

Operating Room.

Doors should open to foot pressure; floors be free from cracks; windows be shaded by blinds running from a roller at the bottom of the window, to avoid shaking down dust; water taps should work by foot pressure; There should be no unnecessary fixtures or furniture or shelving to accumulate dust or be in the way. The operating room should be well aired and flushed with sunlight when not in use. No minor septic cases should be operated on therein nor any surgical dressings be done. Except when unavoidable no aseptic case should follow a septic case for operation until the room has been fumigated with formaldehyde gas after it and the furniture have been scrubbed with bichloride (for fumigation purposes the room and furniture should be left moist with bichloride and kept warm as formaline works best thus.) It should be always ready at a moment's notice for emergency work and the responsibility for its care and management rests with the head surgical nurse.

Furniture.

Operating Table with Mayo's instrument tray attached.

Anaesthetist's Table on which are placed Aether, Chloroform, Sterile Chloroform Cone (covered with 8 ply of fresh gauze), 4 gauzes about 6 by 8, 4 towels, mouth gag, tongue forceps, and a hypodermic syringe containing strychnine 1-20 grain.

Table for gauzes, ligatures, dressings, drainage tubes and a basin of normal salt solution for gauzes.

Table for bottles containing Harrington's Solution, 70% alcohol and warm sterile salt solution to be used as a clyster in case of shock or haemorrhage.

No basin stands (if taps work by foot pressure; otherwise one stand for two basins of sterile water to be so placed that both surgeon and assistant have easy access to one basin each).

A Scanlon Morris Sterilizer for dressings, instruments and hot water.