

examinations proving her to possess at all events the necessary *knowledge* to instruct her pupils. But when a woman states that she is a "trained nurse," it often means nothing, or at best is a doubtful ill-defined term signifying a doubtful and uncertain course of training, closing with an examination which varies considerably at different training schools, and whose certificates give the nurse absolutely no *legal* status as a "trained nurse."

It is manifestly unfair and unjust that such a state of things should not be altered, and the idea that it is an evil that requires remedying is not new. Some years ago Sir Henry Acland wrote:—

"The Medical Act of 1858 allows women to be registered as medical practitioners. It makes no provision for the registration of nurses, however complete their education, and however great their skill, either as nurses or midwives.

"Many accomplished women might reasonably desire the name as well as the functions of superintendents of hospitals, or of ward-sisters, or of nurses. At present they can have no such legal recognition of their qualifications in either department as is obtained by their sisters who become schoolmistresses, or who are students and teachers of art. That this ought to be remedied can hardly admit of doubt; but it rests with the women of England to decide whether what is here advocated has their support as well as their approval, or whether the sole relation they will have to the medical profession is to be that of the ordinary licence to practise surgery and medicine as with men. There are signs that some who desire this last undervalue or despise the profession of nursing in the wide sense of this volume (Miss Lee's Handbook for Hospital Sisters). If these even consulted their own interests, they would support and not look down upon what in their view is at all events half-way to a better end."

The time has now certainly come when the women of England, the nurses of England, *must* grapple with this question, or their profession will not only remain in its present uncertain, ill-regulated state, but will become more and more flooded with those women whose half-knowledge is almost more dangerous than the whole ignorance of the old nurse.

Nurses who have, therefore, the true honour, welfare, and advancement of their profession at heart, must strive to redress these evils by agreeing to some scheme which will introduce a system of registration depending on the attainment by the nurse of some common standard of excellence, which will have to be the object of every nurse worthy of the name, which will force the various training schools to train up to that standard, which will confer on the trained nurse that legal status to which she is justly entitled, and which will close the door on inefficiency and ignorance.

W. J. MOLLETT.

THE NATIONAL PENSION FUND FOR NURSES.

We anticipate with considerable interest the publication of the prospectus, which is announced for appearance next week, of this fund. No one more than ourselves will welcome readily and heartily the movement, and help to give it the full support that such a scheme deserves, if we are only convinced that its terms and administration can satisfactorily compete with existing assurance and provident associations, and are such as will give nurses the advantages they should have for their payments.

A NURSE'S EXPERIENCE.

UNDER this heading an advertisement continually appears in one of our leading evening, and, indeed, in several other, contemporaries. It is an advertisement of a much-vaunted nostrum. In it we deeply regret to notice a testimonial, apparently published with sanction, given by a hospital nurse. We sincerely hope that this lady will take the earliest opportunity of withdrawing such testimony, as any support or patronage of so-called "patent" medicines is decidedly derogatory to all professional good taste; and we strongly advise nurses in general, and this one in particular, not to be inveigled to give quack nostrums—be they St. Jacob's this, St. John's that, or St. Michael's the other thing—the slightest possible encouragement, but leave them severely alone, and confine themselves to legitimately and professionally recognised preparations. These same remarks, we hope, will apply also, only with doubled force, to the medical gentleman who permits his name to be used in the matter.

HEROISM IN THE INFIRMARY.

A MEMORIAL window has just been placed in the Bristol Royal Infirmary, to commemorate the heroic deed of the young surgeon, Mr. Connor, medical officer, who lost his life in a noble and daring effort to save a poor patient who had undergone the operation of tracheotomy while suffering from diphtheria. A false membrane having formed in the throat, and the patient being in imminent danger of his life through the breath passage being clogged, the young surgeon, with absolute self-abnegation, applied his own lips to the throat tube, and succeeded in moving the obstruction which had prevented the patient breathing at ease. His friends and admirers have subscribed for the memorial window, which is in three panels, representing Christ healing the sick, the incidents from the parable of the Good Samaritan, and thirdly, Peter

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