

Extreme care in handling patient, especially abdomen. Care of mouth and tongue—glycerine and borax, etc. Thorough disinfection of everything connected with patient: urine, fæces, soiled linen, etc.; also nurse's hands, for which purpose a basin of disinfectant should be kept by the bed.

Take and record temperature, pulse, and respiration four-hourly, reporting any suspicious changes at once. Sponging four-hourly, or even cold packs or cold baths may be ordered to reduce temperature, allay delirium, and promote sleep, or remove perspiration.

Alcohol is administered only under doctor's orders; usually given towards the end of the illness. Watch for, and withhold if symptoms of internal hæmorrhage appear. Drugs, too, are given as ordered, for relief of symptoms, or perhaps to act as disinfectants of the alimentary track. Watch for undigested curd in stools, or blood. Complications: (1) hæmorrhage, (2) relapse, (3) retention, (4) perforation and peritonitis, (5) hypostatic pneumonia, (6) thrombosis.

No. 4—PNEUMONIA.

Symptoms: Rigor, or feeling of chilliness, followed by sudden rise in temperature (103 deg. 105 deg.). Rapid increase in pulse, which may go up to 120 deg. per minute. Very rapid respiration (40-60 per minute) is one of the most marked symptoms. Anorexia, malaise, listlessness, flushed face, bright eyes, working nostrils, dry brown tongue, and excessive thirst, scanty concentrated urine, constipation, perhaps sickness, sordes on lips and teeth, cough dry and hard at first, then followed by rusty-coloured—or prune-juice—blood-stained expectoration.

Nursing Treatment: Keep at rest in bed, head and shoulders raised, in a very well-ventilated room, protecting from actual draughts. Flannel nightdress and singlet, open down back. Fresh air and oxygen, the last obtained naturally or artificially, are of the greatest importance in treating pneumonia.

Prevent movement, especially sitting or rising up suddenly, on part of patient, as there is great danger of heart failure. Pay attention to general cleanliness and health of patient. Back to be well washed and rubbed to prevent bed-sores. Teeth and tongue to be swabbed with glycerine and borax, lemon, etc. Constantly keep bowels well open, and watch state and quantity of urine. Take

and record temperature, pulse, and respiration four-hourly till temp. normal at least a week. Sponge four-hourly if temperature over 102 deg. (as ordered). This also promotes sleep and lessens delirium.

Alcohol, administered by doctor's orders when the state of the pulse indicates its use, is used more freely during this illness on account of its short duration. Drugs may be ordered to relieve symptoms, when it will be the nurse's duty to see that they are administered exactly when, and as, ordered. Watch patient carefully if delirious; also watch for symptoms of overdose alcohol, heart failure, cyanosis, etc.; also false and true crisis, night sweats.

Diet: Liquid during acute stage. About 3pts. milk and 1pt. beef tea in the 24 hours. Administer milk 5oz., water 3oz., two-hourly; beef tea half-pint, twice daily. Give plenty of water to relieve thirst, lemon water, etc. Increase gradually, with doctor's orders, to light diet, as temperature remains normal.

Complications: Heart failure, pleurisy and empyæma, bronchitis, tympanitis, jaundice, gangrene of lung.

Surgical Nursing.

QUESTIONS.

TIME: TWO HOURS AND A HALF.

1. How would you prepare a patient for the removal of a stone in the bladder by suprapubic cystotomy? Describe the nursing for the first week.

2. What instruments are required in an operation for appendicitis? How would you prepare yourself in order to assist?

3. Describe the treatment and nursing of a case of compound fracture of the tibia. What symptoms would make you suspect sepsis?

4. What is meant by "shock"? Describe the symptoms, nursing and treatment.

5. Enumerate the various degrees of burns. Describe nursing and symptoms of a severe case of scald in a young child.

6. How would you prepare (1), saline for transfusion (2), turpentine enema?

COMMENTS BY EXAMINER.

The answers to this paper were, with few exceptions, very satisfactory. The instructions that "answers should be brief and to the point" were, on the whole, consistently