd, B.Sc., F.R.C.S., M.R.C.S., L.R.C.P. One Lecture on "Orthopaedics." 5.30 p.m.

April 15th.—Mr. Stanford Cade, F.R.C.S., L.R.C.P. One Lecture on "Radium." 5.30 p.m.

All these Lectures are free to Fellows and Members, who should notify the Secretary if they are able to attend. Non-members, 1s.

THE TUTORIAL GROUP.

The following Paper on Gynaecological Nursing was presented for discussion on January 20th, at 39, Portland Place, W., at a meeting of the Tutorial Group, by Miss H. G. Ballard, D.N., S.R.N., M.B.C.N., Sister-Tutor at St. Leonard's Hospital, Shoreditch, N.1.

GYNAECOLOGICAL NURSING.

Gynaecological Nursing includes the nursing of all diseases of women, and should not be undertaken by any nurse until she has a thorough anatomical knowledge of the relationships of the pelvic organs to each other. She must also have a rigid aseptic technique, and the Rules of the Central Midwives Board are just as applicable to Gynaecology as to Midwifery.

With a good anatomical knowledge, the nurse cannot fail to realise that an enlarging uterus must irritate the bladder, and cause frequency, while pressure on the bowel will give rise to constipation. Displacements must also affect these organs.

(1) ANTEVERSION OF UTERUS.—Pressure on to the bladder, must cause Frequency.

(2) RETROVERSION OF THE UTERUS.—Affects the rectum as well. The bony promontory of the sacrum will produce pain and frequently abortion if deformed, and uterus becomes pinned beneath it. Incompleteness of the supporting muscle, Levator Ani, must result in prolapse of the pelvic organs, especially of the uterus. Hysterectomy leaves the bladder without its normal support, therefore throws its action out, retention of urine resulting. Loss of weight of the uterus after childbirth causes the same discomfort.

Before entering into Gynaecological Nursing, we must name the positions used.

Left Lateral.—The most often used, for bimanual examination, vulva and cervical inspection, for suturing after childbirth, for insertion of pessaries, and for all minor vaginal treatment.

Sims' Semi Prone.—An exaggeration of the above.

Recumbent.—For abdominal inspection and palpation.

Genu Pectoral.—Used for replacing a retroverted uterus, or a prolapsed cord in maternity cases. This position is used in exercises to strengthen uterine ligaments, after replacing of same.

Dorsal.—For any pelvic examination, douching or catheterisation.

Lithotomy.—For all perineal operations, intra-uterine douching, and bladder wash-outs with examination.

Trendelenberg.—For any pelvic operation performed through the abdominal wall.

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