

remain in a training school; now many of the hospitals are demanding three years of their time before they consider them sufficiently trained to enter upon private practice. Therefore, if this scheme be carried out, we fear that if a nurse with one year's training is good enough to nurse some people she may be considered good enough to nurse all the people.

These are the main schemes which have been propounded to relieve a condition of affairs which actually amounts to a hardship. The first scheme, that of the "Visiting Nurse," seems to more nearly suit the requirements of the case than the others. That so much thought and energy should be expended to relieve the necessities of suffering humanity, as is evinced by the very multiplicity of schemes, is a satisfactory and gratifying proof of the growth of true charity in our midst.

---

### THE CASE OF DR. CULLINGWORTH.

In connection with the above, this *cause célèbre* may be mentioned, for the chief actor in it was a trained nurse. The facts of the case are briefly as follows: The nurse came under Dr. Cullingworth's care for a condition which apparently necessitated the removal of the uterine appendages on one and possibly on both sides. The patient declined to give consent to the complete operation and the doctor declined to operate unless given full permission to deal with the case as seemed best after the abdomen was opened. Finally a relative of the patient told the operator that the patient had given consent and thereupon the operation was performed, both sides being operated upon. Throughout the case there was never any question about the advisability of the course pursued during the operation, the whole question being whether the patient had given her consent or not. The patient brought suit against the doctor alleging that she underwent the operation on the distinct understanding that only one side was to be operated upon. The case came up for trial and was won by Dr. Cullingworth and being appealed it was decided again in his favour. The judge gave as his opinion that the operation had been performed in good faith and under such circumstances it would be unjust to condemn the operator for completing an operation when by so doing he could cure the patient, whereas a partial operation meant certain failure. The verdict was received with general satisfaction and Dr. Cullingworth was heartily congratulated on all hands at the happy termination of a most annoying piece of business. In all such cases it is undoubtedly wiser to have a very clear understanding with the patient herself and that in the presence of witnesses. It evidently