

use with admirable results, and we are thus in the happy position of having had our experiments made for us and being able to avail ourselves, if we will, of the experience of others.

DIFFICULTIES WITH THE HOME AND PARENTS.

There are sometimes difficulties with the home and with the parents. Some parents need to be civilised. Some undo at home a large part of the good that children get at school. Some act as a dead weight on every proposal for the child's welfare. Some forget or neglect to carry out efficiently what they have actually promised to do in order that the child's physical wants and defects may be attended to. Here the School Nurse is again indispensable. She forms the connecting link between the home and the school on the one side and the home and the hospital or other medical agency on the other. She shows the overburdened mother how to nurse the sick child, or dress the sore finger, or dispense with the presence of certain well-known fauna on the children's heads. She enables the child to stay at school or to get back to school in the shortest possible time. In New York, in 1902, before the advent of the School Nurse, the School Medical Officers sent home 10,000 children. In 1903, after the advent of the School Nurse, they sent home only 1,100 children.

FREQUENCY AND SCOPE OF INSPECTION.

Another question which arises is—Should every child be inspected? and if so, how often?

The regulations adopted by the Board of Education, (England), Circular 576, contemplate that every child shall be inspected (1) on admission; (2) about the 3rd year of school-life, (3) about the sixth year of school-life and, if possible, (4) before the child leaves school.

Certainly the first may be taken for granted, if we are to have medical inspection at all, and the parent and School Nurse should both be present, if possible, and lend their aid. The other three inspections are also of great importance, and in addition, it is obvious from what has been already said, that the School Nurse and school doctor should always be in close touch with the school. Probably one or both of them, in the case of some of our schools at least, should pay the school a daily visit.

It is also necessary that some room be provided where the School Medical Officer and School Nurse may work.

Medical inspection should take account of the child's height, weight, development and general physical condition. It should especially observe and record the condition of the "organs of education," (the eye, the ear,