

OBSTETRIC NURSING.

— BY OBSTETRICA, M.R.B.N.A. —

PART II.—INFANTILE.

CHAPTER III.—DUTIES AFTER BIRTH.

(Continued from page 329.)

At their completion, this Course of Lectures will be published as one of the Series of "Nursing Record Text Books and Manuals."

HAVING made this little digression, we will return to our duties. It may simplify matters if we take them *seriatim*, and start from a given period, and assume that our little patient was born on a Sunday ("the better the day the better the deed!"). There will be but little to do for him except changing (watching for any symptoms that may arise) and feeding. As it is my intention to devote a chapter to that subject, we will leave it in abeyance, and go on with our routine work. On the following Monday morning baby must be taken out of his cot to be attended to. Observe strictly the instructions I have given you in a former paper as to the *right* method of raising the infant from cot or bed. Make your preparations beforehand. You will require a *basin* of warm water, sponge, flannel, soap, your baby's basket, a soft towel, some napkins, and a clean nightdress. Sitting on your chair, you place baby across your knees, feet towards the fire, in the way I have told you. There is but little to do, for no clothes are to be removed except the nightdress and the napkin. Our baby is but tender yet. A careful Nurse who has properly changed her baby will not have a stain upon the long flannel. The less you do for a few days the better for the baby. Ever remember "fuss" is not care; and in our portion of work, at any rate, the worst of nursing is the nursing that does too much.

To remove the soiled nightdress raise baby up by the shoulders, rest the head on your *right* arm, unfasten the gown with your *left* hand, lay baby down again, take the arms out of the sleeves, raising them by the *elbows*; slightly raise the buttocks by the feet, drawing the gown from under them; loose the feet and take the gown away over them; and all this is to be done as baby lies on *his back* straight across your knees, his head resting on one of your thighs farthest from the fire. Take the sponge, and squeeze it *almost dry* out of the water, which should be *quite* warm, and pass it lightly over the face, and wipe it with the soft towel.

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I must particularly impress upon you not to have the sponge too wet, or some of the water from it will trickle down the infant's neck, and if unperceived set up chafing. I have seen poor babies excoriated from this cause: the water has never been wiped off, and getting into the creases of the skin, remains there, and gets hot and irritating.

You now change the napkin, and wash the buttocks and genitals. You do these with soap and *flannel*, rinsing the soap well off, and wiping the parts perfectly dry. Be especially careful to *dry* the groins (and if a male infant, the scrotum), using your soft towel for the purpose, and then powdering the parts when they are wiped dry. Never powder over wet; the puff merely completes what the towel has begun, and is *no* substitute for careful wiping. Now put on the clean napkin. In placing the pin, be very careful not to hurt the genitals, especially in male infants. To avoid this risk place the two forefingers of your left hand, palm upwards, between the folds of the napkin and the pins, so that it will be the Nurse who *feels* the effects of carelessness—that is pricking—not the baby. I have seen harm come from want of care in this matter, coupled with profound ignorance as to *cause*. Now put on the clean gown in the way you did at first (unless you have a fancy for putting it on by the *feet*, like the Nurse who wrote to Mr. Editor the other day), and you have done all you need do for the present.

Before being placed in his cot, baby may require feeding, or putting to the breast. Place the flannel square over his head, and lay him down again, observing the precautions I have so recently brought before you.

The morning duties for *Tuesday* will be precisely the same as *Monday*.

The chief point we have to bear in mind for the first five days of infantile life, or even longer, is the shedding of that small portion of the funis left attached to the umbilicus, and the perfect healing of the umbilical scar.

It is a most important part of Obstetric Nursing to promote these desirable ends, and I must for that reason ask the thoughtful attention of my young Nursing readers to all I have to tell them on the subject. For the want of proper care in the management of the navel string, suffering, and oftentimes irreparable mischief, have been inflicted upon the newly-born.

We will regard the matter in the light of simple surgery. You cut your finger rather deeply: as

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