

the Nurses Regulations 1945 and 1947, framed by the Minister under the 1943 Act, which for the first time safeguarded the title "Nurse" and granted power to the Council to prosecute persons wrongfully claiming such a title, in addition to its existing powers to prosecute persons posing as registered nurses and enrolled assistant nurses. It may be remembered that the Council was instrumental, together with other interested bodies, in having a prayer made to annul the first Regulations framed which allowed the title of "Christian Science Nurse" to be exempt from the Regulations; this title was omitted from the amended Regulations.

Finance Committee.

As has been mentioned in the earlier paragraphs of this Statement, the financial position of the Council has been the cause of great concern and has been kept under constant review. Since January, 1945, the Council has been obliged to sell investments to the value of over £53,000, though it must be pointed out that the Head Lease of No. 17, Portland Place, was purchased in July, 1948, for the sum of £22,000. The Committee is hopeful that the increased income resulting from the new legislation and other changes effected will place the Council in a more stable position, indeed it is gratifying to note that the annual accounts ending March 31st, 1950, presented at this same meeting show a debit balance for the year of only £848, whereas at the time of the presentation of the last annual accounts it had been thought this figure might be as high as £21,400. The Committee is fully aware that there can be no relaxation of the efforts being made to place the Council once more on a sound financial footing, for it is known that the initial registration and enrolment fees which the Council estimated as needing to be fixed at £6 6s. but which the Minister finally approved at £3 3s. (after approving increases in the examination fees and after agreeing to reimburse to the Council the cost of inspection and approval of Training Schools within the National Health Service) are the absolute minimum which the Council can accept, and this has been borne out by the report submitted by the Actuary whose advice was sought on the allocation of such fees. It is a matter which must continue to be kept under constant review.

Registration Committee

The Committee continues to consider applications for recognition of training in other countries though, since the 1949 Act, the condition of reciprocity is no longer a requirement. Between January, 1945, and the passing of the Act agreements were entered into with Madras and with the United Provinces, and additional agreements with New Zealand and Tasmania in respect of mental nurses, and with Western Australia in respect of male and mental nurses; and the agreement previously in force with the South African Medical Council was transferred to the South African Nursing Council when that body was established. Special provision was made to continue to register nurses trained in Eire, Burma and India, provided their training was completed before the alteration in the status of these countries. The first agreement entered into under the 1949 Act has been with the Nurses Board of the Gold Coast; enquiries have been received from Kenya.

The closest contact is maintained with the Colonial Office on the training of nurses in the Colonies, and representatives recently attended a meeting of the committee to discuss the administration of the provisions of the Act.

One reciprocal agreement has been cancelled during this period, that with British Columbia; it was cancelled by the Registered Nurses Association of British Columbia on the grounds that there were no longer educational requirements laid down by this Council for entry to the nursing profession. The fact that these educational requirements, waived at the outbreak of war, have still not been reinstated is dealt with in the paragraph relating to the Education and Examination Committee.

The work in connection with registered nurses grows annually. At June 30th, 1950, there were 157,414 registered nurses as compared with 120,346 on December 31st, 1944. The Register was opened to nurses holding the certificate of the Royal Medico-Psychological Association in December, 1947; although over 12,750 enquiries have been received to date only 8,259 completed applications have been received and of these 7,985 have been registered.

To be concluded.

Recollections.

THE OLD DOCTOR had been asked to speak of the most interesting case during his experience as a practitioner.

It is, he continued, nearly 50 years since I settled here and entered into competition with Armstrong, who appeared to have a monopoly of wealthy patients. He obviously resented me, by his attitude, and was determined that I should fail to have any cases if he could help it.

One night a middle-aged man cut his throat, severing many veins and just missing the carotid artery. Armstrong was not available so I was sent for to attend until the former arrived. The patient had lost much blood and was obviously very collapsed showing little signs of life. I gave him a restorative which partially revived him and was preparing to suture the wound, when Armstrong arrived and pushed me aside rather rudely. After feeling the patient's (improved) pulse, he enquired as to what I was attempting to do.

"I gave him a restorative," I replied.

"Yes," answered Armstrong, "and threw him into a fever." Whipping out his lancet he proceeded to deplete the patient of what little remaining blood he had.

"I trust," he said, "you are satisfied with your efficiency!" as the man gave a gasp and sank back dead. I did not reply to the unjust insinuation from the venerable quack, but I lost no opportunity of vindicating my conduct and relating the true state of the case; demonstrating fiercely the folly of bleeding a man already almost bled to death.

I was depressed about my future success and nearly gave up my practice, when one night I received a further call to a gentleman who had just broken his leg. He had attempted to board a train which was moving, missed his footing and fell in such a manner that one of his legs was run over and completely crushed almost to the bone. He was removed by stretcher to his home a short distance away, whilst summonses were sent to the nearest doctors—Armstrong and myself.

"It's a compound fracture and case for immediate amputation," said Armstrong after he had fumbled roughly through the clothing.

"I shall not require your services," announced the patient, "I prefer Dr. Cameron."

Everyone was astonished and Armstrong was red with rage. Collecting his instruments he stamped out of the house banging the doors behind him.

The patient, whose name incidentally was Mr. Charteris, asked to be left entirely alone with me, and when everyone withdrew I continued to do everything the case required, without amputating. Next day I met Armstrong and contrary to his usual behaviour, he stopped and asked about the patient's condition.

"Doing fine," I replied.

"Your first amputation, I suppose?"

"Neither first nor last," I said, "I didn't amputate."

"I suppose you know the leg is smashed to splinters?"

"I do."

"And you haven't amputated?"

"No."

"Better order the coffin at the undertakers."

"He is busy on one for your last victim I believe," said I, hurrying on.

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