"CONCERNING OUR ETHICS."

THE Alumnae Association of the Johns Hopkins Hospital Training School for Nurses has re-issued to the members a Code of Ethics called "The Ethics and Etiquette of Nursing." This code was first drawn up in 1896 by a committee with the late Mrs. Isabel Hampton Robb as Chairman and Miss Catherine de Long, Miss Mary Heriot and Miss Alice B. Conover as members. In issuing the code the Alumnae Association stated that:—(1) It represents the views held by the majority of its members, and is therefore binding on all. (2) It indicates the proper course to those whose moral perceptions may be insufficiently developed. (3) It may prove a safeguard against the bias of personal interests. (4) It is indispensable for the sake of reference whenever differences of opinion arise. (5) It thus contributes to the purity and dignity of the nursing profession.

The code is very concise and it is printed in a convenient booklet form with a royal blue and black cover, the well known colours of the Johns Hopkins University and Hospital. Although the code is only binding on the nurses trained at one school it makes a very safe guide to conduct for all nurses, and the committee in drawing it up looked forward to the formation of State and national associations in the near future, and endeavoured to so formulate the code that the members would not be compelled to make any radical changes in it when having to conform to a national code of ethics. These State Associations and Government registration are now existing in most of the North American States and in other countries, with a corresponding rise in the ethics and status of the nursing profession. The work of the physician and of the trained nurse having so much in common, it of necessity follows that their laws of ethics must also be similar, and the committee carefully studied the national code of medical ethics and Dr. Flint's commentaries on it, and they also acknowledge their debt to the Illinois Training School of Chicago.

The code is divided into two parts. Part I, consisting of a series of seven "duties" each divided into sections, and Part II is the Rules of Etiquette. The duties are commandments, though the word "should" is used in place of the Mosaic "shall". They allow of no exceptions and turning to the right hand or to the left is strictly forbidden. Not only are the nurses' duties considered, but those of the physician to the nurse and the public to the nurse also. But these are not what they might at first be thought to be, for the doctor is not enjoined to behave in a kind and gentlemanly manner, but to give a competent and trustworthy
nurse his loyalty and support; to refrain from correcting her in the
presence of the patient or of members of the family; to suggest, when
necessary, that the nurse receives the proper amount of rest and relief
from her duties, and to interest himself in seeing that justice is done
where the nurse has difficulty in getting her proper remuneration.
Again the public are not instructed to be kind to the nurse, and to give
her as good a time as possible, but to "entertain a just appreciation of
the qualifications necessary for those who undertake the responsibility of
nursing the sick; they should discriminate between the legitimate claims
of the scientific nurse and the assumptions of ignorant women; they
should encourage and assist by all the means in their power the higher
development of schools for nurses in order that the nursing throughout
the country may be more uniform and reliable." The public have
undoubtedly a great deal to learn along these lines, especially in countries
where registration is not yet the law.

The remaining five articles deal with the duties of the nurse to the
physician, the patient, the nurse's own training school, to other nurses
and the public. Some of the sections apply more especially to nurses
working in institutions and others to private nursing, but looked at as a
whole they are a detachment of the Golden Rule, as all codes of ethics
must be. The nurse must strictly carry out the orders of the physician;
never discuss him with a patient or patient's friends. She must never
express a preference for the services of any physician, and she should
always accord to the physician the respect and consideration due to his
higher professional position. In dealing with sister nurses, she is to
avoid adverse criticism, especially to doctors and patients, unless she
knows the nurse to be unreliable and is called upon to express an opinion
when the question of engaging such a nurse is involved; and section 2
of this article says that "the unity and dignity of the nursing profession
demand that members of one school cultivate a courteous recognition of
all other schools in good standing, of their work and of their graduates".
In article 3, the nurse is told that by her own personal conduct and by
the high character of her professional work she can best honor her own
training school, and she is further told that it is her duty to be loyal to
her school, to avoid adverse criticism of its management and to join its
societies and interest the public in her school and profession. Article 5,
which deals with the duty of the nurse to the public, is important, for it
opens out a wider field of usefulness than is to be found in the hospital
and in private work only. The nurse is to take an active interest in
the welfare of the community in which she lives and to be on the alert
whenever it lies in her power to assist in furthering public hygienic
CONCERNING OUR ETHICS

conditions. She should be willing to give a certain proportion of her
time during the year to working for the sick poor through the medium
of district nursing associations. She is always to set an example by
carrying out strictly all measures for the prevention of epidemic and
infectious diseases, and induce others to follow her example; and lastly
she is to be ready to continue her work and face dangers, even at the
jeopardy of her own life, in the case of an epidemic.

The longest and perhaps the most important article deals with the
duty of the nurse to the patient. It is as follows and needs no
comment:

"Sec. 1.—Except on substantial grounds a nurse should never
refuse a call to a sick person. She should never allow her personal
inclination or her personal pleasure to interfere with this duty. It is
equally binding upon her as upon a physician to go when summoned.

"Sec. 2.—She should be deeply conscious of the grave responsibility
of her position, and in no case should she be guilty of carelessness
or neglect of any duty that skill, attention or fidelity upon her part
should bestow.

"Sec. 3.—Every patient committed to the care of a nurse should
be treated with attention, steadiness and humanity. Although proper
firmness is necessary, it should never be allowed to degenerate into
severity, and reasonable indulgence should be granted to the caprices
of the sick, more especially to those whose mental powers are affected.
Too great intimacy between the patient and the nurse is not to be
encouraged, but the confidential intercourse to which nurses are admit-
ted should be used with the utmost discretion and with the most
scrupulous regard to fidelity and honour. The obligation of secrecy
extends beyond the period of professional services; none of the privacies
of personal and domestic life, no infirmity of disposition or flaw of
character, observed during professional services, should ever be divulged
by the nurse, unless circumstances arise which render such a course
an imperative duty. The same rule holds good also with respect to the
patient’s ailments. Patients and their affairs should never be made the
subject for conversation or discussion between nurses; silence is even
more binding upon the nurse than upon the physician, as the oppor-
tunities of the former for knowing the patient’s affairs are often greater
than those of the latter.

"Sec. 4.—A nurse should not leave a patient on account of her
own private affairs or because her position is rendered disagreeable to
her through the friends or the physician, unless she is assured that her
presence is displeasing to the patient. When it is absolutely necessary
for her to leave, she should be willing to remain till some competent nurse has been found to take her place.

Sec. 5.—Engagements whether written or verbal should always be regarded as legal contracts. The rescinding by a nurse of such a contract is only justifiable in the face of unavoidable emergencies, or when the maintenance of self-respect is clearly involved."

Part II. of the book, dealing with the subject of nursing etiquette, is short. After saying that it is absolutely necessary for a successful practice that the nurse should cultivate tact, it is laid down that when a nurse is called to an urgent case because the proper nurse was not at hand, unless her services are also required she should resign in favour of the other immediately upon her arrival. This also holds good if a nurse is called to a patient of another nurse because the latter nurse is ill or absent, of course with the consent of the patient. When two or more nurses are called to the same case the nurse who has the case first should be considered the "head nurse" the others taking orders from her and passing to her all orders received from the doctor. If later on only one nurse is required, the "head nurse" should be the one to stay. When two nurses are on a case they should never discuss the orders received and the method of carrying them out before the doctor or any member of the patient's family.

The closing paragraph of the code refers to the matter of remuneration and the committee recommended that to obviate the necessity of questions, explanations and discussions, which are often embarrassing and disagreeable to the nurse, a uniform fee should be decided upon by the Association of the Alumnae and adhered to as closely as varying circumstances would permit. Probably an amount in excess of the uniform fee would never be asked for, but in many instances it would be necessary for a nurse to reduce her fee for patients who could not well afford to pay the full amount.

E. B. K.

REVIEWS.

A BOOK called the "Common Growth" written by M. E. Loane is a very well written book, which should interest many Nurses. The authoress is evidently one who moves and works among the poor. She shows up their weak points and their subterfuges, yet with it all she is kindly and sympathetic in her writings. She has the gift of seeing the funny side of things, and is able to describe them well. Despite her sad and squalid experiences among the poor Miss Loane has never lost faith in human nature, or in its capacity for improvement. We would