

The Trained Nurse.

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	453 Page
Introduction	1
History of the beginning of Nursing	1-3
Efforts in France	1
German Schools	2
English Schools — Florence Nightingale	2-3
American Training Schools	4-9
Founding	4
Need	4-5
Qualifications of Applicants	5-7
The School	7-9
The Fully Trained Nurse	9-13
Classes	9
Nurse among Poor	9-10
Hospital Nurse	10-12
Private Nurse	12-13
The Sickroom	13-14
Situation.	13
Furnishing	13-14
Ventilation	14
The Three fold Duties of a Nurse	14-15
Duty to Herself	14
Duty to Doctor	15-
Duty to Patient	15-
Conclusion	16

"I have long been of the opinion that there should be in all the principal towns and cities of this Union, institutions for the education of men and women whose duty it is to take care of the sick and to carry out the injunctions of the medical attendant. Millions of human beings perish annually in this so-called civilized world for want of good nursing." So spoke Dr. Gross, his opinion having been formed, not hastily, but after years of careful experience.

This is the universal opinion of the medical world of today; but back in the second century, where first we hear of hospitals, no such thing as nursing was known. Under the pall of mythology and superstition, where all disease was but the wrath of the gods, serious sickness nearly always meant death.

The first account we have of nurses is during the Crusades, when Guy of Montpelier, France, established a hospital for nursing and aiding the poor. We cannot rightly call this a training school, except as they were trained by experience — doubtless our modern schools would look at the effort in disdain — yet it may be marked as the first recorded effort in that direction for humanity.

But as time moves on to our present century, Germany, who established schools over sixty years ago, seems to have given nursing more attention than has any other country, - this being shown by her advancement over the others. In 1853, Florence Nightingale, an English girl, destined in after years, to be the greatest nurse in history, went over to Germany to study in one of its far-famed training schools.

At this date - the grandest nurse in the world, a short sketch of her life and work will but advance our subject. Born in England in 1822, at a time when such branches were but little noticed, from childhood she showed a desire to nurse and care for sick and wounded creatures. Being a very studious girl, as she grew older she eagerly studied all books pertaining to the subject that she could obtain. In 1853, having mastered all that English schools could teach her, she, as above stated, went to Germany, and there entered an institution of Protestant Sisters of Mercy at Kaiserswerth, at that time considered an excellent training school for nurses. On her return home, Miss Nightingale devoted herself

to the reorganization of the English schools of nursing. It is now a curious fact that the German schools at Berlin are modeled upon English lines, so greatly has the work been perfected. It was while working on her plans of reorganization, that Miss Nightingale was chosen to organize the hospital system of the English army in Crimea. Sent to her government as nurse-in-chief, she arrived in Crimea with her staff of nurses, to find hundreds sick and many dying. At once she set to work, ~~and~~ made the filthy huts clean and almost comfortable, and moved around among the hundreds sick as an angel of mercy. 'Tis said that the sick would kiss her shadow as she passed, so dearly was she loved. She returned home at the end of that campaign, famous the world over, but with broken health, which she has never recovered. Her time since has been devoted to writing books upon Nursing, Sanitation and Medicine, which are almost invaluable.

If there can be said to be an object to a thesis, the object of this one is to so picture this new profession which is opening so invitingly to women, that it may seem what it

really is, — a healthful, bright, useful, not overcrowded occupation, and one which seems especially fitted for woman's tender ministering. The life of Florence Nightingale is a continual inspiration and help, as she is known as the founder of the modern school of nursing. A

Though much needed before, not until 1873 was a training school founded in America. Bellevue Training School, connected with Bellevue Hospital, and the Massachusetts Training School were the first two to be established.

The necessity of having trained nurses was first brought into prominence by the annoyance caused by the blunders and awkwardness of the amateurs. But a prejudice against the training of nurses, at the very beginning of this advance, was held by some of the medical profession, who feared that nursing as a profession would encroach upon their own province; that if women were taught to know one drug from another, they would immediately proceed to the practice of medicine on their own account. It may be truthfully said that this feeling is now dying out, as doctors come

to see the vast difference between the trained and the untrained nurse. "It is only those who had no formal instruction as to their duty, its extent and limits" who are guilty of overstepping its bounds, while those who are taught may be known by their unshrinking obedience to the doctor's orders. "It is those who have picked up certain facts in a haphazard way regarding certain sicknesses who are sure to act upon this information. The trouble with this class is not that they know too much but that they know too little." The question still remains, "Is it not better to teach systematically the information needed than to allow persons to pick up and use information empirically?"

Let us present a person for admission to a nurse's training school. What must be her credentials? She must be of perfect health, from twenty to forty years of age, good-tempered, strong-willed, have great power of endurance, good common sense, a good common school education, and be of good reputation. Good reputation is placed last among the requirements, but it is by no means least. The applicant must bring good references

and a number of addresses to which the Superintendent may write if he so desired. One great advantage in training schools lies in the fact that no one, unless from the better class, will raise to higher ambitions, spend money and two years of their lives in learning theoretically and practically, the art of relieving the sick, taking great responsibility, and obeying orders intelligently and minutely." Thus the schools are free from the inferior class. It must not be supposed that a woman with more than a common school education is wasted in this occupation. Indeed, the more refined, learned and truly gentle a nurse may be, the greater her influence and aid. One of the greatest advantages that a nurse may possess, is the habit of correct observation and accurate statement. So much in sickness depends upon this, and many a would-be nurse summingly cannot be taught this essential, because of careless habits formed in early life.

Nursing, not long left to the poorer, degraded classes, it being considered disgraceful to do hospital work. Criminals, women of the lowest classes, no matter about capability,

were given the hospital nursing, "Daisy Gamp": the character used in "Martin Chuzzlewit," a professional nurse - may seem but the overdrawn creation of the novelist. But the character is true to life, a representation of the nursing class of that time. Is it any wonder that training schools insist upon spotless reputation and a higher class?

A training school for nurses should be established with a charter from the state, a constitution which should provide for the officers and their duties, time and manner of selection and length of service. Much like any other organization it must have a board of trustees, consisting, in most schools, of twelve members. A

A fully equipped training school should consist of the Nurses' Home, the School, and the Hospital with which it is connected. The Home is the one point wherein English and American schools differ. Miss Nightingale, who is authority for all English schools, holds that a nurse, in order to be best equipped, should remain in the school at all times. That is, that a nurse should have here assigned cot in the hospital, have her regular hours for duty and her regular hours for rest, but be practically a fully fledged nurse through all her two years course. But

American women are highly sensitive, and it has been found best to have a home in connection with the school where she may throw off the cares of school duties and truly rest. It is believed by many that one reason for the exceptionally good health of the nurses in training is due to the restfulness and peace derived from the homes. Under the watchful eye of a matron, certain rules must be kept, regular hours are enforced, and peace and quiet prevail.

The careful selection of teachers is the most important step in the establishing of a nursing school. Good physicians are essential. The teaching both theoretical and practical is imparted by lectures and by actual attention to patients in the hospital. But few text-books are used, the course comprising the following subjects - Anatomy, Physiology, Hygiene, Dietetics, Medicines, Medical Nursing and Surgical Nursing.

The practical training consists in dressing wounds, applying fomentations, bathing and care of the helpless patients, making of beds and managing positions. Then follows the preparation and application of bandages, making of rollers and lining of splints. The nurse must learn how to prepare, cook and serve delicacies for invalids.

Instruction is given in the best method of ventilating and warming a sickroom. Exemplary deportment, patience, industry and obedience are required.

In order that there may be no difference between the rich and the poor students, all receive for their services a certain amount of money per month, and all must dress in the costume prescribed by the institution. The payment is not much, - between ten and fourteen dollars per month - but it is sufficient to buy the clothes and all necessities for the nurse. The costume is generally of some soft wash goods, made simply and neatly, while with it goes the white apron and cap. Very lonely becomes this simple dress to the eyes of many a sufferer, as it weaves morn from cot to cot on her errands of love.

But the two years course ends all too soon, and the nurse receives her certificate of work well done, and steps out to do good unto her fellow-beings.

Nurses are of two classes, - those who study with a view to gaining a livelihood by their profession, and those who look forward to a life devoted to the sick among the poor.

The value of the services done by nurses among the poor cannot be estimated. London and New York can point proudly to women who have given up home

and friends to work for their unfortunates brothers and sisters. From morning until night they endure cold, storm, heat and fatigue, and what is even worse, - gruff words and ingratitude from those for whom they labor so faithfully. In many a destitute home, there is not only the care of the sick, but the nurse may be called upon to cook, sweep, clean, do the washing - indeed do everything a woman can do for those in need. And her pay? The deep satisfaction that comes to that heart who has helped the fallen and is following in the footsteps of the great Nurse and Teacher.

Of those to whom nursing is a means of obtaining a livelihood, many are called to superintend State and City hospitals, while a continually increasing number go into private practice.

Whatever field she may take, it is a nurse's duty to ^{always} do her very best, for not only is her own reputation as a nurse at stake, but also the reputation of the school, whose representative she is before the world.

Upon a nurse who chooses the hospital for her field, there does not rest that degree of responsibility, that rests upon the one who chooses private nursing. The physician is always present at the hospital, and it is the nurse's duty to carry out his orders perfectly. If she be head-nurse, she is directly the physician's right hand,

to her he gives instructions concerning every patient in that ward. She has no direct nursing to do herself, but she must see to it that each assistant under her care has her instructions and obeys them. Military discipline should prevail, and implicit, unquestioning obedience be the first law for the nurse as well as for the soldier. The physician is the commanding officer, - the nurse-in-chief is merely the one to carry out his orders, being commanding officer to the assistants. The ward work must be so arranged that when the time comes for the staff of physicians to make the rounds, all the nurses may be ready to assist them. When they enter the ward, the head nurse should precede them, arranging the patients as may be needed for the doctor's examination. Oftentimes clothing or bandages must be removed, screens placed around, etc. While the doctors make their examination, she should stand quietly by, or assist if need be - being careful to note down all instructions. When one patient has been examined, proceed at once to the second, and so on, leaving the assistant to arrange everything as it should be. When the staff has gone, the chief should carefully give to each attendant her instructions, and see that all things are carried out as directed.

By careful arrangement, hospital work may be made into a cheerful routine, with

certain hours for rest, and others for duty. That all the patients have fresh air, clean skin, clean clothes, wholesome food and pleasant surroundings is a nurse's important duty.

But in many ways the private nurse, though under greater responsibility, has much the broader life. Her salary is much larger, not being regulated by a fixed rule, and she must exercise her own judgment, and develop her own individuality. Indeed, we find it often the case that the nurse who makes a splendid ward manager, because of its regular established routine, will be a failure as a private nurse, because of her lack of tact and adaptability.

She who enters a private home, has many difficulties to contend with. First and foremost, she must contend with the feeling, prevalent in many homes, that a stranger can never do as well by their sick one as they could do themselves. Thus the nurse must strive to gain the confidence and love of the household, as well as of the patient. That nurse who can enter a family with her way into their confidence, and make them feel the least disturbed, is indeed a nurse of tact.

The first consideration on entering a house, in connection with the patient, is the sick-room. If the room in which the patient lies is not satisfactory,

The nurse should prevail upon the family to allow her a choice. The sickroom should be large, bright and cheerful, on the sunny side of the house and have plenty of windows. Only in exceptional cases, such as inflammation of the eyes or of the brain, should light be excluded.

The sickroom should be as far as possible from the street, in order to be kept quiet. If however the room cannot be both quiet and sunny, unless in case of a nervous disease, choose the sunny room, remembering that noises that are understood are much less annoying than sharp or rasping sudden sounds. Never have creaking shoes or whispering in or near the room, as a low, subdued tone is much less annoying. If possible have the room above the patient vacant, as houses will surely vibrate with the walking overhead. If it is not possible, however, it is often better to remove the patient up stairs in spite of the hard work it makes for the nurse.

In studying the furnishing of a sickroom, it is found that if the disease is not contagious, it is unnecessary to remove the carpets from the room, unless desired by the owner. Indeed, although we often hear that every thing should be taken from the room, except essentials, it is not necessary, unless as stated above, in case of contagious. Often when the

case is a nervous disease, a long, wasting fever, a wound or a broken limb, the bareness of the room would be an actual depression to the overwrought nerves of the patient. As with the hospital patient, so it is with this patient, absolute cleanliness is essential. But a damp cloth will remove every particle of dust, and by careful attention, the air be just as clean as in a bare room.

The best possible arrangement for ventilation is an open fireplace and an open window. If no fire is desired, a lamp burning at the mouth of the chimney will create a draught. By carefully arranging a screen, the air can be kept from striking the patient, and the window may safely be left open day and night.

When entering upon the care of a person, his welfare is to be a nurse's highest consideration. The duties she owes, however, are threefold;—those she owes to herself, those she owes to the physician and those she owes to the patient. A nurse may give up her pleasure, her convenience, but she has no right to risk her health. "Self-sacrifice is not all unselfishness." A nurse must take out door exercise each day, must take the utmost care in her bathing, her food, and indeed in all things pertaining to her health, in order that she may do her best by her patient.

To her doctor, a nurse owes faithfulness in directions, loyalty, hearty co-operation and absolute truth.

To the patient, the nurse owes her attention. She must be quietly, unobtrusively watchful and anticipate his wants. There is a great advantage in the nurse gaining the confidence of her patient. With her calm will, her quiet sympathetic manner, she may steal away much of the patient's annoyance by listening to his troubles and sorrows. There is nothing more important than a quiet mind in a patient. In everything a nurse should be methodical, but not mechanical, and should put feeling and earnestness into her work, remembering always that in Nature there is a constant tendency toward reparation. It is the nurse's business to help Nature by keeping the patient in the state most favorable for this reparative action. It is known beyond a doubt that those who best know this and who best understand Nature's processes, make the best nurses." For in many cases, recovery depends more upon the nurse than upon medical skill.

The patient's family find the nurse a great relief to their anxiety and a trustworthy sharer in their toil; while the physician finds an intelligent and competent assistant who understands what should be done without wearisome instructions, who can be

who can be depended on to keep an accurate record of symptoms, and from whom he receives the respect and obedience that is his due, and which her education has taught her to give."

One prejudice to be overcome is a tendency among many to look upon the nurse as rather a head servant. ~~It~~ This tendency seems to be dying out, and it remains for the nurse, by her training and true inner self to overcome it entirely.

A quotation from Clara Weeks is very appropriate; "The ideal nurse, the one worthy of her high calling, is inspired by love, not policy, and her sympathies are broad and universal. Such as bear this fundamental law in their hearts need not the reminder that 'Love never faileth.'"

There are women all over our land, cultured and refined, who are looking for an occupation. Why do they not look at this field of usefulness such as is nowhere else afforded?

Any woman who desires to be really of use to her fellow-creatures, and to adopt an employment of absorbing interest, honorable and remunerative, can do no better than train herself for a nurse."

Ethel F. Patton