and is divided into two divisions—medical and surgical—with a surgeon-captain in charge of each. The medical division consists of acute, sub-acute, convalescent, mental, zymotic, T.B., and sick officers' wards. The surgical division has clean and dirty surgical wards, fracture, convalescent, eye, ear, nose and throat, and venereal wards.

The Watches. The attendants usually do one month in three or four on night duty, while the remainder take their turn in rotation. Besides staff employed in nursing duties, there are others employed in the duty office, receiving room, out-patients, record, and survey departments. Leave is given in watches. A typical fortnight's leave for attendants is: First Monday, duty; first Tuesday, 4 p.m.; first Wednesday, 7:30 p.m.; first Thursday, 4 p.m.; first Friday, 4 p.m.; first Saturday, duty; first Sunday, 7:30 p.m.; second Monday, 4 p.m.; second Tuesday, duty; second Wednesday, 4 p.m.; second Thursday, 7:30 p.m.; second Friday, duty; second Saturday, 1 p.m. (short week-end leave). The fourth week-end is a long week-end (from 7:30 p.m. on the Friday). The zymotic, T.B., and departmental staff have special leave; chief petty officers and petty officers get more leave. This leave, while being in excess of the usual nurse's leave, is less than that in other branches of the Navy. The night duty staff get leave from 7:30 a.m. until 11:30 a.m. every day except the married members, who get all-day leave.

The hospital is a typical general hospital, plus mental, T.B., and zymotic wards. All cases are kept in hospital until they are absolutely fit, when they are discharged to duty, or until nothing further can be done for them, when they are invalided, and further treatment, if necessary, is carried out by the civilian authorities.

Venereal Disease. About five thousand cases pass through each of the three main hospitals annually. Of these about half are medical and half surgical cases. Deaths average about forty a year. Venereal disease accounts for about two hundred cases, but this total is gradually becoming less. Pulmonary tuberculosis accounts for about fifty cases, and here again the total is dropping. Each member of the staff spends about twelve of the twenty-two years in a ship, and whilst serving in a ship his work is very different from that in hospital. The sick berth staff in a ship is the public health department, and many and varied are the jobs. The number of staff carried in a ship varies with its size: roughly, it is four in a battleship, three in the larger cruisers, two in the light cruisers, one in a sloop or gunboat, and one or two to a flotilla of destroyers.

F. B. A.

AN OUTLINE LECTURE ON HOME SAFETY

A Contribution very kindly made by the Safety First Association of India

Home accidents are caused chiefly by thoughtlessness and carelessness—these can be overcome by training in safe habits.

The easiest way is not always the safest way:

1. It is easier to draw up a chair and stand on it to hang the curtains than it is to go out into the godown and bring in the step ladder—the proper tool for the job.

2. It is easier to pick up the broken glass with the fingers than to get a dust pan and brush the broken glass safely into the dust pan.

In India statistics giving the causes of accidents are not available. There is therefore the necessity of taking those of U.S. America and England in order to enable us to realise the serious problem of Home Accidents.
The following statistics are for the year 1932 and are due to the courtesy of the Travellers Insurance Co.

<table>
<thead>
<tr>
<th>Causes</th>
<th>No. of accidents</th>
<th>Per cent.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Falls</td>
<td>3,427</td>
<td>46.1</td>
</tr>
<tr>
<td>Cuts and lacerations from glass and sharp instruments</td>
<td>985</td>
<td>13.0</td>
</tr>
<tr>
<td>Collisions with inanimate objects and with other persons</td>
<td>557</td>
<td>7.5</td>
</tr>
<tr>
<td>Falling objects</td>
<td>462</td>
<td>6.2</td>
</tr>
<tr>
<td>Burns and scalds</td>
<td>314</td>
<td>4.2</td>
</tr>
<tr>
<td>Handling, lifting and carrying objects</td>
<td>311</td>
<td>4.2</td>
</tr>
<tr>
<td>Miscellaneous—assigned to 14 different classifications</td>
<td>1,398</td>
<td>18.8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>7,424</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

**FALLS**

<table>
<thead>
<tr>
<th>Situation</th>
<th>No. of accidents</th>
</tr>
</thead>
<tbody>
<tr>
<td>On stairs and steps and from other objects and elevations</td>
<td>1,633</td>
</tr>
<tr>
<td>At the floor or ground level</td>
<td>1,489</td>
</tr>
<tr>
<td>In bath tubs and shower baths</td>
<td>221</td>
</tr>
<tr>
<td>In getting in or out of bed</td>
<td>84</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3,427</strong></td>
</tr>
</tbody>
</table>

Nearly half of all home injuries are due to falls, the majority of which result from thoughtlessness and carelessness.

**Conditions Responsible for Falls**

1. Running down and upstairs. Always walk. Look at what you are doing is a good principle.
2. Neglect to use the handrail. Handrails should be provided on both sides of the stairs.
3. Not looking where you are going.
4. Torn stair coverings. Where there are children in the house, small gates should be fixed at the top and bottom of the stairs to prevent children using them until they have been trained in the proper use.
5. Highly polished stair treads and floors.
6. Greasy, wet or icy surfaces. Wet floor surfaces are dangerous, means should be taken to prevent people from being able to walk on such surfaces until they are dry. (If the floors are scrubbed with soap, the soap should be thoroughly washed off, otherwise a film of grease will remain on the floor on drying.)
7. The keeping of toys—loose objects—on steps and stairways and fire-escapes, leaving articles about, which may be tripped over. Children should be taught to keep their playthings in the place set apart for this purpose. Begin early in training them in the principle of good housekeeping, viz. A place for everything and everything in its place.
8. Inadequate lighting where electricity is available, the stair lighting can be controlled from both the top and bottom of the stairs at very little cost.
9. The use of boxes, chairs, tables, etc., to reach heights—in place of ladders. The boxes, chairs, tables, etc., not being designed for this purpose often break, slip, or tip over. The use of a good step ladder for
such purposes as hanging pictures, arranging curtains, cleaning shelves, cleaning electric light fittings, etc., assures greater safety.

10. Poorly built, poorly maintained and improperly secured ladders. Ladders must be systematically examined and treated with a white ant preservative.

11. Tripping over mats, rugs and carpets and over objects (toys, books and other matted articles) that have been left in improper places.

12. Hurrying too much when moving about the house.

13. Walking about in the dark. A torchlight or hurricane lamp should be used.

14. Slipping on fruit skins.

15. Unsafe footwear, improper heels and untied laces are frequent causes of falls. Rubber soled shoes on wet surfaces are particularly dangerous.

16. Falling in bath tubs. Rubber mats placed in bath tubs prevent slipping when bathing. Handholes on the walls also serve as convenient safeguards. Rubber mats placed in a dry bath room floor prevent slipping when stepping out of the bath on to the floor.

17. Trouser cuffs especially when the fold is high.

18. Looking out of windows and over verandahs, children should be protected against this.

19. Carrying articles on the head in preventing a 100 per cent. vision is often responsible for falls.

20. Cleaning outside windows.

Conditions Responsible for Cuts and Lacerations

(1) Broken dishes, bottles, jars and by glassware and crockery in general. Dishes often break when washing or drying them and the sharp edges and points cut the hand.

(2) The jagged edges of tin cans, sharp edges and corners on furniture and toys.

(3) Knives, scissors, razors, household tools and other sharp-edged and pointed tools cause injuries when improperly used. Children must be taught the proper use of tools. Scissors with rounded points and blunt edges will enable them to get much pleasure without risking their little fingers. Tools should only be used for the purpose they are intended, i.e. only a hammer should be used to drive a nail in, a screw-driver to place a screw in, etc. As the child develops the safe use of other tools should be taught and safe use must be insisted upon.

(4) Sawing and splitting woods.

(5) Doing home carpentry work.

(6) Cutting grass.

(7) Trimming shrubs and trees.

(8) Falls on gravel.

(9) Broken glass, cans with jagged edges, discarded razor blades and similar materials placed with ordinary household waste frequently cause serious injuries. Appropriate containers or other means for the safe disposal of such material are important.

(10) Injuries frequently result from:

(a) the use of improper, worn or makeshift tools for unintended purposes, e.g. using a knife to prise a tin open.

(b) the misuse of tools, e.g. cutting bread across the chest.

(11) Sewing materials such as pins and needles placed on or in the chairs, or furniture, unnoticed, tacks, nails, drawing pins and splinters protruding
from wood boards often cause puncture wounds which if neglected frequently become infected.

(12) Walking bare-footed, feet being cut by broken bottles, empty tins, etc.

**Collisions**

(1) Persons running against fully closed or against the edges of partly opened doors.

(2) Persons running against pieces of furniture in the home and against various objects outside the home. The angular edges of furniture, house fittings, etc., is a frequent cause of injury.

(3) Carrying objects that obstruct the view, lead to collision, e.g. the coolie with a basket on his head.

(4) Meeting of two people coming from the opposite directions at a corner, or when one person walking ahead of another suddenly stops.

(5) Walking about the house in the dark—striking matches is unsafe, use an electric torchlight.

**Falling Objects**

(1) Falls of material; snow, ice from roof, branches from trees.

(2) Falls of tools—a hammer placed on the top of a step ladder will fall if the ladder is moved.

(3) Falls of books, dishes, jars, kettles, pots, etc., off shelves.

(4) Falls of pictures, punkahs, lighting fittings owing to insecure fitting, etc.

(5) Throwing of rubbish, cigarettes, etc., from storied buildings.

**Burns and Scalds**

(1) Grasping hot cooking utensils. Carrying hot liquids carelessly.

(2) Coming in contact with hot flat irons, stove pipes, stoves, radiators, etc.

(3) Boiling over and taking fire of greases.

(4) Starting a *kerosene*, or fire with kerosene.

(5) Use of inflammable liquids, e.g. petrol for dry cleaning.

(6) Scalds from steaming kettles and saucepans.

(7) Falls of children in tubs and pails of hot water.

(8) Failure to test temperature of water in bath tubs.

(9) Playing with fire and matches.

(10) Failure to have the means (knowledge and apparatus) to put a fire out.

**Handling, Lifting and Carrying Objects**

Conditions responsible for

(1) Sprains occasioned when lifting or when moving boxes, pianos, luggage, furniture. Safe lifting must be taught. If the size of the object permits it should be lifted between the knees keeping the back straight and the heels on the floor. In lifting large or very heavy objects safely help is usually advisable.

(2) Splinters from carrying wooden articles.

(3) Carrying too many objects at one time.

**ENTRANCE TEST EXAMINATIONS**

The following extract is taken from the College of Nursing Annual Report, 1937:—

*The following resolution on the question of a standard of basic general education for entrants to the nursing profession, having been passed by the*
Council, was sent to the Minister of Health:—“That the Council of the College of Nursing are in favour of a basic standard of general education for entrants to the nursing profession, and support the intention of the General Nursing Council to set up a test examination for all candidates who do not hold a recognised school certificate.”

In connection with this the following entrance test paper from the Zenana Mission Tuberculosis Hospital, is of interest. We should be glad to hear of other hospitals conducting entrance tests, and to publish specimens of their papers.

Paper

1. Write what you know of one of the following:—
   (a) Gandhi.
   (b) Sadhu Sundar Singh.
   (c) Rabindranath Tagore.
   (d) Pandita Ramabai. 
   MARKS 30

2. Write a short essay on one of the following:—
   (a) British rule in India, its advantages and disadvantages.
   (b) Compare Indian and European customs (marriage, clothes, etc.), giving your reasons for liking or disliking each.
   (c) The Common Language of India. What is it to be? Some say Hindi. Discuss the need for a common language and give reasons for your choice of one.  
   MARKS 30

3. Use the following in sentences of your own:—
   Compare, at once, only, is it not, practice, practise, whether, prefer, at, on.
   MARKS 20

4. Translate the following passage into idiomatic English.
   (A short passage from St. Luke's Gospel was given to each candidate in her own language).
   MARKS 20

   Total ... 100

Oral

1. Conversation on simple subjects such as school, church, crops, books read, etc.  
   MARKS 36

2. Candidate to retell in her own words a short story which she knows or has read at some time or other.
   MARKS 30

3. Reading first from a simple book and then a letter written in an ordinary running hand.
   MARKS 34

   Total ... 100

Marks allotted as follows:—

<table>
<thead>
<tr>
<th>Essays</th>
<th>Spelling</th>
<th>Writing</th>
<th>Idiom</th>
<th>Grammar</th>
<th>Knowledge of subject</th>
<th>Story</th>
<th>Idiom</th>
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Total ... 30

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<tr>
<th>Sentences</th>
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<td>Replying</td>
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<tr>
<td>Accuracy</td>
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Total ... 36

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<tr>
<td></td>
<td>Letter: Comprehension</td>
<td>7</td>
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<tr>
<td></td>
<td>Expression</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Pronunciation</td>
<td>7</td>
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Total ... 34

To pass 50% in oral and written and 60% on the whole.