(7) If a patient has to have an operation, do not keep him in suspense as to the time. Tell him quietly and explain it is for his benefit. Make him contented in mind as far as possible. Give him confidence. If he is kept in suspense he will be in a poor state when he reaches the theatre.

(8) When you do your "round" with the doctor try and avoid discussing the case in whispers at the foot of the bed—the patient always imagines the worst.

(9) Never rebuke a nurse in front of the patients.

(10) Do try and laugh in ward once in a while, the patients will then know you are human.

(11) We know that relatives can be a nuisance on "Visiting Day," but remember the patient is very dear to them and they are much concerned as to his progress.

(12) Who else can the relatives enquire from about the patient's progress except you? (They may be afraid of the doctor.)

(13) Would it not be possible for you to go round the ward when visitors are present to show you are interested in the welfare of their loved ones.

(14) We know that when the doctor (or Matron) enters the ward he has to be escorted, but if you are attending to a patient do not "drop him" as if he doesn't count at all. Say a word to him and if possible send a nurse to him. It is very disconcerting to be left uncovered for no apparent reason—for if the screens are round, the patient does not know why he has been left—and again nerves begin to work.

(15) Do not ever give cause for it to be said in your ward that the most popular member of the staff is the junior probationer.

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**Book Review**


This is a Book with a two-fold purpose, i.e., that of the Nurse or Companion whose duties in attendance in a lengthy convalescence are often very wearing, and also for the Patient whose convalescence can be a very trying personal experience.

The Book is pleasant to read and is conveniently divided into Amusements, Intellectual Pursuits, Handicrafts etc and gives many ideas as to how to while away the time, and almost is an entertainment to be ill in order to have such fascinating things to do during convalescence. We do not recommend the point of view that medical minded Invalids should seize the opportunity of research into their own illness by reading up their complaints and taking notes on themselves.

The chapters on Handicrafts are helpful, though not all are suitable for Bed Patients.

The chapters on Food, including a number of tempting recipes, add to the value of the book, as do chapters on Exercises.

"Getting Better" is to be recommended not only to the Convalescents and their Nurses, but it will be of great use in any household which may have a lengthy illness to contend with.

The Book is Published by Faber and Faber, 24 Russell Square, London, and its price is six shillings. (Postage extra).

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**Military Male Nurse Training**

By a Technical Training Instructor.

India cannot stop her cry about the shortage of Nurses. On all sides the cry is heard and the dearth of Nurses is everywhere apparent. The Army is taking pains in these dark days to train Men in Nursing. A Course has been arranged for a period of two years Training, and the first batch of Students are at the point of completing it. The qualification of the students is Matric. and non-Matric. The Students are recruited from all parts of India and sent to one of the Training Centres. Here they are trained for three months, and receive six weeks Military Training and six weeks basic Nursing Training.