

PRIZE PAPER FOR JUNE.

"HOW SHOULD YOU PREPARE A PATIENT AND A ROOM IN A PRIVATE HOUSE FOR AN ABDOMINAL OPERATION?"

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This paper is written by an Indian Nurse, and translated by her from Marathi into English.

FIRST of all the nurse should mark the following points concerning the room in which the operation is to be performed. Whether the house is clean or not, whether it is well ventilated, whether the room will admit good light, and whether the room is suitable for the operation. And, if she finds the room to answer all these points, she should then commence to clean the room for the patient.

In preparing the patient for the operation, the nurse should proceed as follows :—

(i) The day the patient is to undergo the operation.—She should bathe in the morning. Having applied a little of turpentine oil and spirit to the hands the nurse should rub patient's abdomen well so as to make it clean; and further the dirt in the nails of the fingers of both hands and feet should be removed, and the abdomen should be shaved.

(ii) On the evening of the same day after applying tincture iodine to the abdomen and laying the sterilized towel on it, the abdomen should be wrapped with many-tail bandage; and the patient should be warned not to touch it. On the day previous to the operation, the patient should be given milk and congee and at 10 o'clock on the same day she should be dosed with half an ounce of castor oil. The castor oil is given during day on this ground that the patient should be put to no inconvenience and that she should be at ease during night. On the following day, she should be given the first enema at five in the morning, and four hours before the operation the patient should be given either milk or tea to drink. After this, the second enema should be operated on her, and this should be continued till her stomach is fairly cleaned. By the time this is accomplished, her hair should be combed and arranged in two plaits and she should be dressed up in clean white clothes. It is necessary to test her urine and at the same time to administer a douche to her before the operation.

(iii) THE PATIENT'S BED—Her bed should consist of a tape-cot over which is spread a clean carpet with a good bedding on it. Next a sheet should be laid over the bedding then an oil cloth should follow the sheet and lastly, the whole bed should be covered with a draw-sheet and a good warm blanket should be kept on her bed. This finishes the preparation for the patient to be operated.

(iv) The fourth point to be observed in this that, if the operation is to take place outside the Hospital, the nurse should in order to save lot of troubles, be careful to take along with her the requisite things enumerated below :—

There must be a table for the operation, a sheet to be spread over the table, a Kelly's pad to be laid on the sheet and bucket under the table. There must be a chloroform table with the following accessories on it, a clock, a mouth-gag, a tongue forceps, a chloroform bottle, a minim glass, an ounce glass, containing boiled cold water and one bowl of lotion: Carbolic 1—40 two three boiled rags, hypodermic things, hypodermic syringe, tabloid, pallet, a glass rod for mixing tabloid, Pituitrin, patient towel, ammon nitrate bottle, spittoon and chloroform cap.

THE NAMES OF THE REQUIRED INSTRUMENTS:—a sharp scalpel, a big skin scissors, lot artery forceps clamps, large retractor, handle speculum, small retractor, polypus forceps, saline glass nozzle, a glass catheter, rubber catheter, two three pairs of scissors vaulselum, long probe, five dressing instruments dissecting forceps, a director, sinus forceps, small probe, and a scissors, hot sponges, basins, good quantities of hot and cold boiled water and a needle holder. These instruments should be boiled 20 minutes or $\frac{1}{2}$ an hour.

FOR STITCHING—Pedicel needle, aneurism needle, skin needle, intestine needle, fine and thick pedicle silk, silk-worm gut, good strong catgut, and clips.

THINGS FOR THE DOCTOR—Hand lotion: Hyd: Perchlor 1—2000, soap, a Doctor towel, apron, head-tie, nail-brush, nail-clear, nail-Scissors, lysol is used for instruments. 1 dram to 1 pint Before the operation catheter should be passed and patient should be asked whether she possess artificial tooth if so it should be taken out. After the operation, the nurse's next duty is to lay down the patient in a particular position on the bed, hot bottles should be kept in contact with the hands and feet. The cot should be raised up at the feet and two small blocks should be placed under them.

MEDICAL MAGAZINE PAGE.

By MISS MACKENZIE.

SO much attention has been drawn to insects during the war that a topic which is usually ignored in polite society is now forced upon us. It is interesting to read of the bed-bug. (*British Medical Journal* September, 1914. Insects and the war—A. E. Shipley.) known scientifically as cimex. It is said to have reached England about the same time as the cockroach, 400 years ago, apparently from the East. The bug in all probability conveys plague, and has been accused also of conveying typhus, tuberculosis and relapsing fever, though this is not considered proved. Measures recommended to extirminate these pests are fumigating a house with hydrocyanic acid gas, but as this is rather dangerous, a cheaper and safer measure is fumiga-