

tectomy nursing than were forth-coming. Many of the answers were meagre and sketchy, probably because the candidates frequently allowed themselves insufficient time for the last question.

The most glaring blunder in the examination was the statement that brandy and coffee could be passed through the abdominal drainage tube, but no doubt the candidate intended to say rectal tube. Similarly when it was stated that breakfast should be given an hour before the operation, a hyperdermic injection was intended. There is also a charitable explanation of the advice to give a saline injection into the bacillus vein.

MEDICAL QUESTIONS.

1. Outline the general nursing management of a case of broncho-pneumonia in a child three years of age.

2. What is meant by Weir Mitchell treatment, and in what class of case is it of service?

3. Describe the general nursing of a case of gastric ulcer with hæmatemesis.

4. What disinfecting measures would you take after a case of scarlet fever nursed in a dwelling-house?

5. What are the complications to be watched for in the nursing of cases of:—

- (a) Diphtheria;
- (b) Chronic nephritis;
- (c) Typhoid fever;
- (d) Scarlet fever?

The commonest complications, and not more than four in each case, are to be given.

6. What measures are of service when it is required to lower the temperature in cases of hyperpyrexia?

EXAMINER'S COMMENTS.

The questions in the paper on Medical Nursing were answered, on the whole, in a manner which showed that the candidates had a good grasp of their subject. There was one exception to this, and that was in the question on Weir Mitchell treatment. In answering this question the majority of candidates gave me the impression that they regarded this treatment as one designed to punish the offender

who had allowed himself to become a victim of functional nervous disease. The majority of nurses also appeared to think that wonders would arise from the use of "Electrical Treatment," an expression about as vague as it is meaningless. Few seemed to grasp the fact that, whatever the details of the methods used, the one essential in the treatment is rest, bodily and mental, and that the mental rest can be obtained only by removing the patient from the environment of mental irritation and worry. Fewer still realised how far the nurse can help the patient on by encouragement and assurance. Do not confuse the neurasthenic and the hysteric with the malingerer. Remember that the two former are suffering just as much as your patients whose diagnoses sound much more alarming.

While congratulating the candidates on their nursing knowledge, the examiner feels that he should not let this opportunity pass without appealing to them to improve their general educational talents. Put bluntly, the spelling in the papers was appalling. Now this is not as some might say, a matter of no importance. Is it going to mean nothing to you, when writing a report on your patient, that you are going to write some words that will appear utterly ridiculous to the reader? And it is simply a question of careless observation. It is quite impossible that a nurse in the course of her training should not frequently come across the word "albuminuria." And yet nearly fifty per cent. of the candidates had some extraordinarily fanciful spelling for this; quite a large number showing that they had no idea as to the meaning of the term by writing "albumin urea." One nurse decided that her patient, after a course of sippy diet, might have a little pounded "foul," and another considered that "Eastern syrup" might help along the convalescence.

I should like to mention again a point that I have made before. Candidates will gain, and not lose, by answering only what is asked. An examiner's task is not an easy one, and it is certainly not made any easier by those candidates who insist on writing several pages quite foreign to