

Ward. Pro. follows in close attendance, noting everything, and finding out where all bowls, syringes, lotions, &c., are kept.

The Ward is soon a busy scene again, for the House-Surgeon has arrived. Sister and Nurse are fully engaged with him, and at first there is little the new hand can do, more than look and listen with all her might, fetch and carry as directed, "clear up" after each dressing, and make the patients comfortable again, and their beds tidy. Sometimes in Provincial Hospitals the Visiting Staff make their rounds in the morning, but this habit is not so general as that adopted in London Institutions, of using the afternoon—presumably because Doctors are too much engaged with their private patients earlier in the day, to make it convenient.

Sister serves the Ward dinner soon after twelve. The Staff Nurse will have gone to her own meal, and those still on duty carry round the plates, feed the helpless, and note any patient whose appetite is failing or improving. At one o'clock she goes to dinner, and on her return at 1.30 finds the Ward as neat as a new pin, all signs of food and crumbs gone, and Sister with her Nurses awaiting the visit of the Surgeon, or Physician, with frequently a large class of Students. Another tour of the Ward is made; any new patients, operation, or important case being thoroughly examined. This is a time when much is to be learnt by attentively listening, as symptoms, treatment, &c., are fully explained for the benefit of the Students.

The patients' tea is at four o'clock, and Pro. must learn how to make drinkable tea, cut bread and butter quickly and temptingly, and boil eggs to a nicety.

The regular evening duties begin at six o'clock, and as generally Nurses take it in turn to be "off duty," there is plenty for the remaining ones to do. Besides renewing poultices, rubbing and powdering the backs of patients not allowed to get up, remaking beds, there are special duties set apart for each day of the week. An arrangement like the following is usual:—Monday, heads; Tuesday, feet; Wednesday, all tins and bright metal utensils polished; Thursday, cupboards cleaned; Friday, plants washed; and Saturday, linen aired.

We will imagine that six months have now flown rapidly, the work is growing daily more and more interesting, when the unwelcome order comes that Pro.—who for convenience we will call for the future Nurse A.—has to go on night duty. Her relief is great, when the orders are read out at supper time, to find that she is to be in the Children's Ward, to assist the regular Night Nurse, who has more to do than she can manage

—every cot is full, and some are heavy cases, requiring much attention. Now all her best qualities and utmost patience are called into play. How grievous it is to see the sufferings of these poor little ones! They cannot control their feelings like men and women, and they are so much more in need of a loving, sympathetic friend, who can soothe and amuse, as well as nurse, them. In the course of a week or two, this Ward may not have more work than sufficient to occupy one pair of hands again, and Nurse A. is sent from Ward to Ward as extra help is required.

Day and night duty should now alternate at regular intervals (generally of about two months), and soon a year is completed, she having done more or less duty in nearly every Ward in the Hospital. She is expected to be well up in all branches of Ward work, and with some knowledge of ordinary Medical and Surgical cases—thanks to the instructions of Sister and Nurse, and her own industry in reading up notes of cases, at any spare moment. All Nurses have the benefit of attending lectures weekly, given by the Matron or one of the Medical Staff, on "Nursing," which will include directions for making the many different kinds of beds required for various treatments and operations; how to use ordinary purgative and nutritive enemata; the way to pad splints, make pads, cushions, special bandages, &c.; how to prepare and cut dressings, get ready for an operation, apply lotions, poultices, and give plain and medicated baths. Bandaging, besides the use of the ordinary "roller," should include Esmarch's triangular bandage, and the use of starch, gum and chalk, salicylate or plaster of Paris. Elementary anatomy and physiology, with the use of bones, casts, and diagrams.

The "first year" examination comes, and should she pass (it is not difficult) she is promoted to the rank of "Junior Nurse," when she is allowed to take temperatures, do some of the dressings, and assist Sister with any bad cases. She will have to make and apply poultices (hot and not sticky) and fomentations that will not saturate the bed. Night duty brings more responsibility than hitherto, as she gets the sole charge of a Ward, and the visits of Night Superintendent being few and far between, she must often exercise her own discretion and common-sense. Many cases are worse at night, and a sharp and observant watch must be kept for any fresh symptoms or rapid change of temperature, carefully observing how long her different patients sleep, what nourishment they take, and the action of any new medicine. The Night Nurse is responsible for the proper ventilation of the Wards so long as she is on duty, and has a certain portion of the Ward work to do, including the bath-room,

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