

a thin partition, are even more annoying to an invalid, than noises in his own room; for he can see the cause of the one, but not of the other, which therefore works on his imagination to a painful degree.

The next step is to clean and furnish the selected room. It is common knowledge now that oil-painted (or varnished paper) walls and stained floors are the most healthy arrangements for bedrooms at all times, in cottage or in mansion. Where this knowledge is acted upon, the work of preparing a sick-room is lessened, and the chances of its inmate's recovery increased. Carpets, hangings of all kinds, large pieces of furniture, and the contents of any cupboards there may be, must be banished. These things harbour dust and disease germs, besides occupying valuable air space. The walls must then be carefully dusted from top to bottom; all the woodwork, including the ledges over the doors and windows and the interstices of the skirting-board, must be wiped with a cloth wrung out of hot water mixed with Condry's Fluid or Sanitas. If the patient is to come in at once, the floor must not be scrubbed, but rubbed, well and hard, with damp cloths.

The less furniture there is in a sick-room the better for its inmate. The bed should be six and a half feet long and three and a half feet wide, with a woven wire mattress and one of hair. Feather beds are utterly inadmissible, as they retain the exhalations from the sick, and cause the skin to re-absorb the very poison that nature is trying to throw off. They cause bed-sores, and fatigue both nurse and patient. The hardest mattress is preferable. If you are obliged to use a wide bedstead, do not let the patient get into the middle of it; lay him at the side. You can then attend to his needs with greater comfort for him and less risk for yourself. No under blanket is required, and the lower sheet should be firmly fastened with large pins to the outside edge of the mattress, to prevent the wrinkles which help to cause bed-sores. The sheets should be cotton, not linen. Abolish the counterpane—it is heavy and unhealthy; a clean sheet over the blankets will be light and tidy. A bolster is not needed, and there must be neither valances nor curtains to bed or window. All that is required for the latter is a dark green or buff blind. The bed should stand out of the draught, away from the wall all round, in the lightest part of the room, and where

the patient can see out of the window. Hang a thermometer on the wall nearest the bed, on a level with the invalid, and keep the temperature as close to 60° as possible; never let it rise above 65° or fall below 55°. A washstand, one or two small tables, some wooden or cane-bottom chairs, a chintz-covered arm-chair and footstool for the nurse are required. A screen is also useful, but a clothes-horse with a shawl pinned securely on it is a good substitute. Mark any boards in the floor that creak, and avoid stepping on them; have wedges to cure rattling windows and door; a piece of stick and a pair of gloves should take the place of the noisy poker and tongs.

"The first rule of nursing is to keep the air of the sick-room as pure as the outside atmosphere without chilling the patient." Our next step must therefore be to secure a sufficient outlet for the bad air and inlet for the fresh air. The outlet is found in the chimney, which must never, under any circumstances, in any room, be stuffed up or closed. A fire is an invaluable assistant in purifying a room, as it hastens the outrush of the used-up air. The inlet for fresh air is the window, not the door, which must always be closed, or the bad air from the house will find its way into the sick-room. The window should be kept open at the top, two inches at least, both day and night. If this causes a draught, firmly tack a piece of gauze across the opening; this will break the draught and also keep out dust and damp. The gauze should be frequently washed. If the window will not open at the top, you must get a piece of six-inch board the length of the lower sill and shut the window tightly down on it. This will leave an opening between the sashes through which the outer air can enter. Do not be afraid of fresh air; people do not catch cold in bed if they are properly covered. Of course when your patient is sitting up, or being washed, the window must be closed. The way to test the purity of the air of the sick-room is to come into it straight from the open air, and if the room seems close, there is something wrong with the ventilation, heating, or cleanliness that must be remedied.

It is cruelty to let a sick person lie, day after day, with nothing but the bare walls to look at—blank spaces on which his imagination paints gloomy and horrible pictures. The preparation of the sick-room is not complete until we have hung