

**CURRICULUM FOR AUXILIARY NURSES.**

Ash & Co., Ltd., Holyrood Street, S.E.1, have been good enough to send us a copy of a record book for use in connection with the Auxiliary Nursing Service Training, which has been prepared in conjunction with the instructors of a provincial hospital for recording the progress of trainees. It is a truly astounding curriculum, and Matrons, Sisters and Staff Nurses are instructed in their duties to signify that the Volunteer is proficient.

We take the liberty of giving publicity to the curriculum, the while wondering what these officers are to be paid for placing their expert professional knowledge at the disposal of totally ignorant volunteers, and thus flooding the nursing world with thousands of Auxiliary Nurses for Civil Defence. We have a shortage of probationers entering our well-organised nursing schools; when these quick-change artists are let loose on a defenceless public after a few hours in hospitals, stuffed like turkeys with undigested instruction, we opine there will be no probationers available for thorough training at all. It is high time responsible Matrons approached the Ministry of Health and protested against this suicidal folly.

**NURSING AUXILIARY'S TRAINING RECORD.**

INSTRUCTION IN CASUALTY DEPARTMENT.	Instructed/Proficient x	Initials of Instructor.
EXTERNAL HÆMORRHAGE—		
(a) Pressure points		
(b) Use of tourniquet		
(c) Application of same		
FRACTURES—		
(a) Dangers of fracture of limbs		
(b) Immobilisation by splint and sling		
(c) Splints in common use		
(d) Padding of splints		
BURNS AND SCALDS—		
(a) First aid treatment		
(b) Treatment of shock		
(c) The use of tannic acid		
(d) Gas burns		
POISONING (Narcotics, Irritants, Corrosives)—		
(a) First aid treatment		
(b) Treatment of shock		
(c) Preparation of an emetic or antidote		
(d) Preparation for stomach washout		
LOSS OF CONSCIOUSNESS AND FITS—		
(a) First aid treatment		
(b) The use of gag, tongue forceps, sponge holder, and how to mount		
ANÆSTHETICS—		
(a) Assistance required before and during administration		
ASPHYXIA—		
(a) Administration of oxygen		
BANDAGES—		
(a) Varieties		
(b) Making of plastic bandages		
(c) Use of elastoplast		
(d) Care of domette and crepe bandages		
DRUGS—		
(a) Administration of sal volatile		
CLOTHING—		
(a) Removal of garments		
(b) Care of garments		
CASUALTIES—		
(a) Reception of patients		
(b) Communication with relatives and local authorities—police, etc.		

INSTRUCTION IN MEDICAL AND SURGICAL WARDS.	Instructed/Proficient x	Initials of Instructor.
MEDICAL AND SURGICAL NURSING—		
Receiving new patients		
BATHROOM AND LAVATORY—		
(a) Sanitary methods of cleaning Utensils and Crockery		
(b) Disposal and disinfection of Soiled Linen and Dressings		
Preparing and Serving Meals		
BEDMAKING—		
(a) Operation		
(b) Fracture		
(c) Plaster		
(d) Amputation		
(e) Rheumatism		
(f) Renal		
(g) Cardiac		
Lifting and Rolling Patients		
Care of Backs and Pressure Points		
Bathing in Bed		
Bathing in Bathroom		
Combing Heads		
Filling of Hot-water Bottles		
Washing Heads		
Care of Hands and Feet		
Care of Mouth		
Last Offices		
Temperature, Pulse and Respiration		
ENEMATA—		
(a) Purgative		
(b) Stimulative (Saline)		
CLEANING—		
(a) Instruments		
(b) Syringes		
(c) Gloves		
(d) Bowls		
(e) Catheters		
STERILISATION OF—		
(a) Instruments (blunt and sharp)		
(b) Syringes		
(c) Gloves—drainage tubes		
(d) Bowls		
(e) Catheters		
(f) Glass (Funnels, connections, irrigating nozzles, etc.)		
Report on Stools and Urine		
Simple Dressings		
Inhalations		
FOMENTATIONS—		
(a) Medical		
(b) Surgical		
Use and Measuring of Lotions		
SICKROOM COOKERY—		
(a) Lemonade		
(b) Albumen Water		
(c) Barley Water		
(d) Benger's Food		
Administration of Medicines		
Baths		
POULTICES—		
(a) Linseed		
(b) Antiphlogistine		
Application of Blisters		
Injections, Hypodermic		
SETTINGS—		
(a) Simple Dressings		
(b) Preparation for Operation		
(c) Shaving		
(d) Anæsthetics		
EYES—		
(a) Spoon Bathing		
(b) Installation of Drops		
Testing of Urine		

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