

SOME PEDIATRICAL DON'TS.

By W. Newman Dorland, Philadelphia.

Don't fail, when called to a case, to acquire as complete a history of the illness from the nurse or mother as is possible *before* proceeding to an examination of the child.

Don't fall into the habit of ascribing the mother's fears and anxieties to an hysterical tendency which it is your duty to ignore. Listen to her, and profit by her suggestions.

Don't be cross or cross-looking while in any sick-room, and especially in that of a child.

Don't indulge in any sudden or violent movements while examining infants. Undue fright will thus be avoided.

Don't percuss the anterior surface of the chest first. Always commence with the back.

Don't forget that the respiratory sounds, especially the inspiratory, are normally full and harsh in childhood. Hence the term "puerile" respiration.

Don't expect to find the consolidation of phthisis in one or the other apex as in the adult. Very frequently it is found in other portions of the lung.

Don't make a diagnosis of pulmonary cavity from the presence of the "cracked pot sound" in children. This sound may be elicited in pleurisy and pneumonia as well.

Don't confound a pneumonia in its initial stage with a meningitis. The nervous manifestations of the former are quite pronounced, but the temperature chart will be the guide.

Don't take the temperature of a child in the axilla. The tissues here are usually very small and cannot sufficiently cover the bulb of the thermometer to secure accuracy of registration. The rectum is better.

Don't fail to examine into the condition of the *thoracic* viscera whenever the child complains violently of pain in its abdomen.

Don't forget that tubercular peritonitis in the child is frequently unattended with any pain or tenderness.

Don't forget that tubercular disease of the peritoneum and mesenteric glands is a frequent occurrence in early childhood and is usually indicated by great prominence of the abdomen.

Don't forget that the liver is relatively large in young children, and prominent below the ribs, even when there is no diseased condition present.

Don't fall into the popular habit of ascribing all of the complaints of the early months of infancy to teething. Teething is a physiological, not a pathological process.

Don't diagnose the presence of intestinal parasites until one or more of the worms have been seen.

Don't fail to administer a purge of castor oil on the first appearance of greenish-colored stools.

Especially do this if the season be hot and sultry.

Don't fail to suspect the onset of some grave disorder—scarlatina, pneumonia or meningitis—whenever there is persistent vomiting.

Don't wean a child suddenly, unless such a course is made necessary by a sudden failure of the milk, or by sickness in the mother.

Don't permit a woman suffering from grave constitutional disease—tuberculosis or syphilis—to nurse her child.

Don't permit a woman who has become pregnant to continue nursing her infant.

Don't wean a child until after the twelfth month, if possible to avoid doing so.

Don't permit a child to nurse from the breast after the eighteenth month.

Don't wean a child during the summer season, unless absolutely unavoidable.

Don't give a baby which must be raised artificially food preparations containing starch or its derivatives, glucose and dextrine.

Don't fail to thoroughly sterilize the milk used in the preparation of foods for infants.

Don't fail to enforce a general rule for the feeding intervals. All danger from over or under-feeding will thus be avoided.

Don't permit the bottle, which should be very simple in its form, to become in the slightest degree unclean. Fermentation with its disastrous effects may thus be avoided.

Don't permit the baby to sleep with the nipple in its mouth.

Don't permit the milk to stand in the bottle. Throw what remains away after each feeding.

Don't fail to thoroughly scald the nipple, tube, and bottle after each feeding, and keep them in a solution of soda until the next using.

Don't give the baby the bottle to soothe the crying or fretfulness of temper. Such a proceeding is always harmful.

Don't fail to inquire thoroughly into the physical and moral qualifications of the wet-nurse, should one be required.

Don't prescribe a drug when a little attention to the diet or hygiene will do better.

Don't forget that infants are liable to take cold easily, owing to the relatives feebleness of the heart and circulation. Proper wraps should, therefore, be provided, and ventilation secured without exposure.

Don't be alarmed at great rapidity of the pulse. Any undue excitement or prolonged crying, or any slight febrile excitation will give rise to a pulse out of all proportion to the gravity of the general condition. A rapid pulse during sleep, however, is of more grave significance.

Don't forget that heart stimulants are well borne in children in relatively large doses.

Don't forget that opiates are poorly borne in children.

Don't limit the supply of fresh air and sun-