them, otherwise it may prevent their settling down and encouraging others to take it up.

The women of India are more and more coming to the front, they are proving themselves able to teach and as they grow older, they are often able to organize and play, and carry on a large amount of valuable work. Education, with all its wonderful possibilities, appeals to our growing Indian girls, and we rejoice, for we need all the teachers we can get. Some have gone yet a step further and are seeing the glory, and finding their happiness, in a life lived to bring to their Moslem and Hindu sisters the Gospel message, which has transformed their own lives, and for them we are full of thankfulness, but I believe as yet the life of self-sacrifice—the sacrifice of self for the sake of the sick and suffering—has been but little considered.

It will not appeal to all, for many are the gifts, and varied the paths of service for our Christian sisters, but surely there are some in this land, who would find in it their way of following the Master!

It will not be easy work for those who first take this step, and it may be that we, who often have to guide and help in choosing a sphere for those under our influence, are too severe, and lack the right enthusiasm ourselves, but I believe, when the call comes direct to a refined Indian girl to take this difficult step—to sacrifice herself—to dedicate her life to the nursing of the sick and suffering—she will be able to overcome all the temptations, and she will find a sphere of joy and of usefulness before her, such as she has hitherto never imagined to be possible.

INFECTION.
ITS CAUSES, ITS MODES OF TRANSMISSION AND ITS PREVENTION.

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(Concluded from page 166).

INSTRUCTIONS TO NURSES FOR THE PREVENTION OF INFECTION AND THE PROPAGATION OF ENTERIC FEVER, IN "Dr. Masina's Hospital."

The nurses are requested to carry out the following instructions whenever a case of Enteric Fever is admitted into the Hospital.

1. Patient should be at once isolated from the other patients in a ward, in a separate room allotted for the purpose, as soon as the diagnosis of Enteric Fever is made,
(2) The room should be well ventilated; windows should be kept partly open, taking care at the same time to prevent draughts coming on to the patient's body; a good amount of sunlight must be allowed to penetrate into the room during the greater part of the day where practicable.

(3) The door of the room should be kept closed or completely screened by a sheet sprinkled with Carbolic Acid to prevent the conveyance of infection through the medium of flies.

(4) The floor of the room should be sprinkled daily with some disinfectant fluid like Carbolic Acid 1 in 20 or H. P. lotion 1 in 500.

(5) There should be no articles of furniture in the room except one iron cot for the patient, one small cupboard, one marble table, one iron chair and one stand for hanging napkins and towels: there should not be any bed curtains or hangings in the room.

(6) There should be one bucket containing disinfectant fluid like H. P. 1 in 1000 or Carbolic lotion 1 in 20 placed in one corner of the room for dipping all the soiled linen, drawsheets, etc., before they are removed from the room for washing.

(7) There must be a basin placed on an iron stand containing Carbolic Lotion 1 in 40 for washing the hands, etc.

(8) There should not be more than one or two nurses in attendance, they should remain with the patient and under no circumstances must they mix with the other nurses or visitors or nurse other patients in the ward, but if compelled to do so in case of emergency, they can, after taking proper precautions by washing their hands first with soap and water and then with Carbolic Lotion 1 in 40 before they attend the other patients in the wards.

(9) All the utensils used by the patient such as cups, glasses, spoons, bowls, saucers, etc., must be kept there for the exclusive use of the patient himself or herself and must on no account be used for other patients in the wards. They should be of some coloured material or otherwise identified so as to distinguish them from the utensils used by other patients in the wards. They must be cleaned first with disinfectant fluids like Condy’s fluid or Carbolic 1 in 20 and then with hot water every time after use.

(10) Bed Pans for the foeces, bottles for the urine and spittoons for the various discharges like vomit, sputum, etc., must be quite separate and under no circumstances be used for the other patients in the wards. They must be marked I.D. (Infectious disease) with red paint so as to distinguish them from the other ones used in the wards.

(11) Every thing that passes from the patient, foeces, urine, vomit, sputnum, etc., should be received into vessels containing Carbolic Lotion
1 in 20 and an additional quantity of it may be added to the discharge passed by the patient and the vessel covered up and left for at least fifteen minutes to half an hour to allow the disinfectant fluid to act before it is emptied into the water closet.

(12) The disposal of this excreta must be done by the medical under the supervision of the nurse and the attention of the nurse is especially directed to see that the seats of the water-closets are not being splashed by the discharges which are thrown into them.

(13) The water closets must afterwards be well flushed with water or the excreta and other discharge may be mixed with ash or sawdust and burnt in an incinerator.

(14) The patient’s person and bed should be kept scrupulously clean and all the bed and body linen, drapsheets, etc., after use should be first put into the bucket of disinfectant solution placed in one corner of the room and allowed to remain in it at least 6 hours before they are removed from the room for washing.

(15) Small pieces of gauze should be used for wiping the discharges from the nose and mouth and no towels or napkins are to be used for these purposes. They, after being thrown into a spittoon containing H. P. I. in 1000 should be sent out to be burnt in an incinerator placed outside the premises.

(16) Nurses in attendance should avoid as far as possible inhaling the patient’s breath or other emanations from his person or discharges, as the air of the sick room occupied by an Enteric Fever patient may possibly be the means of transmitting infection to persons long present in the room if the cleanliness and ventilation of the room are not attended to.

(17) Visitors, any other patients in the wards, ward boys, humals, etc., must under no circumstances be allowed to step into the patient’s room; one near relative of the patient only may be allowed after the sanction of the P. M. O. If that patient’s relative is very particular about contact with the patient; and he or she too must be thoroughly instructed not to mingle with any of the members of the staff or other patients in the wards.

(18) Nurses in attendance must always make it a rule to wash their hands thoroughly twice or thrice with soap and water and then with disinfectant solution before taking their meals, and they must give the same instruction to the relative of the patient in attendance, as several nurses in attendance on Enteric patients are reported to have become infected by taking their meals with infected hands.

(19) After the death or discharge of the patient from the Hospital the room together with the contained furniture must be thoroughly cleaned and disinfected.