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[1941

THE MIDWIVES ACT 1928.

THE NURSES BOARD OF VICTORIA.

REGULATIONS

RELATING TO THE

TRAINING, EXAMINATION, REGISTRATION,
AND PRACTICE OF MIDWIVES.

THE Nurses Board of the State of Victoria by virtue of the powers conferred by the *Midwives Act* 1928 and all other powers enabling it in that behalf, doth hereby make the following Regulations, that is to say:—

1. These Regulations may be cited as the Midwives Regulations 1941, and shall apply to all midwives and trainees: Provided that in respect of any trainee who commenced her course prior to 31st day of July, 1929, the production of evidence of having carried out the requirements prescribed by paragraphs (a), (b), and (c) of Form 12 of the First Schedule hereto shall not be necessary.

2. All Regulations previously in force relating to matters herein provided for are hereby repealed.

3. For the purposes of these Regulations, unless inconsistent with the context or subject matter—

“Approved” means approved in writing by the Board.

“Board” means the Nurses Board constituted under the Nurses Acts.

“Hospital” means any public or private hospital approved by the Board as a training school for midwives.

“Manager” means the Board or Committee of Management of any public hospital and also the person responsible for the control of any private hospital.

“Puerperal pyrexia” means any febrile condition occurring in a woman from the end of the first to the end of the tenth day after abortion, miscarriage, or childbirth in which a temperature of 100·4 degrees F. (38 degrees C.) or higher, or quickening of pulse above 100 for more than 24 hours occurs upon more than one day during that period.

"Nomination day" means the day appointed on or before which all candidates for any election must be nominated.

"Polling day" means the last day appointed at any election for the delivery of ballot-papers by voters to the Returning Officer.

"Registered midwife" means, for the purposes of paragraph (c) of sub-section (2) of section 2 of the *Nurses Act* 1940, a registered midwife not being a registered nurse.

4. Upon application in or to the effect of Form 1 of the First Schedule hereto by the authorities of any hospital, the Board may approve such hospital as a training school for midwives provided the following requirements are fulfilled to the satisfaction of the Board—

- (a) The matron shall be a registered general nurse and a registered midwife with adequate hospital training and shall hold nursing certificates approved by the Board.
- (b) The staff shall include two resident nurses, each of whom is registered as a general nurse and also as a midwife.
- (c) There shall be provided at the hospital permanently reserved and approved accommodation for at least ten maternity cases, and the daily average of occupied beds shall be at least five.
- (d) There shall be received at least 100 maternity cases every year.
- (e) The prescribed systematic courses of instruction in theoretical and practical nursing shall be given at the hospital during the period of training by approved members of the medical staff and by the matron or other approved nurse, or by approved lecturers at some other approved hospital or other approved place.
- (f) The manager shall undertake—
 - (i) in respect of every trainee to cause or arrange to be conducted by persons approved under clause 4 (e) an examination in each of the prescribed subjects of instruction as soon as practicable after each course, and a final examination in all the subjects at the conclusion of the curriculum;
 - (ii) to furnish to every trainee who has been successful at the final examination a certificate to the effect that she has passed such examination; and
 - (iii) if required by the Board, to make available to the Board, or to any authorized officer of the Board, the question-papers and answers of each or any trainee.
- (g) The manager shall undertake to forward to the Board during the month of January in each year, an annual report in or to the effect of Form 2 in the First Schedule hereto.
- (h) The manager shall undertake to facilitate the inspection by the Board's officers of the hospital, its equipment, instruments, appliances, and records of cases.

5. The Board shall cause a list of hospitals approved as training schools for midwives to be published in the *Government Gazette*.

6. If any hospital which has been approved as a training school for midwives does not fulfil to the satisfaction of the Board all the requirements of the Regulations as to training schools for midwives, the Board may at any time, by notice to the manager, through the matron or the secretary, or to the person in charge of such hospital, cancel its approval, and thereupon such hospital shall cease to be a training school from the date specified in that behalf in such notice, and a copy of such notice shall be published in the *Government Gazette*. Any trainee then in course of training in such hospital shall serve such additional period of training as the Board may require.

7. No woman shall be eligible as a trainee at any training school unless—

- (a) she produces a certificate that she has been educated up to the standard certificate of merit at a primary school within the Commonwealth of Australia, or its equivalent, or otherwise satisfies the Board of her educational attainments;
- (b) she is prepared to undergo a period of probation for one month;
- (c) she has attained the age of twenty-two years;
- (d) she produces a medical certificate to the effect that she is in sound health and physically fit to undergo the prescribed courses of training.

Course of Training.

8. Systematic lectures shall include the following courses:—

- (a) Midwifery (including elementary anatomy and physiology of the generative organs)—twenty lectures.
- (b) Care and Feeding of Infants—not less than six lectures.
- (c) Invalid Cookery—not less than twelve lectures with demonstrations.
- (d) General Nursing—twelve lectures.

9. The course of lectures shall be in accordance with the requirements set out in the Second Schedule hereto.

10. Certificates of attendance at the said lectures shall be as set out in Forms 8, 9, 10, 11, and 12 of the First Schedule hereto. No certificate will be accepted by the Board which does not certify attendance of at least three-fourths of the total number of lectures delivered in each course.

Period of Training.

11.—(1) The period of training shall be—

- (a) in the case of a pupil midwife, not less than eighteen months;
- (b) in the case of a nurse registered under the Nurses Acts, Victoria, not less than nine months: provided that if such nurse has served, whether inside or outside of Victoria, during the war which commenced in 1914, as a nurse with His Majesty's naval or military forces, or with the naval or military forces of the Commonwealth, the period of training shall be such as may be approved in each particular case by the Board.

(2) No registered nurse shall be required to attend such of the prescribed courses of training for a midwife as shall have been included in her training as a general nurse.

(3) "For the purposes of this Regulation the periods of training prescribed by sub-clause (1) shall be deemed to include the period of twenty eight days after the date of the completion of the examination."

PART II.—EXAMINATION AND REGISTRATION.

Application to Sit for Examination.

12. Every applicant for permission to sit for examination shall—

- (a) make application in Form 7 of the First Schedule hereto;
- (b) produce evidence satisfactory to the Board—
 - (i) that she has completed the several prescribed courses of training, and such evidence shall be in Forms 8, 9, 10, 11, and 12, or in Form 13, of the First Schedule hereto, as the case may be;
 - (ii) that she has passed the final examination referred to in Regulation 4 (f), and such evidence shall be included in Form 12 of the First Schedule hereto;
 - (iii) that she has been educated up to the standard of the merit certificate at a primary school within the Commonwealth of Australia, or its equivalent, or otherwise satisfies the Board of her educational attainments; and
 - (iv) that she has attained the full age of twenty-two years;
- (c) furnish to the Board a statutory declaration to the effect that she has watched the progress of and personally conducted not less than twenty cases of labour, fifteen of which shall have been conducted in an approved training hospital.

Scope of Examination.

13. The scope of the examination shall include the subjects prescribed in the Second Schedule hereto, and such written, oral, and practical tests, as will enable the examiners to determine whether the examinee is competent to carry out the duties of a midwife.

Dates of Examination.

14. Examinations for registration shall be held every four months, provided that the Board may hold examinations at such other times as it deems fit.

15. The Registrar shall take such action as may be convenient or necessary to notify candidates of the date of examination.

Registration.

16. No woman shall be registered as a midwife unless she is entitled to registration under the *Midwives Act 1928*, or under section 4 of the *Nurses Act 1928*, and unless she—

- (a) lodges with the Registrar an application in Form 3 of the First Schedule hereto, accompanied by two certificates of good character in Form 4 of the said schedule; and
- (b) has paid the prescribed registration fee of Five shillings.

17. Every midwife whose application for registration is granted shall receive a certificate of registration in Form 5 or in Form 6, as the case may be, of the First Schedule hereto, and her name shall be entered in the register.

Fees Relating to Examination and Registration.

18. The fee to be paid by each candidate for examination shall be One guinea, provided that for each subsequent examination the fee shall be Ten shillings and sixpence.

19. The fee to be paid by each applicant for registration shall be Five shillings, and the fee for a certificate or duplicate certificate shall be Two shillings and sixpence.

20. The fee to be paid for annual renewal of registration shall be Two shillings and sixpence.

Remuneration of Examiners.

21. The remuneration to be paid to the examining body conducting the examinations shall be Seven shillings and sixpence for each candidate, provided that where a candidate presents herself a second time no fee shall be payable.

Reports and Notifications.

22. Every midwife shall send to the Board notice in Form 14 of the First Schedule hereto of her intention to practise as a midwife.

23. Every midwife shall, in the month of December of each year, notify the Board, in Form 15 of the First Schedule hereto, of her intention to continue practice, and shall, at the same time, pay a fee of Two shillings and sixpence for renewal of registration. If fee is not paid within twenty-one days a penalty of one shilling and sixpence is imposed.

24. Every midwife shall, without delay, notify the Board, in Form 16 of the First Schedule hereto, of any change of her address.

PART III.*Special Regulations Regulating the Practice of Midwives.*

25. The midwife shall be scrupulously clean in every way, including her person, clothing, appliances, and premises. She shall preserve the skin of her hands, as far as possible, free from cracks and abrasions, and keep her nails cut short. Whilst attending her patients she shall wear a clean dress of washable material, such as linen, cotton, &c., which can be boiled, and over it a clean, washable apron or overall. The sleeves shall be made so that they can be tucked up well above the elbows.

Instruments and Appliances.

26. When called to a confinement the midwife shall take with her in a suitable receptacle, kept for that purpose only and provided with a removable lining which can be sterilized—

- (a) a suitable appliance for washing out the vagina ;
- (b) a suitable appliance, other than (a), for clearing out the bowels ;
- (c) a catheter for drawing off the water from the bladder ;
- (d) a pair of scissors ;
- (e) a clinical thermometer ;
- (f) a bath thermometer ;
- (g) a nail brush ;
- (h) sterilized tape for tying umbilical cord ;
- (i) sterilized dressings for the cord ;
- (j) antiseptic soap ;
- (k) efficient antiseptics for sterilizing hands, for douching, and for cleaning the infant's eyes ;
- (l) sound rubber gloves ;
- (m) drop-bottle containing an efficient antiseptic for the infant's eyes ;
- (n) supply of absorbent cotton wool ;
- (o) three small bowls.

27. All instruments and other appliances shall be sterilized, preferably by boiling for at least ten minutes, before being brought into contact with the patient's generative organs.

Pre-Natal Supervision.

28. When engaged to attend a patient in her confinement the midwife so engaged shall interview the patient at the earliest opportunity. She shall inquire as to the course of her previous pregnancies, confinements, and lying-in periods (if any) as regards both mother and child. She shall advise as to personal and general arrangements for the confinement and, where necessary, visit the house. Where the arrangement for the confinement is made with the management of a maternity hospital, the matron or other midwife of such hospital shall carry out the above requirements.

29. In the case of a primipara, or where illness or abnormality has occurred in connexion with any previous pregnancy, or where any previous pregnancy has ended in an abortion, a premature birth, or a still-birth, the midwife shall explain to the patient that her case is one in which the advice of a medical practitioner is required. She shall urge the patient to seek such advice or attend at a hospital or a pre-natal clinic or other suitable institution.

30. In the event of any abnormality existing or occurring during pregnancy, labour, or lying-in, the midwife in attendance shall explain to the husband, or the nearest relative or friend present, that the case is one in which the attendance of a medical practitioner is required.

31. For the purposes of these Regulations, the conditions mentioned in the Third Schedule hereto shall be deemed to be abnormalities, and the midwife shall explain that a medical practitioner should be summoned urgently.

Management of Labour.

32. Before touching the external genital parts of any patient the midwife shall on each occasion tuck up the sleeves of her dress and surgically cleanse her hands and forearms, and whenever making an internal examination she shall, in addition, wear sound sterile rubber gloves.

33. The midwife shall early during labour thoroughly cleanse the external genital parts with soap and water, and then swab them with an efficient antiseptic solution. In particular, the parts shall be swabbed with the antiseptic solution on the following occasions:—

- (a) before making the first or any subsequent vaginal examination;
- (b) after the termination of labour;
- (c) daily during the lying-in period whenever washing or cleansing is required;
- (d) before and after passing a catheter.

34. The swabbing with an antiseptic solution shall be repeated before a douche is given and before any manipulative procedure is carried out. For this purpose the midwife shall use only sterile absorbent cotton wool or other clean sterile material.

35. No more internal examinations, manipulative procedures, or douching shall be carried out than are absolutely necessary.

36. No midwife shall make any vaginal examination contrary to the instructions of the medical attendant.

37. No midwife in attendance on a patient in labour shall leave without giving an address, by means of which she can be found without delay.

38. After the commencement of the second stage of labour she shall remain with the patient until one hour after the expulsion of the placenta and membranes, and as long thereafter as may be necessary.

39. Where a confinement is abnormal, or where dangerous symptoms arise, the midwife shall immediately send for a medical practitioner, and, pending his arrival, shall carry out any instructions that he may have given. If, for any reason, the services of a medical practitioner are not available, the midwife shall remain with the patient and take such action as she considers advisable in the interests of the patient.

40. No midwife shall—

- (a) use forceps nor administer any drug other than a simple aperient nor shall she administer ergot or pituitary extract until the third stage of labour is completed;
- (b) administer morphia or similar drug except in cases of extreme urgency, and then only when it is impossible to get into communication with a medical practitioner; nor
- (c) administer an anaesthetic to a patient unless under the personal supervision of, and in the immediate presence of, a legally qualified medical practitioner.

41. At the earliest moment after the child's head is born, and, if possible, before the eyes are opened, the eyelids shall be carefully cleansed by the midwife in the manner prescribed in the Fifth Schedule hereto.

42. In the case of a child born apparently dead, the midwife shall carry out the methods of resuscitation which have been taught her.

43. On the birth of a child which is in danger of death, the midwife shall inform one of the parents, or nearest available relative, of the child's condition.

44. The midwife shall examine the placenta and membranes after they have been expelled and satisfy herself that they are complete.

45. As soon as possible after delivery, the midwife shall remove, or cause to be removed, from the lying-in room all soiled linen, blood, urine, faecal matter, placenta, and membranes.

Management of Puerperium.

46. The midwife shall be personally responsible for the daily washing of the mother and infant, the dressing of the cord, and for the cleanliness and comfort of the patient.

Except where a medical practitioner is in attendance, she shall also be responsible for the proper dieting of both mother and child during the lying-in period, which shall be held, in a normal case, to mean the time occupied by the labour and a period of ten days thereafter.

47. A midwife who leaves a patient whom she has attended in labour shall re-visit such patient within twelve hours immediately following the delivery, and thereafter twice daily during the period for which she is engaged. If prevented from attending twice daily, she shall enter the reason in her case book. She shall take and record the pulse and temperature of the patient twice daily, and oftener if necessary, and enter the details in a note book or on a chart, which shall be carefully preserved. In addition, particulars of any drugs other than simple aperients which have been administered by her to the patient shall be noted.

Procedure Regarding Infectious Diseases.

48. Where a midwife has been in attendance on a septic case, or a case of infectious disease, or a case of puerperal pyrexia, or has been in contact with any one so suffering, or has an inflamed or septic wound on any part of her body, she shall cease to attend any fresh midwifery case for a period of seven days, or for such time as the Board thinks fit.

49. Before receiving permission to resume practice, she shall forward to the Board a certificate from a medical practitioner that she has disinfected herself, her clothing, and all her instruments and appliances in the manner prescribed hereunder, and that she is now free from infection.

50. Every midwife who has been exposed to infection in the manner indicated in clause 48 hereof shall—

- (a) remove all her clothing and take a bath in a hot disinfecting solution;
- (b) treat the hair with an efficient disinfecting lotion;
- (c) immerse all washable clothing in an efficient disinfecting solution for half an hour prior to washing;
- (d) suspend all clothing that cannot be washed in a closed chamber, and subject same to the fumes of formaldehyde for six hours;
- (e) boil for half an hour all instruments and appliances that are not injured by heat;
- (f) immerse all instruments and appliances injured by heat in an efficient disinfecting solution for half an hour.

51. Disinfecting processes shall be carried out as prescribed in the Fifth Schedule hereto.

Reports and Notifications.

52. Every registered midwife shall furnish to the Board, within forty-eight hours, a report of every birth attended by her, in Form 17 of the First Schedule hereto.

53. Every midwife shall notify the Board, in Form 18 of the First Schedule hereto, of every case of death which occurs in her practice.

54. Every midwife shall notify the Board, within twenty-four hours, in Form 19 of the First Schedule hereto, of every case of still-birth which occurs in her practice.

55. Every midwife shall report to the Board—

- (a) if she contract any infectious disease or septic condition immediately on becoming aware of the occurrence of such disease or condition, and the report shall include her name and address and the nature of the disease or condition; or
- (b) in the case of attending any patient suffering from any infectious disease or septic condition, or from puerperal pyrexia, immediately on becoming aware that the patient is so suffering, and the report shall include the name and address of the patient, the nature of disease or condition from which the patient is suffering, and her name and address.

56. In a case of emergency, as defined in the Third Schedule hereto, the midwife shall, where no medical practitioner engaged by or on behalf of the patient is in attendance, call in to her assistance a medical practitioner.

Remuneration of Medical Practitioners in Cases of Emergency.

57. The remuneration payable by the Board to medical practitioners for attending cases of emergency shall be in accordance with the scale prescribed in the Fourth Schedule hereto, provided that the patient furnishes to the Board a statutory declaration to the effect that neither she nor her husband is able to pay the fees of the medical practitioner, and such declaration shall be in Form 23 of the First Schedule hereto.

General.

58. The midwife shall report forthwith to the Board every case of emergency which occurs in her practice and such report shall be in Form 21 of the First Schedule hereto.

59. No midwife shall lay out the body of any person on whom she has not been in attendance at the time of death, or a body upon which post-mortem examination has been made, unless she forthwith report such case to the Board in Form 22 of the First Schedule hereto, accompanied by a medical certificate that she has undergone adequate cleansing and disinfection.

60. Every midwife shall keep a record in or to the effect of Form 20 of the First Schedule hereto, of all cases attended to by her. On request, she shall allow any person authorized by the Board to inspect the instruments, appliances, and all records required to be kept by her, and make extracts from or copies of such records.

61. Any midwife who disobeys these Regulations, or who is guilty of misconduct or malpractice, may be suspended from practice for such period as the Board orders, or her name may be removed from the register by the order of the Board; but before the enforcement of any suspension or removal such midwife shall have an opportunity of giving an explanation, either personally or in writing.

*"PART IV.**62. Regulation for the election to the Nurses Board of a representative of registered midwives.*

1. Subject to the special provisions, as hereinafter provided, for the first election in the year 1941, the following provisions shall apply to all elections of a registered midwife as a member of the Board:—

- (a) The Minister shall appoint a competent person, not being a member or officer of the Board, to be the Returning Officer.
- (b) (i) In any year in which the representative of registered midwives is to be elected to the Board, the Minister shall during the month of January give notice of the election in the *Government Gazette*, and the Registrar shall give similar notice in at least one recognized journal circulating amongst registered midwives and in two daily newspapers published in Melbourne.
- (ii) In every such notice the polling day (which shall be the last Friday in February in such year), the nomination day (which shall not be less than fourteen days after the date of the publication of such notice in the *Government Gazette*), the name of the Returning Officer, and the time and place when and where he will receive nominations, and the place where nomination forms may be obtained shall be specified.
- (c) Forthwith after the nomination day for any election the Registrar shall supply the Returning Officer with a roll of persons (giving the full name and address in each case) who on nomination day are registered midwives, and shall also supply the Returning Officer with an envelope addressed to each such person. Such roll shall be the roll of persons entitled to vote at the election.
- (d) (i) Every candidate for election must be a person registered as a midwife under the *Midwives Act 1928* (not being a registered nurse.)
- (ii) In order that any registered midwife may become or be a candidate at any election, she shall before Twelve o'clock noon on the nomination day deliver or cause to be delivered to the Returning Officer a nomination paper in or as nearly as may be in Form 24 of the First Schedule hereto stating the name and address and registration number of such registered midwife and signed by not less than six other registered midwives and having at the foot thereof a statement under the hand of the registered midwife so nominated that she consents to such nomination.
- (iii) No registered midwife who has not been so nominated shall be or be deemed to be a candidate at any election.
- (e) Any registered midwife who has been nominated may, by written notice addressed to the Returning Officer, withdraw her consent to her nomination at any time not later than Twelve o'clock noon on nomination day, and thereupon such registered midwife shall be considered as not having been nominated, and the Returning Officer shall omit the name of such registered midwife from the ballot-papers.

- (f) After Twelve o'clock noon on nomination day the Returning Officer shall in respect of a contested election, announce the full name of each candidate nominated, and shall cause notice thereof to be published in the *Government Gazette*.
- (g) If only one candidate is nominated, the Returning Officer shall, by notice in the *Government Gazette*, declare such candidate duly elected, and shall forward a copy of such notice to the Minister.
- (h) If at any election more candidates than one have been duly nominated, a poll shall be taken, and the Returning Officer shall forthwith cause ballot-papers to be printed in or as nearly as may be in Form 25 of the First Schedule hereto, and shall, not later than the fourteenth day before polling day, send by post, or cause to be delivered, to each of the registered mid-wives entitled to vote, one of such ballot-papers duly signed or initialed by the Returning Officer, together with an open return-envelope bearing the Returning Officer's name and address.
- (i) When the voter has marked her vote on the ballot-paper, she shall place it in the addressed return-envelope, and she shall sign her name and state her registered address and registration number on the face of such return-envelope and post it or deliver it or cause it to be delivered to the Returning Officer in time to reach the Returning Officer not later than noon on polling day. Any ballot-paper which is not enclosed in an envelope with the voters' signature and the other specified particulars thereon or in respect of which the directions in accordance with Form 25 of the First Schedule hereto have not been substantially complied with shall not be counted in the scrutiny. The decision of the Returning Officer as to the validity or invalidity of any vote or ballot-paper shall be final.
- (j) Upon a voter satisfying the Returning Officer that she has not received a ballot-paper or that the ballot-paper received by her has been lost, spoilt, or destroyed, the Returning Officer may issue a new ballot-paper to such voter.
- (k) (i) A voter shall mark her ballot-paper by striking out the names of the candidates for whom she does not wish to vote.
(ii) A voter may give and exercise one vote only.
(iii) Any ballot-paper recording more than one vote shall be rejected as informal.
- (l) Each candidate at any election shall be entitled to appoint in writing one scrutineer to be present during the scrutiny.
- (m) As soon as practicable after the close of the poll, the Returning Officer, in the presence of such scrutineers as are present, shall—
 - (i) produce unopened all return-envelopes received up to the close of the poll;
 - (ii) examine each envelope, and, if it is properly signed and properly endorsed with the prescribed particulars thereon and otherwise complies with the provisions herein contained, accept the vote for further scrutiny;
 - (iii) if an envelope is not properly signed or otherwise does not comply with the provisions herein contained, reject the vote without opening the envelope;
 - (iv) place the envelopes containing unrejected votes on a table face downwards, so that the signature of the voters shall not be visible;
 - (v) open each such envelope, withdraw the ballot-paper contained therein, and, without inspecting the vote or permitting any other person to do so, deposit the ballot-paper in a ballot-box;
 - (vi) when all such envelopes have been opened and the ballot-papers withdrawn therefrom and deposited in the ballot-box, open the ballot-box, and count the votes.
- (n) The candidate who has received the greatest number of votes shall be duly elected.
- (o) The Returning Officer may from time to time adjourn the scrutiny to a day and hour fixed by him and notified to the scrutineers.
- (p) Subject to the provisions contained herein, the provisions of the law for the time being regulating elections for the Legislative Assembly, shall so far as they can be made applicable and with such adaptations, modifications, and substitutions as are necessary, apply to elections under this regulation.

(g) If at any election the number of votes received by any two or more candidates are equal and the addition of one vote to any one of the said candidates would enable that candidate to be declared elected, the Returning Officer shall decide by lot which of such candidates shall be elected.

(r) At any time before the gazettal of the result of any election as hereinafter provided, the Returning Officer may, if he thinks fit, on the written request of any candidate setting forth the reasons for the request, or may, of his own motion, make a recount of the votes.

If the Returning Officers refuses on the request of a candidate to make a recount of the votes, the candidate may, in writing, appeal to the Minister to direct a recount, and the Minister may, as he thinks fit, either direct a recount or refuse to direct a recount.

(s) At the conclusion of every election, the Returning Officer shall, by notice in the *Government Gazette*, declare the result of the election and shall forward a copy of such notice to the Minister.

(t) Forthwith after the declaration of the result of every election the Returning Officer shall forward to the Registrar all documents, rolls, and ballot-papers relating to the election, and the Registrar shall cause such documents, rolls, and ballot-papers to be stored at her office for a period of six months after receipt of same and then to be destroyed.

(u) Any person who—

(i) personates any registered midwife for the purpose of voting at any election, or

(ii) votes or attempts to vote more than once at the same election—

shall be liable to a penalty not exceeding Ten pounds.

2. For the first election in the year 1941 of members of the Board, the following provisions shall apply in respect of the election of a representative of registered midwives:—

(a) The notices of election given by the Minister and the Registrar, the nomination day, and the polling day shall be on such days and at such intervals of time as the Minister deems fit.

(b) Subject to paragraph (a) of this clause such election shall be conducted in accordance with the provisions of this Regulation.

Midwives Act 1928.

FIRST SCHEDULE.—FORM 1.

APPLICATION FOR APPROVAL OF A HOSPITAL AS A TRAINING SCHOOL FOR MIDWIVES.

The Registrar, Nurses Board,
352 Collins-street, Melbourne.

Name of hospital (state whether public or private hospital).

(Date) / , 19 .

On behalf of the above hospital, I hereby make application in terms of the Regulations under the *Midwives Act 1928*, that the above-mentioned hospital be approved as a Training School for Midwives. I certify that the following information for one year prior to the date of this application is correct:—

(1) Year.	(2) Daily Average occupied Beds.	(3) Nursing Staff.		(4) Number of Cases.		(5) Number of Confinements.	
	General Midwifery.	Registered.	Pupil.	Medical.	Surgical.	In Hospital.	Out-patients.

The name of the matron, who is registered as a general nurse and also as a midwife, is (name in full)

A list of the names of the medical staff is attached. The medical staff has agreed to give the lectures required by the Regulations.

I undertake that the Regulations controlling and applicable to the above hospital as a training school will be conscientiously carried out, and that any change of occupancy of the position of matron will be immediately reported to the Board.

I also undertake to facilitate the inspection by your Board's officers of the hospital, its equipment, instruments, appliances, and records of cases.

Signed on behalf of the above hospital, this day of , 19 .

(To be signed by the president, secretary, medical superintendent, resident manager, or licensee.)

Midwives Act 1928.
FIRST SCHEDULE.—FORM 2.

ANNUAL REPORT OF TRAINING SCHOOL FOR MIDWIVES FOR YEAR ENDING 31st DECEMBER, 19

1. Name of Training Hospital.
2. Address of Training Hospital.
3. Daily average occupied beds for year for midwifery cases.
4. No. of women confined during year.
5. No. of Registered midwives employed.

Lectures.																		
Names of Pupils Nurses in Full.	Date of Entry into Training Hospital.	Period Absent except Weekly and Annual Leave.	Midwifery.			Care and Feeding of Infants			Invalid Cookery.			General Nursing.			Infant' and Maternity Hygiene.			
			No. given.	No. attended.	Lecturer.	No. given.	No. attended.	Lecturer.	No. given.	No. attended.	Lecturer.	No. given.	No. attended.	Lecturer.	No. given.	No. attended.	Lecturer.	

To be filled in and returned to the Registrar, Nurses Board, 352 Collins-street, Melbourne, not later than 15th January each year.

Midwives Act 1928.

FIRST SCHEDULE.—FORM 3.

APPLICATION TO BE REGISTERED AS A MIDWIFE.

I (name in full) of (address)
hereby apply to be registered as a midwife, and claim that I am entitled to registration
under section (here insert section of Act under which registration is claimed)
and I submit herewith documentary evidence in support of my claim, together with—

- (1) evidence of age (statutory declaration or "extract" of birth entry or birth certificate, or other evidence satisfactory to the Board);
- (2) two certificates of character in the prescribed form (Form 4); and
- (3) Postal note for Five shillings.

(Signature)

Date

The Registrar, Nurses Board of Victoria,
352 Collins-street, Melbourne.

Midwives Act 1928.

FIRST SCHEDULE.—FORM 4.

CERTIFICATE OF GOOD CHARACTER.

I certify that I have been personally acquainted with
for a period of years, and that she is trustworthy, sober, and of good
character.

Signature, address, and occupation of person certifying

Date

Signature of applicant

Midwives Act 1928.

FIRST SCHEDULE.—FORM 5.

CERTIFICATE OF REGISTRATION.

(Issued by the Nurses Board, Victoria, Australia.)

We hereby certify that having
fulfilled the conditions of the Regulations prescribed under the *Midwives Act 1928*, and
having satisfied the Board that she is competent by completing the prescribed course of
training and passing the prescribed examination, has been registered and is entitled to
practise as a midwife subject to the provisions of the said Act and the Regulations
thereunder.

Chairman of the Board.

Registrar.

Date of issue.

No. in Register

Signature of midwife

Midwives Act 1928.

FIRST SCHEDULE.—FORM 6.

CERTIFICATE OF REGISTRATION.

(Issued by the Nurses Board, Victoria, Australia.)

We certify that having fulfilled the
conditions of the Regulations laid down in pursuance of the *Midwives Act 1928*, and having
satisfied the Board by compliance with the provisions of has
been registered, and is entitled by law to practise as a midwife in accordance with the
provisions of the said Act and subject to the said Regulations.

Chairman of the Board.

Registrar.

Date of issue.

No. in Register

Signature of midwife

Midwives Act 1928.

FIRST SCHEDULE.—FORM 7.

APPLICATION TO SIT FOR EXAMINATION.

I, , hereby apply for permission to sit
for examination for a Certificate of Registration as a midwife, and in support of my
application I herewith submit evidence as to—

- (a) Age.
- (b) Education.
- (c) Fulfilment of the prescribed course of training and production of hospital certificate.
- (d) Conducting labours and nursing lying-in patients.
- (e) Training and experience as a general nurse.
- (f) Having paid the prescribed examination fee.

Signature

Address

Date

The Registrar, Nurses Board of Victoria
352 Collins-street, Melbourne.

Midwives Act 1928.

FIRST SCHEDULE.—FORM 8.

CERTIFICATE OF ATTENDANCE AT LECTURES ON MIDWIFERY.

I certify that _____ has attended a course of _____ lectures on midwifery, as prescribed by the Regulations under the *Midwives Act 1928*, Victoria, and that she was absent from _____ lectures.

Signature and Address of Lecturer
approved by the Board.

Midwives Act 1928.

FIRST SCHEDULE.—FORM 9.

CERTIFICATE OF ATTENDANCE AT LECTURES ON CARE AND FEEDING OF INFANTS.

I certify that _____ has attended a course of _____ lectures on care and feeding of infants, as prescribed by the Regulations under the *Midwives Act 1928*, Victoria, and that she was absent from _____ lectures.

Signature and address of Lecturer
approved by the Board.

Midwives Act 1928.

FIRST SCHEDULE.—FORM 10.

CERTIFICATE OF ATTENDANCE AT LECTURES ON INVALID COOKERY.

I certify that _____ has attended a course of _____ lectures, with practical instruction, on invalid cookery, as prescribed by the Regulations under the *Midwives Act 1928*, Victoria, and that she was absent from _____ lectures.

Signature and address of Lecturer
approved by the Board.

Midwives Act 1928.

FIRST SCHEDULE.—FORM 11.

CERTIFICATE OF ATTENDANCE AT LECTURES ON GENERAL NURSING.

I certify that _____ has attended a course of _____ lectures on general nursing, as prescribed by the Regulations under the *Midwives Act 1928*, Victoria, and that she was absent from _____ lectures.

Signature and address of Lecturer
approved by the Board.

Midwives Act 1928.

FIRST SCHEDULE.—FORM 12.

CERTIFICATE OF HAVING PASSED THE EXAMINATION PRESCRIBED UNDER REGULATION 4 (f), OF HAVING MADE ANTE-NATAL INVESTIGATIONS, OF WITNESSING CASES OF LABOUR, OF CONDUCT OF LABOUR, AND OF ATTENDANCE ON LYING-IN CASES.

I certify that on the _____ day of _____ 19____, I completed, under my supervision and to my satisfaction, a _____ months' course of practical midwifery, in accordance with the prescribed requirements, and that she—

- (a) passed the final examination referred to in Regulation 4 (f);
- (b) made ante-natal investigations in respect of _____ pregnant women;
- (c) witnessed _____ cases of labour prior to personally conducting any case;
- (d) watched the progress of and personally conducted _____ cases of labour, of which _____ were conducted in an approved training hospital; and
- (e) nursed _____ lying-in women and their infants during the ten days following labour.

Signature and address of
Certifying Authority
Signature of Applicant
Address

Date

Midwives Act 1928.

FIRST SCHEDULE.—FORM 13.

CERTIFICATE UNDER SECTION 4 OF THE NURSES ACT 1928.

I, _____, being a medical practitioner residing at _____ in which locality a hospital approved under the *Midwives Act 1928* for the training of midwives is not available, do hereby certify that _____ being a registered nurse, has, in this locality, and under my direction attended in childbirth _____ women, and has in my presence personally conducted _____ cases of childbirth since the date of her registration as a general nurse under the *Nurses Act 1928*, namely:—

Dated at _____ this _____ day of _____ 19____.

Signature of Medical Practitioner
Signature of Registered Nurse

Midwives Act 1928.

FIRST SCHEDULE.—FORM 14.

NOTICE OF INTENTION TO PRACTISE AS A MIDWIFE.

To the Registrar, Nurses Board,
352 Collins-street, Melbourne.

I (name in full) holding a Certificate of Registration
(No.) under the *Midwives Act 1928*, hereby give notice of my intention to practise
as a midwife at (full address)

Date Signature

NOTE.—If married since granting of certificate, name under which it was granted
must also be given.

Midwives Act 1928.

FIRST SCHEDULE.—FORM 15.

NOTICE OF CONTINUANCE OF PRACTICE AND APPLICATION
FOR RENEWAL OF REGISTRATION.

To the Registrar, Nurses Board,
352 Collins-street, Melbourne.

I (name in full) holding a Certificate of Registration
(No.) under the *Midwives Act 1928* hereby give notice that I am continuing to
practise as a midwife at (address in full) , and I herewith tender
Two shillings and sixpence for the renewal of my registration.

Signature
Address

NOTES.—(a) This notice must be sent in the month of December in every year during
the continuance of practice.

(b) If married since granting of the certificate, name under which it was granted
must also be given.

Midwives Act 1928.

FIRST SCHEDULE.—FORM 16.

NOTICE OF CHANGE OF ADDRESS.

To the Registrar, Nurses Board,
352 Collins-street, Melbourne.

I (name in full) holding a Certificate of Registration
(No.) under the *Midwives Act 1928*, hereby give notice that I have changed my
address from (recent address) to (present address)

Signature

Date

NOTE.—If married since granting of certificate, name under which it was granted
must also be given.

Midwives Act 1928.

FIRST SCHEDULE.—FORM 17.

NOTIFICATION OF BIRTH.

To the Registrar, Nurses Board,
352 Collins-street, Melbourne.

I hereby report having attended the case, particulars of which are set out here-
under,—

Name of patient
Address
Date and hour of confinement
Sex of infant
Was labour complicated? (Yes or no)
Was a doctor in attendance?

Signature
Registration No.

Midwives Act 1928.

FIRST SCHEDULE.—FORM 18.

NOTIFICATION OF DEATH.

To the Registrar, Nurses Board,
352 Collins-street, Melbourne.

I, the undersigned, being a midwife holding a Certificate of Registration (No.
under the *Midwives Act 1928*, hereby notify that the following death occurred in my
practice on the day of , 19 :—

Signature
Address

Date

Name of deceased
Address of deceased
Age of deceased
Date of delivery
Cause of death
Medical practitioner (if any)

Midwives Act 1928.

FIRST SCHEDULE—FORM 19.

NOTIFICATION OF STILLBIRTH.

To the Registrar, Nurses Board,
352 Collins-street, Melbourne.

I, the undersigned, being a midwife holding a certificate (No.) under the
Midwives Act 1928, hereby notify that on the day of ,
19 , living at , was delivered *by me
of a stillborn child. *before my arrival

Sex
Full time or premature (number of months)
Condition of child
Presentation
Medical practitioner (if any)

Signature
Address

Date

* Strike out words not applicable.

Midwives Act 1928.

FIRST SCHEDULE.—FORM 20.

MIDWIFE'S RECORD OF CASES.

1. No. of case
 2. The mother—
 - (1) Name and address.
 - (2) Age
 - (3) Previous history as to labours and miscarriages
 - (4) Labour—
 - (a) Expected date of confinement
 - (b) Date and hour when labour began
 - (c) Date and hour when child born
 - (d) Complications (if any) during labour
 - (5) Lying-in period—
 - Complications (if any)
 3. The child—
 - (1) Sex and condition at birth
 - (2) Progress during lying-in period
 4. The midwife—
 - (1) Date and hour of arrival
 - (2) Date when attendance ceased
 5. Name and address of practitioner in attendance (if any).
 6. Remarks
- Signature and address of midwife
- Date

Midwives Act 1928.

FIRST SCHEDULE.—FORM 21.

REPORT OF MIDWIFE IN CASE OF EMERGENCY.

To the Registrar, Nurses Board,
352 Collins-street, Melbourne.

In pursuance of the provisions of the Midwives Regulations, I report that the emergency,
described below occurred in the case of (name)
of (address) , and that Dr. (name)
attended.

Signature
Address
Registered No.
Date

Date and time of emergency p.m. a.m.
Nature of emergency

Midwives Act 1928.

FIRST SCHEDULE.—FORM 22.

NOTIFICATION OF HAVING LAID OUT A BODY.

To the Registrar, Nurses Board,
352 Collins-street, Melbourne.

I, the undersigned, being a midwife holding a Certificate of Registration (No.)
under the *Midwives Act 1928*, hereby notify that on the day of
19 , I prepared or assisted to prepare a dead body for burial, the particulars in respect
of which are below.—

Name of deceased
Residence of deceased
Age of deceased
Cause of death

Signature
Address

Midwives Act 1928.
FIRST SCHEDULE.—FORM 23.
STATUTORY DECLARATION.

To the Registrar, Nurses Board,
352 Collins-street, Melbourne.

I,
of
in the State of Victoria, do solemnly and sincerely declare that neither I, nor my husband nor any other person liable under the *Maintenance Act 1928*, is able to pay the fees of the medical practitioner who was called to the assistance of the midwife attending me during my last confinement.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of an Act of the Parliament of Victoria rendering persons making a false declaration punishable for wilful and corrupt perjury.

Declared at _____, in the State of Victoria, this _____ day of _____,
One thousand nine hundred and _____
Before me—

Midwives Act 1928.
FIRST SCHEDULE.—FORM 24.
ELECTION OF A MEMBER OF THE NURSES BOARD.

NOMINATION FORM.

We, the undersigned registered midwives entitled to vote at the present election of a registered midwife to the Nurses Board, hereby nominate—

_____ of _____
(full name) (registered address)
as a candidate for election to the said Board.
(Here must be inserted the full names, signatures, registered addresses, and registration number of at least six nominators.)

I, _____ of _____
(full name) (registered address)
hereby consent to the above nomination.
Dated this _____ day of _____ 19 _____

NOTES—

- (1) The person nominated must be a registered midwife (not being a registered nurse).
- (2) If registered midwives desire to nominate more than one candidate, a separate nomination form must be used for each nomination.
- (3) Nominations must be sent to the Returning Officer at _____ and must reach him not later than noon on the _____ day of _____ 19 _____.
- (4) This is *not* a ballot-paper. Ballot-papers will be sent to registered midwives after the close of nominations.

Midwives Act 1928.
FIRST SCHEDULE.—FORM 25.
ELECTION OF A MEMBER OF THE NURSES BOARD.

BALLOT-PAPER.

Candidates. _____ (Initials of
Returning Officer.)
(Names in full arranged in alphabetical order of surnames.)

DIRECTIONS.

1. You must strike out the name of every candidate except the one for whom you wish to vote.
2. You must, in the space provided in the accompanying return-envelope, sign your name and state your registered address and registration number; then mark and fold your ballot-paper and enclose it in such envelope and post or deliver such envelope or cause it to be delivered to the Returning Officer in time to reach him not later than noon of the _____ day of _____ 19 _____.

SECOND SCHEDULE.
SYLLABUS OF STUDY.

Systematic lectures shall include the following courses:—

Midwifery.—To be delivered by a legally qualified medical practitioner approved by the Board.

Anatomy of the pelvis and female organs of generation.
Physiology of conception and development; signs and symptoms of pregnancy.
Hygiene and management of pregnancy.
Diseases and complications of pregnancy.
Extra-uterine pregnancy.
Abortions—symptoms, diagnosis, treatment.
Mechanism of labour—vertex, face, and breech presentations.
Phenomena of labour.
Management of normal and abnormal labour.
The normal puerperium and its management.
Complications of the puerperium.
Complicated labour—eclampsia, rupture of the uterus.
Hæmorrhages—varieties and treatment.
Asepsis—antiseptics and their uses.
Abnormalities of child and pelvis.
Description and uses of appliances.
Duties of midwife.
Obstetric emergencies, and how they should be treated pending the arrival of the medical practitioner.
Manifestations of venereal disease.
Disinfection of person, clothing, and appliances.
Care of infants born apparently lifeless.

Care and Feeding of Infants.—(a) To be delivered by a legally qualified medical practitioner approved by the Board.

The beginning of respiration—the management of cases of delayed breathing and, apparent death.
 The temperature of the new born.
 The care of the eyes of the new born.
 The care of the umbilicus.
 The more common injuries and deformities of the new born.
 The more common diseases of the new born; their detection and management so far as these lie within the province of the nurse.

Growth and Development of the Child.—(b) To be delivered by a registered infant welfare nurse approved by the Board.

Baby's Requirements.—Nursery equipment, bathing, clothing, fresh air, rest, exercise, prevention of deformities by tight binders and large napkins, care of skin and buttocks.

Nutrition of infant and regulation of habits.

Natural Feeding.—The advantages of breast feeding (a) to the mother; (b) to the infant. The hygiene of the nursing mother, the induction of breast-feeding (a) in normal cases; (b) in difficult cases—methods of overcoming or circumventing difficulties—test feedings—breast stimulation and milk expression. Hours of feeding—the overfed baby, the underfed baby, the nervous baby. The influence of sunlight on nutrition. The value of regular accurate weighing and measuring. value of regulation of habits.

Artificial Feeding.—Comparison of composition of human and cows' milk. Modification of cows' milk—care of cows' milk and feeding utensils. Comparison of other infant foods and their deficiencies. Determining factors for artificial feeding. Complementary feeding.

Observation of stools.

Nursing of premature babies.

Common errors in management of infants.

The abuse of castor oil, olive oil, "dummies," sweetmeats, and glycerine of borax.

Suggested schedule, practical instruction—

- (a) Natural Feeding.—Care of mother and baby in normal and difficult breast-feeding cases. Breast stimulation. Test feedings.
- (b) Care of premature or delicate baby.
- (c) Preparation of artificial feeding for normal and premature babies.

Invalid Cookery.—Demonstrations to be given by an instructor approved by the Board.

The preparation of invalids' drinks, the cooking of beef-tea, broths, poultry, fish, eggs, light puddings, jellies, vegetables, and fruits.

Invalids' drinks—barley-water, toast-water, lemonade, apple-water, white wine—whey, &c.

Beef-juice, beef-tea—various methods.

Broths—chicken, mutton, &c.

Fish—filleting; various methods of cooking.

Poultry—methods of baking and boiling.

Brains, sweetbreads, and tripe—various methods of cooking.

Chops and steak—various methods of cooking.

Custards and light puddings—baked and boiled custard, baked rice, rice custard, tapioca pudding, &c.

Eggs—various methods of preparing.

Jellies—wine—lemon, &c.

General Nursing.—Lectures and demonstrations to be given by instructors approved by the Board.

Outline of anatomy and physiology.

Qualifications of a midwifery nurse.

Distinctions between the doctor's work and that of the nurse.

Bed-making—management of helpless patients.

Hygiene of confinement room—ventilation, lighting, temperature, &c.

Baths, sponging, &c.

Infection—prevention and disinfection.

Use of clinical thermometer.

The pulse—its variation and methods of record.

Respiration—its methods of record.

External appliances—preparation of poultices, fomentations, cold and hot packs, hot-air baths.

Counter irritation—leeches, blisters.

Various methods of administering drugs, enemata, subcutaneous injections (hypodermic saline, &c.).

Lotions in common use—strengths.

Rashes due to drugs, &c.

Methods of observing symptoms and manner of reporting to the doctor.

Preparation for instrumental delivery.

Washing out uterus and curettage.

Instruments—their care and use.

Food—choice, care, cleanliness, and administration.

Bandaging—breast and leg.

Urine testing.

Preparation of skin for operation.

Catheter—use of.

Asepsis—(sterilization of dressings, &c.).

Practical Instruction.

Practical instruction shall include practical training—

- (a) in the duties of midwife;
- (b) in the preparation of infants' food;
- (c) in invalid cookery;
- (d) in general nursing so far as it applies to lying-in women and infants; and
- (e) in infant and maternity hygiene.

Practical Experience.

No trainee shall be eligible to present herself for examination for a certificate of competence as a midwife unless she has—

- (a) made an ante-natal investigation under proper supervision in respect of at least twenty pregnant women;
 - (b) witnessed not fewer than ten cases of labour prior to personally conducting any case;
 - (c) watched the progress of and personally conducted not less than twenty cases of labour, fifteen of which shall have been conducted in an approved training hospital;
 - (d) nursed not less than twenty lying-in women and their infants during the ten days following labour.
- “(e) Notwithstanding anything in the foregoing Regulations, any nurse at the Women's Hospital who has watched the progress of, and personally conducted not less than ten cases of labour, all of which were conducted in an approved training hospital, and assisted with at least five additional midwifery cases and has made a statutory declaration to this effect, shall be deemed to have completed the prescribed number of cases necessary to enable her to present herself for examination for a certificate of competency as a midwife.”

Text-books recommended—

Jellett's *Short Practice of Midwifery for Nurses*.
 Berkeley's *Handbook for Midwives and Maternity Nurses*.
 Millicent Ashdown—*A Complete System of Nursing*.
 Groves & Brickdale on Anatomy, Physiology, Surgery, and Medicine.

THIRD SCHEDULE.
EMERGENCIES.

1. *Pregnancy*.—In the case of a pregnant woman—
 - (a) when abortion or miscarriage threatens or occurs;
 - (b) if the patient is a dwarf or deformed;
 - (c) when there is excessive loss of blood;
 - (d) when there is any abnormality or complications such as—
 - excessive sickness;
 - puffiness of hands or face;
 - fits or convulsions;
 - dangerous varicose veins;
 - purulent discharge;
 - sores of the genitals;
 - persistent headaches;
 - dimness of vision;
 - illness or abnormality or stillbirth in a previous pregnancy.
2. *Labour*.—In the case of a woman in labour at or near term when there is any abnormality or complications, such as—
 - fits or convulsions;
 - a purulent discharge;
 - sores on the genitals;
 - a malpresentation;
 - presentation other than normal;
 - when no presentation can be made out;
 - when there is excessive bleeding;
 - where, two hours after the birth of the child, the placenta and membranes have not been completely expelled;
 - in cases of rupture of the perinaeum, or of other injuries of the soft parts;
 - in cases where labour has been prolonged more than 24 hours;
 - where general condition of the patient is unsatisfactory.
3. *Lying-in*.—In the case of a lying-in woman, when there is any abnormality or complications, such as—
 - fits or convulsions.
 - abdominal swellings and tenderness;
 - offensive lochia;
 - rigor, with raised temperature;
 - puerperal pyrexia;
 - unusual swelling of the breasts with local tenderness or pain;
 - secondary post-partum hæmorrhage;
 - white leg.
4. *General*.—In all cases in which a woman during pregnancy, labour, or lying-in appears to be dying or dead.
5. *The Child*.—In the case of the child, when there is any abnormality or complication, including—
 - injuries during birth;
 - any malformation or deformity in a child;
 - dangerous feebleness;
 - inflammation of, or discharges from, the eyes, however slight;
 - serious skin eruptions;
 - inflammation about, or hæmorrhage from, the navel;
 - premature birth endangering the child's life.

FOURTH SCHEDULE.

SCALE OF FEES PAYABLE TO PRACTITIONERS FOR ATTENDING
CASES OF EMERGENCY.

The scale of fees payable by the Board to medical practitioners for attending cases of emergency as defined in Part III. shall be set out below :—

Scale of Fees.

	£	s.	d.
(1) Visit and advice (pregnancy, labour, lying-in) ..	0	10	6
(2) Abortion-curettage	3	3	0
(3) Delivery	1	1	0
(4) Delivery after version or destructive operation ..	2	2	0
(5) Perineal repair, where called in after delivery ..	1	1	0
(6) Complete perineorrhaphy	2	2	0
(7) Expression of placenta or post-partum hæmorrhage—			
(a) where no intra-uterine manipulation is required ..	0	10	6
(b) where intra-uterine manipulation is required ..	1	1	0
(8) Lying-in-curettage	2	2	0
(9) Anæsthetist's fee (if special anæsthetist required) ..	1	1	0

"By day" to which the above fees refer, shall mean that the practitioner has been called from his residence between the hours of 8 a.m. and 8 p.m.

"By night," for which 10s. 6d. in addition to the above fees may be claimed, shall mean that the practitioner has been called from his residence between the hours of 8 p.m. and 8 a.m.

Mileage rates, chargeable one way only, and to be reckoned from the practitioner's residence—

For every mile or portion thereof after the first mile, up to 3 miles—

By day, 2s. 6d. per mile.

By night, 5s. per mile.

For every mile or portion thereof after 3 miles

By day, 5s. per mile.

By night, 7s. 6d. per mile.

Claims under this Schedule shall be lodged with the Board within three months from the date of attendance.

FIFTH SCHEDULE.

DISINFECTION.

"Antiseptic" means any substance which has the power of preventing the growth and multiplication of germs. Disinfectants of weak strength are antiseptic in action.

"Asepsis" means a condition free from infective germs.

"Aseptic" means belonging to or pertaining to asepsis.

"Deodorant" means any substance which has the power of neutralizing bad odours. Some deodorants act by destroying the germs which produce the odour; others act by absorbing the odour, e.g., charcoal, and are not necessarily disinfectants.

"Disinfectant" means any substance which is capable of destroying the germ which causes infection, and includes heat, formalin, lysol, perchloride of mercury, permanganate of potash, carbolic, &c.

"Fumigant" means any substance which, when suitably treated, yields gas or fumes which act as an antiseptic or disinfectant.

"Germicide" has the same meaning as "disinfectant."

"Sepsis" means an infective condition of the body produced by disease germs.

"Septic" means belonging to or pertaining to sepsis.

"Septicæmia" means a condition of the body when the germs of infection or their toxins are in the blood.

"Sterile" means free from germs.

Personal Disinfection.

The disinfecting solution referred to in clause 50 (a) may consist of 1 oz. (two table-spoons) to 2 gallons of water of Accol, Kerol, Cyllin, Hycol, Izal, or other standardized disinfectants of equivalent strength.

The hair may be treated with the following disinfecting solution :—

Formalin—2 drams.

Spirit rect.—1 oz.

Rose water—to 10 oz.

The liquid is to be applied and thoroughly rubbed in so as to come in contact with all the hair.

Disinfection of Clothing.

The clothing referred to in clause 50 (c) may be disinfected in a similar solution to that recommended for a bath in the preceding paragraph.

To generate the formaldehyde fumes referred to in clause 50 (d) proceed in the manner indicated below :—

(1) Place a bucket or similar receptacle on the floor of the fume-chamber.

(2) Place crystals of permanganate of potash in the bottom of the bucket.

(3) Mix the formalin with an equal quantity of water, and pour over the crystals.

(4) Close the door of fume-chamber tightly.

For every 100 cubic feet of space use 2 oz. of formalin, 2 oz. of water, and 1 oz. of permanganate of potash.

A cupboard or wardrobe may be used as a fume-chamber.

Disinfection of Instruments.

All instruments and appliances that are injured by boiling in water should be immersed for 30 minutes in a solution containing one teaspoonful of accol to 1 pint of water, or other standardized disinfectant of equivalent strength.

Liquor cresolis saponatus, lysol, pacolol, &c., may be used, but as the strength of these is about one-fifth of the germicidal strength of accol, the quantity of disinfectant required to be added to the water should be increased accordingly.

Instruments and appliances disinfected by chemical disinfectants should be thoroughly washed in freshly boiled water before use.

The midwife should be very careful that instruments and appliances are disinfected immediately before use in every case.

Disinfection of Arms and Hands.

Turn sleeves well above the elbows and fasten there.

Wash hands and arms thoroughly in hot water, using soap freely, or in 1 per cent. solution of lysol or similar disinfectant (two teaspoonsful in a pint and a half of water).

Pay special attention to the nails, and use a nail-brush vigorously.

Wash off all trace of soap in fresh water, and immerse hands for one minute, at least in a solution of perchloride of mercury (1 in 500), or of biniodide of mercury (1 in 1,000).

Cleanliness and Disinfection of Eyes.

As soon as the head is born, and if possible, before the eyes are opened, the eyelids should be cleansed by gently wiping them with cotton wool swabs moistened with a weak solution of boric acid (a small teaspoonful to a pint of boiled water).

This should be repeated after the child is washed.

If there be any reason to suspect that the mother may be suffering from gonorrhoea, then drop, with a special drop-bottle, two drops of a 1 per cent. solution of nitrate of silver into each eye.

NOTE.—The foregoing particulars as regards disinfection are given only as a general guide for midwives; they should consult the medical attendant in all matters relating to the use of disinfectants.

Dated at Melbourne, this 30th day of August, 1941.

R. MARSHALL ALLAN, Chairman,	} Nurses Board.
E. PITCHFORD, Registrar,	

NOTE.—These Regulations are a consolidation of the Midwives Regulations 1935 and the Midwives Regulations made in 1939 and 1941.

Approved by the Governor in Council,
9th September, 1941.

C. W. KINSMAN,
Clerk of the Executive Council.

VICTORIA.

*The Nurses Acts.***REGULATIONS RELATING TO NURSES.**

THE Nurses Board of the State of Victoria, by virtue of the powers conferred by section 29 of the *Nurses Act* 1928, doth hereby make the Regulations following (that is to say):—

1. These Regulations may be cited as the Nurses Regulations 1941, and shall come into operation when published in the *Government Gazette*, and shall be separated into Parts as follows:—

- Part I.—Preliminary.
- Part II.—Training Schools for Nurses.
- Part III.—Courses of Training for Nurses.
- Part IV.—Examinations.
- Part V.—Registration of Nurses.
- Part VI.—Part-time Training Schools and Training Schools for Special Branches of Nursing.
- Part VII.—Registration of Nurses in Special Branches of Nursing.
- Part VIII.—Schedules.
- Part IX.—Election to the Nurses Board of Representatives of Registered Nurses.

PART I.—PRELIMINARY.

Repeal.

2. All Regulations heretofore made relating to matters provided for herein are hereby repealed.

Interpretation.

3. In these Regulations, unless inconsistent with the context or subject-matter—

“*After Care Hospital*” means the Melbourne District Nursing Society’s Hospital at Collingwood.

“*Approval*” means approval in writing of the Nurses Board; and

“*Approved*” has a corresponding interpretation.

“*Austin Hospital*” means the Austin Hospital for Chronic Diseases at Heidelberg.

“*Children’s Hospital*” means the Children’s Hospital at Carlton.

“*Committee of Management*” means the Committee, Board, or other body or person controlling the management of the hospital.

“*Eye and Ear Hospital*” means the Victorian Eye and Ear Hospital.

“*General Training School*” means any approved hospital which provides a complete course of training for nurses in accordance with the prescribed requirements.

“*Intermediate Hospital*” means a Hospital or Ward of a Public Hospital where patients are treated whose income makes them ineligible for admission to a Public Hospital, and is insufficient to allow them to pay ordinary medical fees or the usual private hospital maintenance charges.

“*Nomination day*” means the day appointed on or before which all candidates for any election must be nominated, and “*Polling day*” means the last day appointed at any election for the delivery of ballot-papers by voters to the Returning Officer, and words importing the feminine gender shall be deemed and taken to include males.

“*Part-time Training School*” means any approved hospital which provides part of the course of training in accordance with the prescribed requirements.

“*Prescribed*” means prescribed by the Acts or by the Regulations.

“*Queen’s Memorial Infectious Diseases Hospital*” means the Queen’s Memorial Infectious Diseases Hospital at Fairfield.

“*Queen Victoria Hospital*” means the Queen Victoria Memorial Hospital for Women and Children.

“*Register*” means the Nurses Register under the Acts.

“*Registered Nurse*” means a nurse (whether male or female) who is for the time being registered in the Register.

"Regulations" means Regulations made under the provisions of the Act.

"Royal Melbourne Hospital" means the Royal Melbourne Hospital at Melbourne.

"St. Vincent's Hospital" means St. Vincent's Hospital, Melbourne.

"The Act" means the Nurses Act 1928 as amended by the Nurses Acts 1931, 1936 and 1940.

"The Board" means the Nurses Board constituted under the Act.

"The Registrar" means the person appointed by the Board to that office under the Act.

"Trainee" means a person passing through the prescribed course of training in order to become entitled to be registered as a nurse.

"Women's Hospital" means the Women's Hospital at Carlton.

PART II.—TRAINING SCHOOLS FOR NURSES.

A.—GENERAL TRAINING SCHOOLS.

4. Any hospital which fulfils the following requirements to the satisfaction of the Board shall be eligible for the approval of the Board as a general training school for nurses for the purposes of the Act, namely:—

- (a) That no person other than a registered nurse holds (except in cases of emergency) any appointment thereat whether honorary or otherwise as the Matron or Sister or Nurse in Charge of the nursing of patients.
- (b) That the Matron or Sister or Nurse in Charge of the nursing thereat has had not less than three years' training in a hospital or hospitals recognized by the Board for the purpose.
- (c) That the period of the course of training for nurses thereat is not less than three years.
- (d) That the daily average number of occupied beds therein is not less than 40.
- (e) That general surgical and medical cases, both male and female, adult and children are treated therein.
- (f) That proper facilities for training are available and that trainees thereat shall receive practical instruction in the wards thereof from the Matron or other registered nurse, and take an active part in the preparation of patients for operations and assist during the progress of practical surgical work, provided however that such instruction shall not be approved unless the building, equipment, and appliances are approved by the Board.
- (g) (1) That proper facilities are available to ensure that trainees thereat shall attend a systematic course of lectures and receive instruction from legally qualified medical practitioners, and from the Matron or other registered Nurse in accordance with the curriculum of study set forth in Part A of the Second Schedule to these Regulations and pass the necessary examinations.
(2) That all courses of lectures shall be arranged to commence as set forth in the Second Schedule hereto.
- (h) That arrangements are made for proper facilities for trainees to receive a course of instruction in invalid cookery by a qualified cookery teacher approved by the Board, including not less than twelve lectures and instruction in the matters and subjects set forth in Part B of the Second Schedule hereto.
- (i) (1) Any trainee, prior to entering upon training, shall have attained the age of 17 years and shall have been personally interviewed by the Matron and selected by her after satisfying her as to his or her medical fitness.
(2) The probationary period of training in the wards for any trainee shall not exceed seven months, at the end of which period the Matron shall make a recommendation to the Committee as to suitability or otherwise of such trainee.
(3) Any period spent in a preliminary school by any person who subsequently becomes a trainee shall thereupon be deemed to be part of the period of training of such trainee.

- (4) Every trainee before commencing training shall be enrolled and the Matron shall forward a form of enrolment in Form 17 of the First Schedule and shall produce to the Board the Certificate of Education referred to in Regulation 12 hereof; and the trainee's birth certificate.
- (j) That any change of occupancy of the position of Matron is immediately reported to the Board.
- (k) That the hospital is being conducted and managed in an efficient manner.
- (l) That the staff shall maintain a proportion of not less than one registered Nurse for every five trainees.

5. The Committee of Management of any hospital desiring approval of such hospital as a general training school shall make application in the prescribed form to the Board through the Secretary, and such application shall be accompanied by a statement signed by the Medical Superintendent or Senior Medical Officer or the Secretary, and by the Matron in accordance with the particulars set forth in Form No. 1 of the First Schedule hereto.

6. The Board shall cause a list of hospitals approved as general training schools for nurses to be published in the *Government Gazette*.

7. If any hospital which has been approved as a general training school for nurses does not fulfil to the satisfaction of the Board all the requirements of the Regulations as to general training schools for nurses, the Board may at any time by notice to the Committee of Management, through the Matron or Secretary, or to the person in charge of such hospital, cancel its approval, and thereupon such hospital shall cease to be a general training school from the date specified in that behalf in such notice, and a copy of such notice shall be published in the *Government Gazette*. Any nurse then in course of training in such hospital shall serve such additional period of training as the Board may require.

8. (a) Every hospital approved as a General Training School for Nurses shall at any time upon being required to do so by notice in writing from the Board to the Committee of Management through the Matron or Secretary, or to the person in charge of such hospital, receive trainees in accordance with the methods of affiliation as set forth in Part III. of these Regulations, and shall preserve a fixed number of vacancies for trainees of an affiliated hospital.

(b) Affiliation shall be made according to a list approved from time to time.

(c) Every hospital approved as a General Training School for Nurses shall as soon as may be after the thirtieth day of June but not later than the thirty-first day of August in each year, forward a report to the Board, signed by the Matron and by the Medical Superintendent or Senior Medical Officer or Secretary, made up to the thirtieth day of June, and giving the particulars and in the form set forth in Form 2 of the First Schedule hereto.

B.—PART-TIME TRAINING SCHOOLS.

9. Hospitals which have not been approved by the Board as general training schools for nurses; schools for courses in special branches of nursing, and institutions such as fever hospitals, eye and ear hospitals, and gynaecological hospitals, may be approved as part-time training schools for nurses or as training schools for courses in special branches of nursing provided conditions laid down by the Board in Part VI. of these Regulations are complied with, and the Board may cancel any such approval.

PART III.—COURSE OF TRAINING FOR NURSES, INCLUDING A PERIOD NOT EXCEEDING TWO MONTHS, SERVED IN THE PRELIMINARY SCHOOL.

10. The period of the course of training for nurses shall be—

"1. (a) In a Hospital having not less than a daily average of 40 beds occupied and approved as a General Training School for Nurses—3 years.

(b) In a Hospital having not less than a daily average of 40 occupied beds, and approved as a Part-time Training School—3 years, provided it is affiliated with a General Training School in accordance with the Board's requirements.

(c) In a Hospital having less than a daily average of 40 occupied beds and approved as a Part-time Training School— $3\frac{1}{2}$ years, provided it is affiliated with a General Training School in accordance with the Board's requirements."

Sub-section II.—In a Hospital (other than Hospitals referred to in sub-sections III., IV., V., VI., VII., VIII., IX., X., XI., XII. of this section) with a daily average of less than 40 occupied beds, approved as a Part-time Training School— $3\frac{1}{2}$ years. $2\frac{1}{2}$ years at such Hospital, together with 1 year at a General Training School.

Sub-section III.—At the Royal Melbourne Hospital—3 years, including not less than 3 months at the Children's Hospital or other approved Hospital for the nursing of sick children.

Sub-section IV.—At St. Vincent's Hospital—3 years, including not less than 3 months at an approved Hospital for the nursing of sick children.

Sub-section V.—At the Children's Hospital—3 years, together with 6 months at an approved General Training School.

Sub-section VI.—At the Queen Victoria Hospital—2 years and 8 months, together with 4 months at an approved General Training School, i.e., 3 months in the nursing of male patients and 1 month casualty room experience.

Sub-section VII.—At the Women's Hospital—
3 years. (a) 1 year, together with 18 months at a General Training School, and a subsequent 6 months at the Women's Hospital.

3 years. (b) 1 year, together with a subsequent 2 years at a General Training School.

$3\frac{1}{2}$ years. (c) 1 year (second year), together with $2\frac{1}{2}$ years at a Part-time Training School.

Sub-section VIII.—At the Queen's Memorial Infectious Diseases Hospital—

3 years. (a) 1 year, together with a subsequent 2 years in an approved General Training School; or

(b) 1 year, together with 18 months in an approved General Training School, and a subsequent 6 months at Queen's Memorial Infectious Diseases Hospital.

Sub-section IX.—At the Eye and Ear Hospital—1 year, together with a subsequent $2\frac{1}{2}$ years at an approved General or Part-time Training School.

Sub-section X.—At the After Care Hospital—1 year, together with a subsequent $2\frac{1}{2}$ years at a General Training School.

Sub-section XI.—At a Tuberculosis Sanatorium, approved by the Board as a Part-time Training School—1 year, together with a subsequent $2\frac{1}{2}$ years in a General Training School.

Sub-section XII.—Male Nursing. At a hospital or institution approved for the training of Male Nurses—not less than 3 years, or 1 year at such hospital and a subsequent 2 years in the service of the Navy, Army, or Air Force Hospitals. The curriculum of training in Male Nursing is as set forth in the Second Schedule hereto, provided, however, that Male Nurses are required to obtain experience in Male Genito-Urinary Diseases, including Venereal Diseases, and have exemption from experience in Gynaecology and Cookery."

11. Nurses may commence their training at any approved hospital and may transfer to any other or others of such hospitals according to the convenience of the Training Schools, and with the approval of the Board, provided that no transfer shall be effected prior to passing the First Examination of the Board. The training from the time of commencement until completion thereof shall be continuous, but in exceptional circumstances upon application in that behalf being made to the Board before such continuity is broken, the Board shall have power to grant an exemption from the Regulations under such conditions as the Board thinks fit.

12. (1) Every trainee shall before commencing her training produce the Leaving, Intermediate, Proficiency Certificate in Home Arts and Crafts, Proficiency Certificate, or Victorian Merit Certificate, produce evidence from the Head Master or Head Mistress of a public or secondary school that she has reached a standard equivalent to the Certificate of Proficiency in Home Arts or Crafts or Proficiency Certificate, or shall pass the Board's qualifying educational examination.

(2) For the purposes of this Regulation the period within which evidence of educational qualifications shall be produced, prescribed in sub-clause (1), shall be deemed to include the first three months of the period of training.

13. Every trainee shall during her course of training receive practical instruction in the wards of her training school or schools from the Matron or other registered nurse, and shall take active part in the preparation of patients for operations, and shall assist during the progress of practical surgical work.

14. Every trainee shall during her course of training attend a systematic course of lectures, and receive instruction from legally qualified medical practitioners and from the Matron or other registered nurse in accordance with and in the subjects and matters set forth in Part A of the Second Schedule hereto.

15. Every trainee shall before the end of the first year of his or her course of training receive a course of instruction in elementary anatomy and physiology and other subjects prescribed in Part A and B of the Second Schedule hereto, and shall pass the Board's examination in those subjects. But a candidate who fails to obtain a pass in the First Professional Examination may sit for a Supplementary Examination in the subject or subjects in which he or she fails, but in the event of failure to pass in such Supplementary Examination the Board may require him or her to discontinue training.

16. Every trainee shall within twelve months prior to commencing training receive a course of instruction and attend lectures and pass an examination in invalid cookery by a qualified cookery teacher approved by the Board in accordance with and in the subjects and matters set forth in Part B of the Second Schedule hereto. Provided, nevertheless, that, when instruction in invalid cookery is provided for by the training school, it shall suffice that the aforesaid course of instruction and attendance at lectures and passing of the examination shall be undergone during the first year of her course of training.

PART IV.—EXAMINATIONS.

17. An examination shall be held at the end of the first year, and at the completion of training.

No person shall be entitled to enter for examination at the end of the first year, unless:—

(a) He or she has deposited with the Registrar a certificate signed by the Matron, Medical Superintendent, or other responsible officer of the institution or institutions in which his or her training or instruction was given or carried out, that he or she has completed one year of training, and that he or she has attended a course of lectures in the subjects prescribed in Regulation 18 of these Regulations for the First Professional Examination, and has undergone practical instruction in the wards in the subjects therein prescribed for that examination; such certificate shall be in the form or to the effect of Form 4 (Green), in the First Schedule hereto.

(b) He or she has paid the prescribed fee.

17B. No person shall be eligible for the Final Examination unless:—

(a) He or she has passed the Board's First Professional Examination.

(b) He or she has completed the course of training for the period and in the manner prescribed in Part III, of these Regulations.

(c) He or she has produced a certificate or certificates, signed by the Matron of the hospital or hospitals where he or she has received his or her training, that he or she has duly completed his or her course of training in accordance with these Regulations. Such certificates shall be in the form or to the effect of Form 4 (White), in the First Schedule hereto.

(d) He or she has paid the prescribed fee.

Provided that:—

- (a) In the event of the date of completing his or her period of the course of training falling between two examinations, the Board may permit him or her to present himself or herself at the examination next preceding the date of completion of his or her period of course of training, but in that event he or she must complete his or her period of course of training and produce his or her certificate or certificates to that effect before he or she is entitled to registration; and
- (b) when a course of study approved by the Board is taken within two years next preceding the commencement of training, the Board may permit the candidate to present himself or herself for Part I. of the First Professional Examination before commencing training, or grant credit for passing an approved examination of equal standard after such a course of study, and may grant exemption from the lectures in the subjects of Part I. during training, and from any written examination in these subjects.

SUPPLEMENTARY EXAMINATION.

Candidates, who have been granted a deferred examination, shall qualify in both the written and oral or practical portion of the subject in which they failed to satisfy the examiners, and shall not be permitted to present themselves for more than one subsequent examination in that subject.

18. The subjects of examination shall be—

- (a) First Professional Examination, Part I.—Elementary Anatomy and Physiology, Hygiene, which shall consist of one written paper, set and corrected by medical practitioners, who are examiners appointed by the Board.

Part II.—Junior General Nursing, which shall consist of a written, oral, and practical examination. The examiners in this part of the examination shall be registered nurses appointed by the Board.

- (b) Final Examination—

- (1) General nursing.
- (2) Medical nursing.
- (3) Surgical nursing.

19. The examination shall be written, oral, and practical. The written examination shall be held simultaneously at all centres throughout the State, and the final examination shall consist of three papers—one medical, one surgical, and one general nursing paper.

20. Candidates shall make application to the Board in the form of or to the effect of Form No. 3 in the First Schedule hereto for admission to the examination, and such application shall reach the Registrar at least fourteen days prior to the date on which the examination is to be held.

21. The First Professional Examination shall be held in the months of March, June, September, and December, in each year, and the Final Examination shall be held in the months of March, July, and November of each year, or at such times as the Board may determine.

22. The fees for examination shall be those set forth in the Third Schedule hereto.

23. Examinations shall be held at centres to be determined by the Board from time to time.

24. There shall be a Committee of Examiners and a Chairman of Examiners appointed by the Board for each examination.

25. The Committee of Examiners shall, subject to these Regulations, be responsible for the setting and marking of the written papers and the conduct of the examination generally.

26. Each examination paper shall be examined conjointly by two examiners, who shall submit the results to the Chairman of Examiners, and such Chairman shall have the right to revise such results, and his decision shall be final.

27. No examiner shall examine at either the oral or the practical part of the Final Examination candidates who have trained at a hospital of which she is the Matron or a nurse who has instructed trainees.

28. The examination question papers shall be sent sealed to the various centres where at the appointed time the seal shall be broken in the presence of the candidates, and the papers distributed by the supervisor appointed by the Committee of Examiners to be in charge of the examination.

29. After the examination the answers of candidates shall be forthwith placed in a sealed packet and forwarded to the Registrar.

30. Each candidate shall be provided with a numbered card which shall be presented to each examiner on the day of the practical and oral examinations for signature.

31. The candidate's number in figures and words shall be written at the right hand corner of each sheet of paper. The candidate's name shall not appear.

31A. EXAMINERS—CONDITIONS OF APPOINTMENT AND GENERAL INSTRUCTIONS.

1. *Appointment.*—Examiners shall be appointed as required from a Panel of Examiners for the State examination conducted by the Board; they shall be eligible for reappointment while still on the Panel, but will not as a rule be invited to serve for more than three consecutive years.

Acceptance of an invitation to act as an examiner will be regarded as an undertaking to carry out all duties required of examiners as set out in the instruction issued by the Board.

A.—SETTING PAPERS.

2. *Joint responsibility.*—Every examination paper shall be set by the Chairman of the Board, and examiners for the written part of that examination in consultation and all the examiners shall be jointly and severally responsible for every question contained in it.

3. *Copyright.*—It is a condition of appointment that any copyright possessed by the examiner in the examination papers prepared for the Board shall be vested in the Board.

4. *Proof.*—Only one proof of examination papers shall be made, and the Chairman shall satisfy himself that the proof is in every respect complete and accurate, and shall sign the proof to this effect.

B.—GENERAL.

5. *Vacation addresses.*—Examiners are informed that when on vacation their addresses must always be communicated to the Registrar, or measures must be taken by them to ensure the due forwarding of communications from the Board through their usual addresses.

As examination papers cannot be forwarded, examiners are requested to give early notice to the Registrar of their intention to go away on leave at any time during which they may be called upon to correct examination papers, or conduct oral and practical examinations in order that the Board may take the necessary steps for finding substitutes.

6. *Communication from candidates and training schools.*—Any communications which training schools or candidates may desire to make on the subject of examinations, or as to the manner in which candidates have answered at examinations, shall be made to the Registrar and not to examiners, and should any such communication be addressed to the examiners it shall not be dealt with by them, but shall be referred to the Registrar.

7. *Private tuition.*—It shall be a condition of appointment that examiners shall not during their term of office take any private pupil who is sitting for any State examination for which the said examiner shall be appointed to examine.

8. *Attendance at meetings.*—Attendance at meetings is an integral part of the duties attached to examinerships, and examiners are expected to make their other engagements consistent with such attendance.

The proceedings of all meetings of examiners must be regarded as strictly confidential.

ORAL AND PRACTICAL EXAMINATIONS.

9. In conducting *viva-voce* examinations, examiners are reminded that in order to make it more easy for a candidate to overcome nervousness from which she is likely to suffer, it is advisable that the first questions put to her should be of a simple character. Moreover, as it is the object of examinations to discover the range and accuracy of the knowledge of the candidate, the questions put should be sufficiently varied to enable her to do justice in these respects.

10. In the First Professional and Special Examinations 40 minutes shall be allowed to each candidate for the combined oral and practical examination.

11. Twenty minutes should be allowed to each candidate for the oral part of the Final Examination—ten minutes to each of two examiners, and twenty minutes for the practical part of examination.

12. *Detailed instructions.*—Further instructions of a strictly confidential nature are issued after an examiner has accepted an invitation to serve.

PART V.—REGISTRATION OF NURSES.

32. Application for registration as a nurse shall be made in the form set forth in the First Schedule, Form No. 5, hereto.

33. No person shall be registered as a nurse except as provided by the Act unless such person—

- (a) Has completed the prescribed course of training for the prescribed period in a hospital or hospitals approved by the Board.
- (b) Has passed at an examination of the Board in the prescribed subjects.
- (c) Before commencing training has produced to the Board the Certificate of Education referred to in Regulation No. 12 hereof, and also prior to the completion of the first year of training a certificate of efficiency in cookery from a qualified cookery teacher approved by the Board. Provided, however, that male nurses shall not be required to produce a certificate of efficiency in cookery.
- (d) Has paid the fee for registration prescribed in the Third Schedule hereto; and
- (e) Has satisfied the Board that the provisions of section 14 of the Act have been complied with.

34. Each person registered as a nurse shall be entitled to receive a certificate from the Board in the form set forth in the First Schedule hereto—Form No. 6—upon payment of the fee prescribed in the Third Schedule hereto.

35. (1) The register shall be kept in the form set forth in the First Schedule hereto—Form No. 7.

(2) The nurses' distinctive head-dress shall consist of an organdie muslin cap bearing the registered design, No. 10069, 40 inches or 36 inches square, width of hem $1\frac{3}{4}$ inches, depth of monogram not more than $1\frac{1}{2}$ inches, length of boomerang 3 inches, diagonal measurement from corner on the 40-in. cap $24\frac{1}{2}$ inches, diagonal measurement from corner on 36-in. cap 22 inches, measurement from each outer edge to point of boomerang on the 40-in. cap $16\frac{1}{4}$ inches, and on 36-in. cap $14\frac{1}{4}$ inches; or, the nurses' cap commonly worn by trained nurses in the State of Victoria and consisting of a piece of cloth or similar material folded so as to form a roll over the forehead of the wearer and to allow portion thereof to reach to or below the shoulder.

PART VI.—PART-TIME TRAINING SCHOOLS AND
TRAINING SCHOOLS FOR SPECIAL BRANCHES OF
NURSING.

36. The conditions referred to in Part II. B. are as follow:—

- I. Regulations 5, 6, 7, and 8 shall apply *mutatis mutandis* to all hospitals applying for and obtaining approval under this Part.

PART-TIME TRAINING SCHOOLS.

II. Any hospital which fulfils the following requirements to the satisfaction of the Board shall be eligible for the approval of the Board as a part-time training school for nurses for the purposes of the Act, namely:—

- (a) That no person other than a registered nurse holds (except in cases of emergency) any appointment thereat, whether honorary or otherwise, as the Matron or Sister or Nurse in charge of the nursing of patients.
- (b) That the Matron or Sister or Nurse in charge of the nursing thereat has had not less than three years' training in a hospital or hospitals recognized by the Board for the purpose.
- (c) That the period of the course of training available for nurses thereat is in accordance with Part III. of the Regulations.
- (d) That the daily average number of occupied beds is not less than 10.
- (e) That proper facilities for training are available and that trainees thereat shall receive practical instruction in the wards thereof from the Matron or other registered nurse, provided, however, that such instruction shall not be approved unless the building, equipment, and appliances are approved by the Board.
- (f) That proper facilities are available to ensure that trainees be required to pass the Board's first examination in subjects as contained in Schedule 2, Part A, within twelve months of the commencement of their course of training.
- (g) 1. That proper facilities are available to ensure that trainees thereat shall attend a systematic course of lectures and receive instruction from legally qualified medical practitioners, and from the Matron or other registered nurse in accordance with the Curriculum of Study set forth in Part A of the Second Schedule to these Regulations, and pass the necessary examinations.
2. That all courses of lectures shall be arranged to commence as set forth in the Second Schedule hereto.
- (h) That a certificate is issued to each trainee in the form set forth in Form No. 1 of the Fourth Schedule hereto.
- (i) That arrangements are made for trainees to receive during the first year of the course of training a course of instruction and attend lectures and pass an examination in invalid cookery by a qualified cookery teacher approved by the Board in accordance with and in the subjects and matters set forth in Part B of the Second Schedule hereto.
- (j) 1. Any trainee, prior to entering upon training, shall have attained the age of seventeen years, and shall have been personally interviewed by the Matron and selected by her after satisfying her as to his or her medical fitness.
2. The probationary period of training in the wards for any trainee shall not exceed seven months, at the end of which period the Matron shall make recommendation to the Committee as to the suitability or otherwise of such trainee.

3. Any period spent in a preliminary school by any person, who subsequently becomes a trainee, shall thereupon be deemed to be part of the period of training of such trainee.
4. Every trainee, before commencing training, shall be enrolled in Form 17 of the First Schedule, and the Matron shall forward a form of enrolment and shall produce to the Board the Certificate of Education referred to in Regulation 12 hereof; and the trainee's birth certificate.
- (k) That any change of occupancy of the position of Matron is immediately reported to the Board.
- (l) That the hospital is being conducted and managed in an efficient manner.
- (m) That the staff of the hospital shall include not less than two registered nurses, including the Matron, and shall maintain a proportion of not less than one registered nurse for every five trainees.
- (n) When a Part-time Training School is affiliated with a General Training School the trainee shall complete the first period of twelve months at the Part-time Training School and proceed to the General Training School for the prescribed period of training therein, upon completion of which he or she shall, subject to the Board's approval, serve the final period of her training at the Part-time Training School.

INFANT WELFARE TRAINING SCHOOLS.

III. (1) Any hospital which fulfils the following requirements to the approval of the Board may be recognized for the purposes of the Act as an Infant Welfare Training School:—

- (a) That the Matron or Sister in charge of the nursing or instruction thereat shall be registered as a nurse under the Acts, and shall have had not less than three years' training in a hospital or hospitals recognized by the Board as a general training school, and shall hold an approved certificate in infant welfare training; such infant welfare training (except in the case of Matrons or Sisters in charge at the date of these Regulations) shall have included training in mothercraft and experience in residential and non-residential mothercraft cases.
- (b) That provision is made for—
 - (1) Residential accommodation for trainees thereat;
 - (2) accommodation for not less than two nursing mothers and their babies;
 - (3) a sitting and dining room or rooms for mothers;
 - (4) a special ward properly equipped for premature babies;
 - (5) not less than four cots for artificially-fed babies (not including premature babies);
 - (6) approved facilities for examination of cases, breast stimulation, test feedings, weighing, and measuring babies;
 - (7) approved facilities for bathing and dressing;
 - (8) a properly equipped food dispensary;
 - (9) lecture and demonstration room;
 - (10) an emergency isolation ward;
 - (11) sun verandahs; and
 - (12) approved facilities for practical instruction in office work and keeping of records.
- (c) That during the course of training it shall maintain relative proportions of nursing staff and cots thereat, and numbers of babies received therein to the satisfaction of the Board.

- (d) That provision is made in accordance with the curriculum as set forth in the Fifth Schedule hereto for—
 - (1) Systematic courses of lectures by approved instructors; and
 - (2) practical instruction in the wards from the Matron or other approved registered nurse.
 - (e) That certificates of having attended the systematic courses of lectures, and of having received practical instruction in accordance with the curriculum as set forth in the Fifth Schedule hereto are issued to the trainees.
 - (f) That there shall be not more than three courses of training in each year, and each course of training shall be in accordance with the Fifth Schedule hereto; shall extend over a period of not less than four months; and shall include at least two months' training at a hospital, and at least 21 days at a District Infant Welfare Centre approved by the Board for the purpose.
- (2) (a) Notwithstanding anything contained in the last preceding paragraph, any Infant Welfare Training School may, with the approval of the Board, hold a Refresher Course as hereinafter described.
- (b) The Refresher Course shall be open to any nurse who has been registered as an Infant Welfare Nurse in Victoria, but whose training was commenced or carried out prior to the coming into force of the Nurses' Registration Regulations 1927. Upon any such nurse completing the Refresher Course and obtaining from the Training School a certificate to that effect, the Board shall accept such certificate as evidence that the person named therein has been trained in mothercraft, and has had experience in residential and non-residential mothercraft cases.
- (c) The Refresher Course shall also be open to any registered nurse in Victoria, who, whether in or out of Victoria, has completed an Infant Welfare Course of not less than three months' duration, has passed an examination, and obtained a certificate therein. Upon completing the Refresher Course and obtaining a certificate to that effect from the Training School, such nurse may present herself for the Special Infant Welfare examination of the Board.
- (3) No instruction as part of the Training Course at any District Infant Welfare Centre shall be approved unless—
- (a) The buildings, equipment, appliances, and daily average attendances are approved by the Board; and
- (b) The nurse in charge of the instruction thereat is registered under the Act, and has had not less than three years' training in a hospital or hospitals recognized by the Board as a general training school, and holds an approved certificate in Infant Welfare Training.
- (4) Every trainee who has complied with the requirements, passed the Special Infant Welfare Examination, and paid the prescribed fees for registration, shall be entitled to be registered as an Infant Welfare nurse.
- (5) For the purposes of these Regulations—
- “Hospital” includes a Mothercraft Home.
- “Mothercraft Home” means an institution which receives mothers and babies for the purpose of educating the mothers in the hygienic and dietetic care of themselves and their babies, and which provides a curriculum in accordance with the Fifth Schedule hereto.

"District Infant Welfare Centre" means a non-residential institution where mothers may visit for the purpose of receiving instruction in mothercraft.

"Training in Mothercraft" means training and education in detailed hygienic and dietetic care of mothers and babies.

"Refresher Course" means a course of training in Infant Welfare, which shall be for a period of not less than two months, and shall be carried out in accordance with the curriculum set out in the Sixth Schedule hereto.

(6) The forms of the First Schedule numbered 1A, 2A, and 4A shall apply in lieu of Forms 1, 2, and 4.

NURSING IN TUBERCULOUS DISEASES.

Training Schools for Tuberculous Diseases.

IV. (1) Any hospital or sanatorium for tuberculous diseases which fulfils the following requirements to the approval of the Board may be recognized for the purposes of the Acts as a Training School in the special branch of nursing known as Tuberculosis Nursing:—

- (a) That no person other than a registered nurse holds (except in cases of emergency) any appointment thereat, whether honorary or otherwise, as the Matron or Sister or Nurse in charge of the nursing of patients.
- (b) That the Matron or Sister or Nurse in charge of the nursing thereat has had not less than three years' training in a hospital or hospitals recognized by the Board for the purpose.
- (c) That the period of the course of training for nurses registered under Part V. of these Regulations does not exceed six months.
- (d) That trainees thereat receive practical instruction in the wards thereof from the Matron or other registered nurse.
- (e) That trainees thereat attend a systematic course of lectures and receive instruction from legally qualified medical practitioners and from the Matron or other registered nurse in the special subjects which relate to the nursing received at such hospital, and pass an examination therein and receive a certificate to that effect.
- (f) That a certificate is issued to such trainees.

ORTHOPAEDIC NURSING.

Training Schools in Orthopaedic Nursing.

V. (1) Any hospital for orthopaedic nursing which fulfils the following requirements to the approval of the Board may be recognized for the purposes of the Acts as a Training School in the special branch of nursing known as Orthopaedic Nursing:—

- (a) That no person other than a registered nurse holds (except in cases of emergency) any appointment thereat, whether honorary or otherwise, as the Matron or Sister or Nurse in charge of the nursing of patients.
- (b) That the Matron or Sister or Nurse in charge of the nursing thereat has had not less than three years' training in a hospital or hospitals recognized by the Board for the purpose.
- (c) That the period of the course of training available for nurses registered under Part V. of these Regulations does not exceed six months.
- (d) That proper facilities are available that trainees thereat shall receive practical instruction in the wards thereof from the Matron or other registered nurse, provided, however, that such instruction shall not be approved unless the building, equipment, and appliances are approved by the Board.

- (e) That proper facilities are available to ensure that trainees thereat shall attend a systematic course of lectures and receive instruction from legally qualified medical practitioners and from the Matron or other registered nurse in the special subjects which relate to the nursing received at such hospital, and pass an examination therein and receive a certificate to that effect.
- (f) That a certificate is issued to trainees.

INFECTIOUS DISEASES NURSING.

VI. (1) Any hospital for Infectious Diseases Nursing which fulfils the following requirements to the approval of the Board may be recognized for the purposes of the Acts as a Training School in the Special Branch of Nursing known as Infectious Diseases Nursing:—

- (a) That no person other than a registered Nurse holds (except in cases of emergency) any appointment thereat, whether honorary or otherwise, as the Matron, Sister or Nurse in charge of the nursing of patients.
- (b) That the Matron or Sister or Nurse in charge of the nursing thereat has had not less than three years training in a hospital or hospitals recognized by the Board for the purpose.
- (c) That the period of the course of training available for Nurses registered under Part V. of these Regulations does not exceed six months.
- (d) That proper facilities are available that trainees thereat shall receive practical instruction in the Wards thereof from the Matron or other registered Nurse, provided however that such instruction shall not be approved unless the building, equipment, and appliances are approved by the Board.
- (e) That proper facilities are available to ensure that trainees thereat shall attend a systematic course of lectures and receive instruction from legally qualified medical practitioners and from the Matron or other registered Nurse in the special subjects which relate to the nursing received at such hospital, and pass an examination therein, and receive a certificate to that effect.
- (f) That a certificate is issued to such trainees.

Gynaecological Diseases Nursing.

VII. (1) Any hospital for Gynaecological Diseases Nursing which fulfils the following requirements to the approval of the Board may be recognized for the purposes of the Act as a Training School in the Special Branch of Nursing known as Gynaecological Diseases Nursing:—

- (a) That no person other than a registered nurse holds (except in cases of emergency) any appointment thereat, whether honorary or otherwise, as the Matron, Sister, or Nurse in charge of the nursing of patients.
- (b) That the Matron, or Sister, or Nurse in charge of the nursing thereat has had not less than three years' training in a hospital or hospitals recognized by the Board for the purpose.
- (c) That the period of the course of training available for nurses registered under Part V. of these Regulations does not exceed six months.
- (d) That proper facilities are available that trainees thereat shall receive practical instruction in the wards thereof from the Matron or other registered Nurse, provided however that such instruction shall not be approved unless the building, equipment, and appliances are approved by the Board.
- (e) That proper facilities are available to ensure that trainees shall attend a systematic course of lectures and receive instruction from legally-qualified medical practitioners and from the Matron or other registered Nurse approved by the Board, in the special subjects which relate to the nursing received at such hospital, and pass an examination therein, and receive a certificate to that effect.
- (f) That a certificate is issued to trainees.

EYE, EAR, NOSE, AND THROAT DISEASES NURSING.

Training Schools for Eye, Ear, Nose, and Throat Diseases.

VIII. (1) Any hospital for eye, ear, nose, and throat diseases which fulfils the following requirements to the approval of the Board may be recognized, for the purposes of the Act, as a Training School in the special branch of nursing known as Eye, Ear, Nose, and Throat Diseases Nursing:—

- (a) That no person other than a registered nurse holds (except in cases of emergency) any appointment thereat, whether honorary or otherwise, as the Matron, Sister, or Nurse in charge of the nursing of patients.
- (b) That the Matron, or Sister, or Nurse in charge of the nursing thereat has had not less than three years' training in a hospital or hospitals recognized by the Board for the purpose.
- (c) That the period of the course of training available for nurses registered under Part V. of these Regulations does not exceed six months.
- (d) That proper facilities are available that trainees thereat shall receive practical instruction in the wards thereof from the Matron or other registered nurse approved by the Board, provided, however, that such instruction shall not be approved, unless the building, equipment, and appliances are approved by the Board.
- (e) That proper facilities are available to ensure that trainees shall attend a systematic course of lectures and receive instruction from legally qualified medical practitioners and from the Matron or other registered nurse approved by the Board, in the special subjects which relate to the nursing received at such hospital, and pass an examination therein, and receive a certificate to that effect.
- (f) That a certificate is issued to trainees.

PART VII.—REGISTRATION OF NURSES IN SPECIAL BRANCHES OF NURSING.

37. Applications for registration as the holders of special certificates under this Part shall be made in the form set forth in Form No. 5 of the First Schedule.

No person shall be registered as the holder of a special certificate unless such person—

- (a) Is a registered nurse.
- (b) Has, in addition to any training which may form part of her course of training under Part III. of these Regulations, completed the prescribed course of training for the prescribed period in a hospital approved by the Board as a school for a course in a special branch of nursing.
- (c) Has passed at an examination of the Board in the prescribed subjects.
- (d) Has paid the fee for registration prescribed in the Third Schedule.

38. Each person registered as the holder of a special certificate shall be entitled to receive a certificate from the Board in the form set forth in the Fourth Schedule, Form No. 2, upon payment of the fee prescribed in the Third Schedule.

The register under this Part shall be kept in the form set forth in Form No. 7 of the First Schedule.

PART IX.

39. *Regulation for election to the Nurses Board, pursuant to the Nurses Act 1940, of representatives of registered nurses.*

1. Subject to the special provisions, as hereinafter provided, for the first election in the year 1941, the following provisions shall apply to all elections of registered nurses as members of the Board:—

- (a) The Minister shall appoint a competent person, not being a member or officer of the Board, to be the Returning Officer.
- (b) (i) In any year in which representatives of registered nurses are to be elected to the Board, the Minister shall during the month of January give notice of the election in the *Government Gazette*, and the Registrar shall give similar notice in at least one recognized journal circulating amongst nurses, and at least two daily newspapers published in Melbourne.

- (ii) In every such notice the polling day (which shall be the last Friday in February in such year), the nomination day (which shall be not less than fourteen days after the date of the publication of such notice in the *Government Gazette*), the name of the Returning Officer, and the time and place when and where he will receive nominations, and the place where nomination forms may be obtained shall be specified.
- (c) Forthwith after the nomination day for any election the Registrar shall supply the Returning Officer with a roll of persons (giving the full name and address in each case) who on nomination day are registered nurses, and shall also supply the Returning Officer with an envelope addressed to each such person. Such roll shall be the roll of persons entitled to vote at the election.
- (d) (i) Every candidate for election must be a person registered as a nurse under the Nurses Acts.
- (ii) In order that any registered nurse may become or be a candidate at any election, she shall before Twelve o'clock noon on the nomination day deliver or cause to be delivered to the Returning Officer a nomination paper in or as nearly as may be in Form 26 of the First Schedule hereto stating the name and address and registration number of such registered nurse and signed by not less than six other registered nurses, and having at the foot thereof a statement under the hand of the registered nurse so nominated that she consents to such nomination.

No registered nurse who has not been so nominated shall be or be deemed to be a candidate at any election.

- (e) Any registered nurse who has been nominated may, by written notice addressed to the Returning Officer, withdraw her consent to her nomination at any time not later than Twelve o'clock noon on nomination day, and thereupon such registered nurse shall be considered as not having been nominated, and the Returning Officer shall omit the name of such registered nurse from the ballot-papers.
- (f) After Twelve o'clock noon on nomination day the Returning Officer shall, in respect of a contested election, announce the full name of each candidate nominated, and shall cause notice thereof to be published in the *Government Gazette*.
- (g) If the number of candidates nominated does not exceed five, the Returning Officer shall, by notice in the *Government Gazette*, declare such candidates duly elected, and shall forward a copy of such notice to the Minister.
- (h) If at any election more than five candidates have been duly nominated, a poll shall be taken, and the Returning Officer shall forthwith cause ballot-papers to be printed in or as nearly as may be in Form 27 of the First Schedule hereto, and shall, not later than the fourteenth day before polling day, send by post, or cause to be delivered, to each of the registered nurses entitled to vote, one of such ballot-papers duly signed or initialed by the Returning Officer, together with an open return-envelope bearing the Returning Officer's name and address.
- (i) When the voter has marked her vote on the ballot-paper, she shall place it in the addressed return-envelope, and she shall sign her name and state her registered address and registered number on the face of such return-envelope and post it or deliver it or cause it to be delivered to the Returning Officer in time to reach the Returning Officer not later than noon on polling day. Any ballot-paper which is not enclosed in an envelope with the voter's signature and the other specified particulars thereon or in respect of which the directions in accordance with Form 27 of the First Schedule hereto have not been substantially complied with shall not be counted in the scrutiny. The decision of the Returning Officer as to the validity or invalidity of any vote or ballot-paper shall be final.
- (j) Upon a voter satisfying the Returning Officer that she has not received a ballot-paper or that the ballot-paper received by her has been lost, spoilt, or destroyed, the Returning Officer may issue a new ballot-paper to such voter.

- (k) (i) A voter shall mark her ballot-paper by striking out the names of the candidates for whom she does not wish to vote.
- (ii) A voter may give and exercise five votes, giving not more than one vote for each of five candidates.
- (iii) Any ballot-paper recording more or less than five votes shall be rejected as informal.
- (l) Each candidate at any election shall be entitled to appoint in writing one scrutineer to be present during the scrutiny.
- (m) As soon as practicable after the close of the poll, the Returning Officer, in the presence of such scrutineers as are present, shall—
 - (i) produce unopened all return-envelopes received up to the close of the poll;
 - (ii) examine each envelope, and, if it is properly signed and properly endorsed with the prescribed particulars thereon and otherwise complies with the provisions herein contained, accept the vote for further scrutiny;
 - (iii) if an envelope is not properly signed or otherwise does not comply with the provisions herein contained, reject the vote without opening the envelope;
 - (iv) place the envelopes containing unrejected votes on a table face downward, so that the signature of the voters shall not be visible;
 - (v) open each such envelope, withdraw the ballot-paper contained therein, and, without inspecting the vote or permitting any other person to do so, deposit the ballot-paper in a ballot-box;
 - (vi) when all such envelopes have been opened and the ballot-papers withdrawn therefrom and deposited in the ballot-box, open the ballot-box, and count the votes.
- (n) The five candidates who have received the greatest number of votes shall be duly elected.
- (o) The Returning Officer may from time to time adjourn the scrutiny to a day and hour fixed by him and notified to scrutineers.
- (p) Subject to the provisions contained herein, the provisions of the law for the time being regulating elections for the Legislative Assembly shall, so far as they can be made applicable and with such adaptations, modifications, and substitutions as are necessary, apply to elections under this regulation.
- (q) If at any election the number of votes received by any two or more candidates are equal and the addition of one vote to any one of the said candidates would enable that candidate to be declared elected, the Returning Officer shall decide by lot which of such candidates shall be elected.
- (r) At any time before the gazettal of the result of any election as hereinafter provided, the Returning Officer may, if he thinks fit, on the written request of any candidate setting forth the reasons for the request, or may, of his own motion, make a recount of the votes.

If the Returning Officer refuses on the request of a candidate to make a recount of the votes, the candidate may, in writing, appeal to the Minister to direct a recount, and the Minister may, as he thinks fit, either direct a recount or refuse to direct a recount.
- (s) At the conclusion of every election, the Returning Officer shall, by notice in the *Government Gazette*, declare the result of the election and shall forward a copy of such notice to the Minister.
- (t) Forthwith after the declaration of the result of every election the Returning Officer shall forward to the Registrar all documents, rolls, and ballot-papers relating to the election, and the Registrar shall cause such documents, rolls, and ballot-papers to be stored at her office for a period of six months after receipt of same and then to be destroyed.
- (u) Any person who—
 - (i) personates any registered nurse for the purpose of voting at any election; or
 - (ii) votes or attempts to vote more than once at the same election—shall be liable to a penalty not exceeding Ten pounds.

2. For the first election in the year 1941 of representatives of registered nurses as members of the Board the following provisions shall apply in respect of the election of representatives of registered nurses:—

- (a) The notices of election given by the Minister and the Registrar, the nomination day, and the polling day shall be on such days and at such intervals as the Minister deems fit.
- (b) Subject to paragraph (a) of this clause such election shall be conducted in accordance with the provisions of this Regulation.

PART VIII.—SCHEDULES.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 1.

Application for the Approval of the Nurses' Board of a Hospital as a Training School for Nurses.

(Name of) _____ Hospital.
Date, 19 ____

To the Registrar,
Nurses' Board,
Melbourne.

Under the instructions of the Committee of Management (or as the case may be) of the above hospital, I hereby make application in the terms of the Nurses Regulations 1941 that the hospital be approved by the Nurses' Board as a General or Part-time Training School for Nurses, and I certify that the statements and particulars hereunder given are correct.

(Signed)

Secretary.

1. The daily average number of occupied beds, medical, surgical, and children's cases, and the number of operations performed in this hospital for each of the two years prior to this application:—

Year.	Daily Average of Medical Cases.	Daily Average of Surgical Cases.	Daily Average of Children's Cases.	Daily Average of Occupied Beds.	Number of Operations.
194 ..					
194 ..					

2. The name in full and qualifications, hospital at which trained, and period of training, of the Matron:—

3. The names of all persons holding appointment thereat, whether honorary or otherwise, as Sister or Nurse in Charge of the nursing of patients:—

4. The period of the course of training for nurses thereat:—

5. That trainees receive practical instruction in the wards from the Matron or other registered nurse, and take active part in the preparation of patients for operation, and assist during the progress of practical surgical work:—

6. That trainees receive instructions in the curriculum of study set forth in the Second Schedule (Part A) to the Nurses Regulations 1941:—

7. The names and qualifications of the lecturers and instructors:—

8. The number of lectures arranged to be given during a year:—

- (a) Anatomy and Physiology.
- (b) Hygiene.
- (c) General nursing.
- (d) Materia medica.
- (e) Surgical nursing.
- (f) Medical nursing.
- (g) Infectious diseases nursing.
- (h) Gynaecological nursing.
- (i) Eye, ear, nose, and throat nursing.
- (j) Children's nursing.

9. That arrangements are made for the trainees to receive a course of instruction in cookery by a qualified cookery teacher approved by the Board, including not less than twelve lectures and instruction in the matters and subjects set forth in Part B of the Second Schedule:—

(Signed)

Medical Superintendent or
Senior Medical Officer or
Secretary.

(Signed)

Matron.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 1A.

Application for the Approval of the Nurses' Board of a Hospital as a Special Training School for Infant Welfare Nurses.

Name

Date

To the Registrar,
Nurses' Board,
Melbourne.

Under the instructions of the Committee of Management (or as the case may be) of the above institution, I hereby make application, in the terms of the Nurses Regulations 1941, that the Board as a Special Training School for Infant Welfare Nurses, and I certify that the statements and particulars hereunder given are correct.

(Signed)

I. There is provision for—

- (a) Residential trainees;
- (b) Nursing mothers and babies;
Number of beds, —; Number of cots, —;
- (c) A combined sitting and dining room for mothers;
- (d) A special ward for premature babies;
- (e) Artificially-fed babies;
Number of cots, —;
- (f) A food dispensary;
- (g) Lecture and demonstration room;
- (h) An emergency isolation ward;
- (i) Sun verandah;
and facilities for examination of cases, bathing and dressing, and instruction of nurses in office work.

II. The names in full and qualifications of the Matron, Sister, and Nurses in charge of nursing or instruction thereat.

III. The number of training periods for nurses thereat during the year.

IV. The period of the course of training for nurses thereat.

V. The number of trainees thereat during each course.

VI. That the trainees receive practical and theoretical instruction at the above institution and at District Infant Welfare Centres set forth in the Fifth Schedule to the Nurses Regulations 1941.

VII. The names and qualifications of the lecturers and instructors.

(Signed)

Medical Superintendent or Senior
Medical Officer or Secretary.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 2.

Hospital. Date

Annual Report of a Training School for Nurses for the Year ending 30th June,

1. Daily average number of beds occupied for year ending 30th June, 19 :—
(a) General (b) Midwifery (c) Benevolent Cases
(d) The number of patients admitted for the year ending 30th June, 19
(1) Adult male; (2) adult female; (3) children.
2. The number of operations performed in the hospital during the year
3. The number of medical cases dealt with during the year
4. The number of surgical cases dealt with during the year
5. Number of lectures given during the year—
(a) Medical (b) Surgical (c) Anatomy and Physiology
(d) General Nursing (e) Other lectures as set forth in Second Schedule hereto
6. Names and qualifications of lecturers at 30th June, 19 :—
7. Name in full and qualifications of Matron at 30th June, 19 :—
8. Number of trainees on staff at 30th June, 19 :—
(a) Number of trainees in first, second, and final years of training during the year ended 30th June, 19
(b) Names of those trainees who discontinued training during the year.
9. Number and names of registered nurses on staff, exclusive of the Matron at 30th June, 19 :—

Kindly return before

(Signed)

Medical Superintendent or Secretary.

(Signed)

Matron.

To the Registrar,
Nurses' Board,
Melbourne.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 2A.

Name

Date

Annual Report of a Special Training School for Infant Welfare Nurses for the Year ending 30th June,

1. Daily average number of occupied beds and cots during each course of training for the year ending 30th June, 19 :—

- (a) Nursing mothers
- (b) Nursing babies
- (c) Artificially-fed babies
- (d) Premature and delicate babies

2. Number of training periods during the year:—

3. Number of lectures given during each course of training for the year ending 30th June, 19 :—

- Ante-natal
- Post-natal
- Posture work
- Public speaking
- Demonstrations

4. Names and qualification of lecturers during the year ending 30th June, 19 :—

5. Name in full and qualification of Matron, during each course of training for the year ending 30th June, 19 :—

6. Number of trainees on staff during each course of training for the year ending 30th June, 19 :—

7. Number and names of registered nurses on staff, exclusive of Matron, during each course of training for the year ending 30th June, 19 :—

Kindly return before

(Signed)

Medical Superintendent,
Senior Medical Officer,
or Secretary.

(Signed)

Matron.

To the Registrar,
Nurses' Board,
Melbourne.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 3.

Application Form for Examination.

To the Registrar,
Nurses' Board,
Melbourne.

I hereby apply to sit for the ^{First} examination of the Nurses Board to be held on ^{Final}

I desire to sit at (cross out places not applicable) MELBOURNE, BALLARAT, BENDIGO (or other approved centre), and herewith enclose First examination fee of 10s. 6d. Final examination fee of £1 1s.

[Please fill in in block letters.]

Name in full (surname)

(Christian names)

Present address

Training School

Date of commencing training in present school

What other training (if any) have you previously had (give dates and places)?

What instruction have you received in invalid cookery? State the date of completion of course, and the school at which instruction was received.

(Signature of Nurse)

Kindly cross out words not applicable.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 4.

Certificate of Completion of Training.

We hereby certify that.....has completed "at the.....hospital or hospitals".....months of his or her period of training as required by the Board for entry for the First Examination, and that he or she has attended the following number of lectures in the subjects set out hereunder, and has received practical instruction in the wards as prescribed in the Regulations, the periods of which are stated hereunder—

Number of Lectures Attended.

—	Anatomy and Physiology.	Hygiene.	General Nursing.
First Examination			

Final Examination.

Date of passing first examination

Number of Lectures Attended.

Medical Nursing.	Surgical Nursing.	General Nursing.	Maternal Medicine.	Infectious Diseases.	Children's Diseases.	Gynaecology.	Eye, Ear, Nose, and Throat.

Periods of Training Served in the—

Medical Wards.	Surgical Wards.	Children's Wards.

Medical Officer.....

Matron

Secretary

Date.....

A certificate to the effect that the candidate has received instruction in Invalid Cookery must be submitted with the application to sit for the First Examination.

If more convenient, copies of the certificate certified as true and correct by a justice of the peace may be attached to the form of application.

For the Final Examination, Form 4 is to be completed in respect only to the instruction given in the Training School from which the candidate enters. When part of the training has been undertaken at an affiliated training school, the pink Form 1 of the Fourth Schedule hereto shall also be attached to the candidate's form of application to sit for examination.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 4A.

Certificate of Completion of Infant Welfare Training.

The Registrar,
Nurses' Board,
Melbourne.

We certify that.....has completed the period of four months special training in Infant Welfare required for the

registration by the Board at the date of this examination, and that she has attended the following number of lectures, demonstrations, and clinics:—

Subject.	Lectures.	Demonstrations.		Clinics.
		As Observer.	As Demonstrator.	
Ante-natal Care ..				
Post-natal Care ..				
Posture Work ..				
Public Speaking ..				

And that she has had the required practical experience in the residential training school, having had under her supervision and care—

A nursing mother or mothers for _____ days;
 A delicate or premature baby or babies for _____ days;
 An artificially-fed baby or babies for _____ days;
 Also that during her district experience she has paid
 Home Visits; _____
 Number of Home Visits to new babies, _____;
 Number of Home Visits to premature or delicate baby or babies; _____
 Number of Home Visits to artificially-fed baby or babies; _____
 Number of Home Visits to a breast-fed stimulation case or cases; _____
 and that she has conducted _____ test feedings and examined, weighed
 and measured _____ new babies.

Medical Officer.
Matron.
Secretary.
Date / /

Nurses Regulations 1941.
FIRST SCHEDULE.
FORM 5.

VICTORIA.
NURSES BOARD.
Application for Registration.

If application is made under section 9 clause (a).
If application for registration is made under section 9 clause (b), (c), or (d) section 10, 13, or 14.

I, (surname) [If married or widow, give maiden name and furnish certificate of marriage]
(Christian names in full)
(Address, permanent)
hereby apply to be registered as nurse under the provisions of section sub-section of the Nurses Acts, and herewith forward evidence that I am entitled to registration under that section and sub-section together with the required fee of 5s. for registration. 5s. for certificate.

I forward herewith a certified copy of my:—

Certificate of years training from the hospital, also cookery, educational, and birth certificates. If more convenient, certificates may be submitted to the Registrar for inspection. All copies must be verified by Statutory Declaration.

The following are the hospitals and places in which, and dates of periods during which I was training:—

[illegible]

I hereby declare that the above particulars are in every respect complete and true, and that I am (as required under section 15 of the Act) at least twenty-one years of age and am in such a state of health that no danger would be involved to patients to whom I attend.

Signature of applicant
Signature of witness
Address of witness

Names and Addresses of Referees as to Character.

(1)
(2)
Names and Addresses of Referees as to Character and Professional Efficiency.

(2)
If a nurse's application is not accepted the fee, 10s., will be returned.

The Registrar,
Nurses Board,
Melbourne.

Householders not being relatives of the applicant who have known her personally for not less than three years. Matrons of hospitals, registered medical practitioners, or other responsible persons under whom the applicant has worked for not less than three years prior to the 1st July, 1924.

FOR OFFICE USE ONLY.			
No.	Date of Registration	Christian Names	
Surname	Granted	Deferred	Refused
Referred to Board		Receipt	Acknowledged
Certificate Issued			
Comments—			

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 6.

Certificate of Registration.

Nurses Acts.

VICTORIA.

Signature of Nurse

This is to certify that
 is registered as a General Nurse in the State of Victoria under the
 provisions of section of the Nurses Acts 1928 and 1931.
 Dated at Melbourne this day of 19 .
 Chairman
 Registrar

Reg. No.

Nurses Board.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 7.

REGISTER.

Number of Certificate.	Date of Registration.	Name.		Address.	Section.	Hospital or Training Establishment.	Remarks.
		Surname.	Christian.				

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 8.

Application for the Approval of the Nurses Board of a Hospital or Sanatorium as a Special Training School for Nurses in Tuberculous Diseases.

(Name of)

Sanatorium or Hospital.

Date—

To the Registrar,
 Nurses Board, Melbourne.

Under the instructions of the Committee of Management (or as the case may be) of the above hospital or sanatorium, I hereby make application in the terms of the Nurses Regulations 1941 that the sanatorium or hospital be approved by the Nurses Board as a Special Training School for Nurses in Tuberculous Diseases, and I certify that the statements and particulars hereunder given are correct.

(Signed)

Secretary.

1. The daily average number of occupied beds, medical and surgical cases, in this hospital for each of the two years prior to this application—

Year.	Daily Average of Medical Cases.	Daily Average of Surgical Cases.	Daily Average of Occupied Beds.	Number of Operations.
19				
19				

2. The name in full, and qualifications, hospital at which trained, and period of training of the matron—

3. The names of all persons holding appointment thereat, whether honorary or otherwise, as sister or nurse-in-charge of the nursing of patients—

4. The period of the course of training for nurses thereat—

5. That trainees receive practical instruction in the wards from the matron or other registered nurse.

6. That trainees receive instruction in the curriculum of study set forth in the Seventh Schedule to the Nurses Regulations 1941.

7. The names and qualifications of the lecturers and instructors—

8. The number of lectures given during the course of training—

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 9.

Sanatorium or Hospital.
Date.*Annual Report of a Hospital or Sanatorium Approved as a Training School for Nurses in Tuberculous Diseases for the Year ended 30th June, 19 .*

1. Total number of patients admitted during the year—
 2. Daily average number of beds occupied for year ended 30th June, 19
 - (a) Medical—
 - (b) Surgical—
 3. The number of operations performed during the year—
 4. The number of medical cases dealt with during each course of training—
 5. The number of surgical cases dealt with during each course of training—
 6. Number of lectures given during each course of training—
 - (a) Medical section—
 - (b) Nursing section:
 - (1) Theoretical—
 - (2) Practical—
 - (3) Special—
 7. Names and qualifications of lecturers at 30th June, 19 .
 8. Name in full and qualifications of matron at 30th June, 19 .
 9. Number of trainees and names in full on staff at 30th June, 19 :
 - (a) Special—
 - (b) Part-time—
 10. Number and names of registered nurses on the administrative staff, exclusive of the matron—

(Signed)

Medical Superintendent or Secretary.

(Signed)

Matron.
- Kindly return before—
To the Registrar,
Nurses Board, Melbourne.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 10.

*Application Form for Examination.*To the Registrar,
Nurses Board, Melbourne.

I hereby apply to sit for the examination for a Certificate of Registration in the Special Branch of the Nursing of Tuberculous Diseases, and in support of my application I herewith submit the required fee of £1 1s.

Name in full (surname) (Christian names)

Present address—

Training School—

Date of commencing special training—

Signature of Nurse—

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 11.

Certificate of Completion of Training.

We hereby certify that _____ has completed six months' training at the _____ Sanatorium, and that during that period she has attended the following number of lectures and passed the prescribed examination.

Number of lectures given and attended in medical section—

Number of lectures given and attended in nursing section:

(a) Theoretical—

(b) Practical—

Number of lectures attended in special subjects—

(Signed)

(Signed)

(Signed)

Medical Officer.

Matron.

Secretary.

Date—

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 12.

NURSES BOARD, VICTORIA.

*Application by Registered Nurse for Special Certificate in the Nursing of*To the Nurses Board,
Melbourne.

Date—

I (Surname) (Christian names in full) being a
 of (address, permanent) Registered Nurse No. do hereby apply for a Special Certificate for
 under the provisions of section 6 (d) of the Nurses Act 1928, and herewith
 forward fee of 5s.

Signature of Applicant—

Signature of Witness—

Address of Witness—

For Office Use Only.

No. of Certificate—

Date of Approval—

Date of Examination—

Certificate issued—

Receipt acknowledged—

Comments—

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 13.

*Application for the Approval of the Nurses Board of a Hospital as a Special
Training School for Nurses in Orthopaedic Nursing.*

(Name of)

Hospital.

Date

To the Registrar,
Nurses Board, Melbourne.

Under the instructions of the Committee of Management (or as the case may be) of the above hospital, I hereby make application in the terms of the Nurses Regulations 1941 that the Hospital be approved by the Nurses Board as a Special Training School for Nurses in Orthopaedic Nursing, and I certify that the statements and particulars hereunder given are correct.

(Signed)

Secretary.

1. The daily average number of occupied beds and cots in this hospital for each of the two years prior to this application—
2. The name in full, and qualifications; hospital at which trained and period of training of matron—
3. The names of all persons holding appointment thereat, whether honorary or otherwise, as a sister or nurse-in-charge of the nursing of patients thereat—
4. The period of the course of training available for nurses thereat—
5. Facilities are provided that trainees shall receive practical instruction in the wards from the matron or other registered nurse.
6. Facilities are provided that trainees shall receive instruction in the curriculum of study set forth in the Eighth Schedule to the Nurses Regulations 1941.
7. The names and qualifications of lecturers—
8. The number of lectures arranged to be given during the course of training—

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 14.

Hospital.

Date

*Annual Report of a Hospital Approved as a Training School for Nurses in
Orthopaedic Nursing for the year ended 30th June, 19*

1. Total number of patients admitted during the year—
2. Daily average number of orthopaedic beds and cots occupied for year ended 30th June, 19 —
3. The number of orthopaedic operations performed during the year ended 30th June, 19 —
4. The number of lectures given during each course of training for the year—
 - (a) Anatomy and physiology.
 - (b) Orthopaedic diseases.
 - (c) Orthopaedic treatment.
 - (d) Principles of Orthopaedic nursing.
 - (e) Other lectures.
5. Names and qualifications of lecturers during the year ended 30th June, 19 —
6. Name in full and qualifications of matron at 30th June, 19 —
7. Number of trainees, and names in full on staff during each course of training at 30th June, 19 —
8. Number and names of registered nurses on the administrative staff, exclusive of the matron—

(Signed) Medical Superintendent or Secretary.

(Signed)

Matron.

Kindly return before
Melbourne.

to the Registrar, Nurses Board,

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 15.

Application for Examination.

To the Registrar,
Nurses Board, Melbourne.

I hereby apply to sit for the examination for a Certificate of Registration in the Special Branch of the Nursing of Orthopaedic Diseases, and in support of my application I herewith submit the required fee of £1 1s.

Name in full (surname) (Christian names)

Present address

Training school

Date of commencing special training

Signature of Nurse.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 16.

Certificate of Completion of Training.

We hereby certify that
has completed six months' training at the
Hospital, and that during that period she has attended the following number
of lectures in—

- (a) Anatomy and physiology.
- (b) Orthopaedic diseases.
- (c) Orthopaedic treatment.
- (d) Principles of Orthopaedic nursing.
- (e) Other lectures.

(Signed)

Medical Officer.

(Signed)

Matron.

(Signed)

Secretary.

Date

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 17.

NURSES BOARD, VICTORIA.

Application for Enrolment of Pupil Nurse as a Trainee.

Date

Hospital.

has completed his, or her, probationary period
at the Hospital, has reached the age of
years, and is considered suitable by this Hospital to continue the course of
training as a nurse.

This trainee is desirous of complying with the Regulations of the Nurses
Board and of completing his or her training.

The period of training to be undertaken at this Hospital is
and commenced on

Attached please find educational and birth certificates of

(Signed)

Matron.

(Signed)

Trainee.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 18.

Application for the approval of the Nurses Board of a Hospital as a Special
Training School for Nurses in Infectious Diseases Nursing.

(Name of)

Hospital.

Date

To the Registrar,
Nurses Board, Melbourne.

Under the instructions of the Committee of Management (or as the case may
be) of the above Hospital, I hereby make application in the terms of the Nurses
Regulations 1941, that the Hospital be approved by
the Nurses Board as a Special Training School for Nurses in Infectious Diseases
Nursing, and I certify that the statements and particulars hereunder given are
correct.

(Signed)

Secretary.

1. The daily average number of occupied beds and cots in this hospital for
each of the two years prior to this application.

2. The name in full and qualifications, hospital at which trained, and period
of training of Matron.

3. The names of all persons holding appointment thereat, whether honorary
or otherwise, as a Sister or Nurse in charge of the patients thereat.

4. The period of the course of training available for Nurses thereat.

5. Facilities are provided that trainees shall receive practical instruction in
the Wards from the Matron or other registered Nurse.

6. Facilities are provided that trainees shall receive instruction in the
Curriculum of Study set forth in the Ninth Schedule to the Nurses Regulations
1941.

7. The names and qualifications of lecturers.

8. The number of lectures arranged to be given during the course of training.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 19.

.....Hospital.
 Date.....
 Annual Report of a Hospital approved as a Training School for Nurses in Infectious Nursing for the year ended 30th June, 19
 1. Total number of patients admitted during the year
 2. Daily average number of beds and cots occupied for year ended 30th June, 19
 3. The number of operations performed during the year.
 4. The number of medical cases admitted for the year ended 30th June, 19
 Adult Male.....
 Adult Female.....
 Children.....
 5. The number of lectures given during each course of training for the year—
 (a) Medical Section:
 (1) Theoretical.
 (2) Practical.
 (b) Nursing Section:
 (1) Theoretical.
 (2) Practical.
 6. Names and qualifications of Lecturers during the year ended 30th June, 19
 7. Name in full and qualifications of Matron at 30th June, 19
 8. Number of trainees, and names in full, on the staff during each course of training at 30th June, 19
 9. Number and names of registered Nurses on the administrative staff, exclusive of the Matron.
 (Signed).....Medical Superintendent or Secretary.
 (Signed).....Matron.
 Kindly return before.....
 Registrar, Nurses Board, Melbourne

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 20.

Application for Examination.

To the Registrar,
 Nurses Board, Melbourne.
 I hereby apply to sit for the examination for a Certificate of Registration in the Special Branch of Nursing of Infectious Diseases, and in support of my application submit the required fee of £1 1s.
 Name in full (surname) (Christian name)
 Present address
 Training School
 Date of commencing special training
Signature of Nurse.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 21.

Certificate of Completion of Training.

We hereby certify that has completed
 six months training at the Hospital, and that during
 that period she has attended the following number of lectures in—
 (a) Medical lectures:
 (1) Theoretical.
 (2) Practical.
 (b) Nursing lectures:
 (1) Theoretical.
 (2) Practical.
 (Signed).....Medical Officer.
 (Signed).....Matron.
 (Signed).....Secretary.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 22.

Application for the approval of the Nurses Board of a hospital as a Special Training School for Nurses in Gynaecological Diseases Nursing.

(Name of).....Hospital.
 Date.....

To the Registrar,
 Nurses Board, Melbourne.

Under the instruction of the Committee of Management (or as the case may be) of the above Hospital, I hereby make application, in the terms of the Nurses Regulations 1941, that the Hospital, be

approved by the Nurses Board as a Special Training School for Nurses in Gynaecological Diseases Nursing, and I certify that the statements and particulars hereunder given are correct.

(Signed)Secretary.

1. The daily average number of occupied beds in this hospital for each of two years prior to this application.
2. The name in full and qualifications, hospital at which trained, and period of training, of Matron.
3. The names of all persons holding appointment thereat, whether honorary or otherwise, as a Sister or Nurse-in-Charge of the patients thereat.
4. The period of course of training available for nurses thereat.
5. Facilities are provided that trainees shall receive practical instruction in the wards from the Matron or other registered nurse.
6. Facilities are provided that trainees shall receive instruction in the curriculum of study set forth in the Tenth Schedule to the Nurses Regulations 1941.
7. The names and qualifications of lecturers.
8. The number of lectures arranged to be given during the course of training.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 23.

Date.....Hospital.

Annual report of a hospital approved as a Training School for Nurses in Gynaecological Diseases Nursing for the year ended 30th June, 19 .

1. Total number of patients admitted during year.
2. Daily average number of beds occupied for year ended 30th June, 19 .
3. The number of operations performed during the year.
4. The number of lectures given during each course of training for the year—
 - (a) Surgical section:
 - (1) Theoretical.
 - (2) Practical.
 - (b) Nursing section:
 - (1) Theoretical.
 - (2) Practical.
5. Names and qualifications of lecturers during the year ended 30th June, 19 .
6. Name in full and qualifications of Matron at 30th June, 19 .
7. Number of trainees, and names in full, on staff during each course of training at 30th June, 19 .
8. Number and names of registered nurses on the staff, exclusive of Matron.

(Signed).....Medical Superintendent,
or Secretary.

(Signed).....Matron.

Kindly return before.....

Registrar, Nurses Board.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 24.

Application for Examination.

To Registrar,

Nurses Board, Melbourne.

I hereby apply to sit for examination for a Certificate of Registration in the Special Branch of Nursing in Gynaecological Diseases Nursing, and in support of my application submit the required fee of £1 ls.

Name in full (surname) (christian name)
Present address
Training school
Date of commencing Special training

.....Signature of Nurse.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 25.

Certificate of Completion of Training.

We hereby certify that has completed four months' training at the Hospital, and that during that period she has attended the following number of lectures in—

- (a) Surgical lectures:
 - (1) Theoretical.
 - (2) Practical.
- (b) Nursing lectures:
 - (1) Theoretical.
 - (2) Practical.

(Signed).....Medical Officer.

(Signed).....Matron.

(Signed).....Secretary.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 26.

Election of Members of Nurses Board, 1941.

NOMINATION FORM.

We, the undersigned registered nurses entitled to vote at the present election of registered nurses to the Nurses Board, hereby nominate—

(full name) (registered address)
of
as a candidate for election to the said Board.
(Here must be inserted the full names, signatures, registered addresses, and registered numbers of at least six nominators.)

I, (full name) (registered number) (registered address)
of

hereby consent to the above nomination.

Dated this day of 19

NOTES—

- (1) The person nominated may be of either sex, but must be registered in the Nurses Register.
- (2) If registered nurses desire to nominate more than one candidate, a separate nomination form must be used for each nomination.
- (3) Nominations must be sent to the Returning Officer at and must reach him not later than noon on the day of 19
- (4) This is not a ballot-paper. Ballot-papers will be sent to registered nurses after the close of nominations.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 27.

Election of Members of Nurses Board.

BALLOT-PAPER.

Candidates.

(Names in full arranged in alphabetical order of surnames.) (Initials of Returning Officer.)

DIRECTIONS.

- (1) You must strike out the name of each candidate for whom you do not wish to vote.
- (2) You must be careful not to leave uncanceled the names of more or less than five (5) candidates; otherwise this ballot-paper will be informal.
- (3) You must, in the space provided in the accompanying return-envelope, sign your name and state your registered address and registered number; then mark and fold your ballot-paper and enclose it in such envelope and post or deliver such envelope or cause it to be delivered to the Returning Officer in time to reach him not later than noon of the day of 19

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 28.

Application for the Approval of the Nurses Board of a Hospital as a Special Training School for Nurses in Eye, Ear, Nose, and Throat Diseases Nursing.

(Name of)

Hospital.

Date—

To the Registrar.

Nurses Board, Melbourne.

Under the instruction of the Committee of Management (or as the case may be) of the above hospital, I hereby make application, in the terms of the Nurses Regulations 1941, that the Hospital be approved by the Nurses Board as a Special Training School for Nurses in Eye, Ear, Nose, and Throat Diseases Nursing, and I certify that the statements and particulars hereunder given are correct.

(Signed)

Secretary.

1. The daily average number of occupied beds in this hospital for each of two years prior to this application—
2. The name in full and qualifications, hospital at which trained, and period of training, of Matron—
3. The names of all persons holding appointment thereat, whether honorary or otherwise, as a Sister or Nurse-in-charge of the patients thereat—
4. The period of course of training available for nurses thereat—
5. Facilities are provided that trainees shall receive practical instruction in the wards from the Matron or other registered nurse.
6. Facilities are provided that trainees shall receive instruction in the curriculum of study set forth in the Eleventh Schedule to the Nurses Regulations 1941.
7. The names and qualifications of lecturers—
8. The number of lectures arranged to be given during the course of training—

Nurses Regulations 1941.
FIRST SCHEDULE.
FORM 32.

Result of Application

Date when considered by the Nurses Board

NURSES BOARD.

Examiner's Application Form.

All communications should be addressed to—

Registrar, Nurses Board, 352 Collins-street, Melbourne, C.1.

Name of Applicant in full ..	
Address	
Name of Training School at which the Applicant is Teacher or Lecturer	
Qualifications	
Professional and Teaching Experience	
Present Occupation	
Subjects in which the Applicant would desire to examine ..	
Previous experience of Examining (if any)	
Names and Addresses of those to whom reference may be made with regard to the Applicant's qualifications and experience	
Signature and date of making application	

Nurses Regulations 1941.
SECOND SCHEDULE.

PART A.

The curriculum of study for training in general nursing shall include the subjects and matters hereafter mentioned.

LECTURES.

To be attended during the First year (including lectures given in the Preliminary School)—

Anatomy and Physiology.

Hygiene.

General Nursing.

To be attended during the Second year—

Medical Nursing.

Surgical Nursing.

General Nursing.

To be attended during either the Second or Final year—

Gynaecological Nursing.

Materia Medica.

Children's Nursing.

Infectious Diseases.

Eye Diseases.

Ear, Nose, and Throat Diseases.

In a special hospital the lectures relating to the nursing received at such hospital may be taken during any year. These lectures need not be repeated at the affiliated school.

FIRST YEAR JUNIOR GENERAL NURSING.

Twelve lectures. (Nine to be attended.)

History of Nursing. Ethics. Hospital Etiquette. Bed Making. General Special—(1) Operation; (2) Fracture. Making occupied beds. Changing bed linen.

Comfort of patient in various positions in bed.

Disposal of soiled linen and dressings.

Care, cleansing, and disinfection of ward furnishings and utensils.

Admission of new patient. Care of clothes and valuables.

Care of the skin. Bathing in bed, and in bathroom. Attention to pressure points. Prevention and treatment of bed-sores.

Care of the head. Washing hair. Treatment of Pediculosis.

Care of mouth and eyes.

Taking temperature, pulse, respiration rate, and blood pressure. Keeping charts.

Administration of simple medicines. Lotions in common use, their strengths and dilution.

Feeding of patients:—

1. Serving of meals.
2. Feeding of helpless patients.
3. Keeping of diet charts.

Observation of patient.

Observation of urine, faeces, vomitus, sputum and discharges.

Preparation of specimens for examination:—Urine, faeces, vomitus, sputum, &c.

Disposal of infected excreta and secretions.

Testing urine for abnormalities.

Enemata in common use.

Counter irritants.—Linseed and other poultices, mustard applications. Methyl salicylate. Medical fomentations. Turpentine stupe. Leeches.

Preparation for simple dressing and surgical foment.

Preparation for simple catheterization of the bladder.

Preparation for simple bladder washout.

Preparation for simple vaginal douching.

Cleansing and disinfecting of catheters and ward instruments.

Care of patient in a fit or faint.

Bandages in common use:—Spicas of—elbow, groin, heel, knee, thumb, shoulder. To maintain dressing on—hand, forearm, foot, leg, head, front and back of neck; single and double mastoid; single and double eye; amputation stump; use of triangular bandage.

Medicated baths.

Irrigation of nose, throat, stomach, bowel, and bladder.

GENERAL NURSING.

Twelve lectures. (Nine to be attended.)

Preparation for blood culture. Venesection. Aspiration. Abdominal paracentesis. Lumbar puncture. Intravenous injections—blood, saline, &c.

Special Investigations. Urea concentration, blood urea. Test meal and other common tests.

Saline.—Its uses, and methods of administration.

Uses of cold.—Ice bag, cold pack, gutter bath.

Uses of heat.—Electric hot-air bath, hot pack.

Artificial feeding, nasal, oesophageal, gastrostomy.

Special enemata.

Inhalations.—Steam tent. Oxygen administration.

Technical terms and abbreviations in common use.

Ward management.

Preparation and sterilization of apparatus, instruments in common use.

Last offices.

Special work.

ELEMENTARY HYGIENE.

At least four lectures, of which all must be attended.

1. Personal hygiene.

2. Air.—Composition, impurities; ventilation, amount required, natural and artificial ventilation.

3. Food.—Classification of foods; essentials of normal diet.

4. Water.—Sources of supply; purification of water.

5. Disposal of waste.

SURGICAL.

Elementary bacteriology. Asepsis and anti-sepsis.

Inflammation.—Definition, treatment. Toxaemia, septicaemia, pyaemia.

Ulceration.—Varieties of ulcers—treatment.

Skin grafting.

Radium.—Care and use.

Fractures, injuries to joints, muscles and tendons, including the care and use of splints, plasters and extensions.

Preparation of the patient for operation.

Preparation of the operating room and general theatre technique.

Nursing care before and after operations on:—Alimentary system; kidneys and bladder; bones and joints; head; neck; thorax; limbs, including amputations; breast; hernia; thyroid gland.

Removal of sutures and clips.—Care and use of drain tubes and dams.

Surgical emergencies.—Haemorrhage; shock; collapse.

First aid in accidents and surgical emergencies.

Nursing care in cases of burns, head injuries, peritonitis.

Medical.

Twelve lectures. (Nine to be attended.)

Observation of patient and significance of symptoms.

Nursing treatment of diseases of:—Circulatory system; respiratory system; digestive system; urinary system; nervous system.

Common diseases of ductless glands.

Observation and care of comatose patients.

Common skin diseases as:—Scabies, impetigo, eczema, &c.

Typhoid Fever, including preventive measures.

First-aid in medical emergencies:—Delirium, drowning, including artificial respiration; fainting; fits—epileptic, apoplectic, hysterical.

Diet in normal nutrition.

Diet in relation to diseases such as:—Diabetes; nephritis; anaemia; peptic ulcer.

Ear, Nose, and Throat.

Two lectures. (All to be attended.)

Anatomy and physiology of ear.

Ears.—Preparation for—examination of, syringing, dressing.

Nursing care before and after operations on the nose and throat, including:—Paracentesis of ear drum; mastoidectomy; antrostomy; tonsillectomy; tracheotomy; sub-mucous resection.

Special treatments such as bronchoscopy, laryngoscopy.

Eye.

Three lectures. (All to be attended.)

Anatomy and physiology of eye.

Instillation of drops.

Bathing and dressing of eyes.

Nursing care in cases of:—Keratitis; glaucoma; cataract; detached retina; strabismus; corneal ulcer; infections of the lids; conjunctivitis; trachoma.

Children.

Four lectures. (All to be attended.)

Feeding and care of infants and small children.

Prevention and nursing care of such conditions as:—Convulsions; gastrointestinal upsets and infections; rickets; scurvy.

Surgical nursing in such conditions as:—Pyloric stenosis; intussusception; osteomyelitis; cleft palate; hare lip.

Infectious Diseases.

Three lectures. (Three to be attended.)

Infection.—Natural and artificial protection against infectious diseases.

Use of sera and vaccines.

Transmission of infection.

Prevention of spread.—Concurrent and terminal disinfection.

General principles in nursing infectious diseases.

Swabbing nose and throat.

Nursing care in diphtheria.—Faucial and laryngeal.

Nursing care in scarlet fever; measles; whooping cough; mumps; acute anterior poliomyelitis; venereal disease; cerebro-spinal meningitis; erysipelas.

Incubation periods of common specific fevers.

Gynaecology.

Four lectures. (All to be attended.)

Structure and function of organs of reproduction.

Preparation of patient for examination.

Positions in common use:—Sims'. Trendelenberg. Lithotomy. Left lateral. Genu—pectoral. Dorsal.

Preparation for and taking of a vaginal smear.

Pelvic inflammation.

Displacements of organs of reproductive system.

Disorders of function.—Dysmenorrhoea, amenorrhoea.

Common gynaecological operations.—Hysterectomy and vagino-plastic operations; operation on ovaries and tubes.

New growths.—Affecting reproductive system; use of radium for gynaecology.

Instruments in common use.

Materia Medica.

Five lectures. (All to be attended.)

Weights and measures.

Methods of administration of drugs.—Oral; rectal; injection; inunction; inhalation.

Antiseptics and disinfectants.—Use; strengths; dilution.

Drugs in common use.—Dosage; action; signs of over-dosage; intolerance; and idiosyncrasy.

Poisons.—Symptoms and treatment of most common.

Anaesthetics in common use.

Preparation of patient for anaesthetic.

Requirements of the anaesthetist.

Elementary Anatomy and Physiology.

At least twelve lectures, of which eight must be attended.

The Human Body.

General view—Cells, tissues, organs. Their arrangement and structure. The body as a whole. Chief cavities and their contents.

The Skeleton.

Skull.—Names, position and brief description of bones of cranium and face. Cranial bones—frontal, parietal, temporal, occipital, sphenoid, ethmoid. Bones of face—upper jaw, malar, lower jaw. Formation of orbit, nose, mouth.

Spinal column and thorax. General character of vertebrae. Varieties—cervical, dorsal, lumbar, sacral, coccygeal. The column as a whole, its curves, intervertebral discs, and joints. Sternum, ribs and costal cartilages.

Upper limb. Clavicle and scapula; humerus, radius, ulna, bones of wrist and hand; joints.

Lower limb. The pelvis; femur, patella, tibia and fibula. Bones of ankles and foot; joints.

Muscles and Joints.

Muscles. Their general features; voluntary and involuntary. Differences in their mode of action. The position of the chief muscles of the body.

Joints. Various forms of joints and their mechanism. Bones. Cartilages. Ligaments. Synovial membrane.

Circulation.

The heart. Position, size and function. Auricles and ventricles. Valves. Composition of the blood. Arterial and venous. Coagulation.

Blood vessels. Arteries, veins and capillaries, their structural differences. Names and positions of the chief arteries.

Circulation of the blood. General, pulmonary and portal circulation. Principal pressure points in haemorrhage.

Digestive System.

Alimentary Canal. Position, structure and functions of the mouth, teeth, glands, oesophagus, stomach, intestines. Classes of foods. Processes of digestion, absorption, and assimilation.

Respiratory System.

Lungs. The organs of respiration, the nasal cavity, the larynx, the trachea, the bronchi. Structure of lungs. The pleura and diaphragm. Mechanism and process of respiration. The chief muscles concerned in respiration.

Lymphatic System.

Lymphatic vessels. Glands. Thoracic duct. The spleen and ductless glands.

Excretory System.

The kidney—structure and functions. Urine. The skin—the epidermis; the dermis. Sweat glands. Hair and nails. Functions.

Nervous System.

Nervous system—cerebrum. Cerebellum. Spinal cord. Organs of special sense and spinal nerves. Reflex action.

Nurses Regulations 1941.

SECOND SCHEDULE.

PART B.

COOKERY.

At least twelve lessons, of which ten must be attended.

Subject.	Practical Work.	List of Dishes Suitable for Invalid Cookery Course.
Food and its Relation to Health— Definition, classification. Need for mixed and well-balanced diets. Need for careful selection during illness and convalescence.	The care of food and equipment. Use of thermometer. Importance of cleanliness. Cleansing of glassware, china, silver, sink, refrigerator, garbage tin, stove, &c. Weighing and measuring of food. Importance of accuracy. Importance of daintiness of service.	
Starches and Sugars— Sources, functions, principles of cooking. Foods high and foods low in starches and sugars. Ways in which they may be introduced into diet. Digestion, absorption.	Preparation and service of fruit and fruit jellies; vegetables and vegetable salads; cereals, also macaroni, sago, cornflour, and other farinaceous foods; dishes high in starch. Uses of starches as thickening agents.	To make <i>toast</i> , rusks, <i>porridge</i> , <i>gruel</i> , <i>arrowroot</i> , blanc mange, bread and milk. To cook <i>baked fruit</i> , <i>stewed fruit</i> , <i>fruits in jelly</i> . To cook boiled cereals. To cook <i>baked</i> , <i>boiled</i> , <i>grilled</i> , and <i>steamed</i> vegetables. To make vegetable salads.
Protein— Sources, functions, principles of cooking. Foods high and foods low in protein. Ways in which these may be introduced into diet. Digestion, absorption, metabolism of proteins. Action of bacteria.	Study of milk and milk products. Milk beverages: use and limitations of preserved milk; milk foods. Study of eggs. Ways of serving eggs, raw and lightly cooked. Study of meat, poultry, fish. General methods of cooking and the aims in each.	Milk:—Peptonized, albuminized, pasteurized, malted; milk jelly, <i>junket</i> , <i>whoy</i> , <i>Benger's Food</i> . Cereals:—Cooked with milk. Eggs:— <i>Poached</i> , boiled, scrambled, baked, <i>egg flip</i> , <i>egg nog</i> . Custards (<i>baked</i> , boiled, <i>steamed</i> , grain, and crumb). Meats:— <i>Fricassee of tripe</i> , <i>rabbit</i> , <i>brains</i> ; <i>grilled chops</i> or <i>steak</i> ; meat balls, meat jelly, raw beef sandwiches; chicken; baked liver. Fish:— <i>Steamed</i> , <i>grilled</i> , <i>scolloped</i> ; <i>oysters</i> (raw and in sauce). Cream soups, such as <i>oyster</i> , <i>tomato</i> , other vegetable purées soups. Sauces such as <i>foundation white sauce</i> . Salad Dressings:—Oil and vinegar; boiled
Fat— Sources, functions, principles of cooking. Foods high and low in fats. Ways in which they may be introduced into diet. Digestion, absorption, metabolism of fats.	Ways of introducing fats into diets. Soups. Sauces. Salad dressings. Extra cream with desserts; extra butter with vegetables; extra milk with beverages.	
Mineral Salts and Vitamins— Sources, functions, principles of cooking. Foods high and foods low in mineral salts and vitamins. Ways in which they may be introduced into diet. Roughage—ballast or bulk in diet.	Preparation of beverages, broths, and stocks.	Beverages:— <i>Tea</i> , <i>coffee</i> , <i>cocoa</i> , <i>barley water</i> , fruit drinks, albuminized water, rice water, <i>beef tea</i> . Broths:— <i>Mutton broth</i> , chicken broth, beef juices, <i>beef teas</i> . Fruits:—Service of raw fruits.
Food Requirements— 1. Factors determining the food requirements of adult children. 2. The fuel value of food. 3. Modification of full diet to meet requirements of illnesses. 4. Liquid, light, soft, convalescent diets. 5. Planning of well-balanced meals within limits of diets allowed. 6. Diets for some abnormal conditions.	Preparation of invalid trays showing well-balanced food content— (a) Breakfast meal; (b) Luncheon meal (i) suitable for child, (ii) suitable for adult	Dishes to be chosen from lists shown above.

—	Medical.	Surgical.	Children's.
Periods served in wards ..			
Sick Leave			

Signed by.....Matron.

Signed by.....Trainee.

—	Medical Nursing.	Surgical Nursing.	Materia Medica.	Special.			
				Infectious Diseases.	Eye, Ear, Nose, and Throat.	Gynaecological Nursing.	Children's Nursing.
Number of lectures given							
Number of lectures attended							
Terminal Examination Results							

—	Medical.	Surgical.	Children's.
Periods served in wards ..			
Sick Leave			

Signed by.....Matron.

Signed by.....Trainee.

—	Medical Nursing.	Surgical Nursing.	Materia Medica.	Special.			
				Infectious Diseases.	Eye, Ear, Nose, and Throat.	Gynaecological Nursing.	Children's Nursing.
Number of lectures given							
Number of lectures attended							
Terminal Examination Results							

—	Medical.	Surgical.	Children's.
Periods served in wards ..			
Sick Leave			

Signed by.....Matron.

Signed by.....Trainee.

Nurses Regulations 1941.

FORM 2.

Nurses Act, Victoria.

This is to certify that
being registered as a General Nurse in the State of Victoria under the
provisions of the Nurses Acts, has completed a special course of
training in _____ and is registered on the Special Register
for that branch of nursing.

Dated at Melbourne this _____ day of _____

Chairman

Registrar

Nurses Board.

Reg. No.

Signature of Nurse _____

FIFTH SCHEDULE.

The curriculum of study for training in infant welfare nursing shall include the subjects and matters hereafter prescribed:—

Experience in routine office work, record keeping, pattern cutting for distribution, correspondence, &c.

Experience in posture work—at least two lectures and demonstrations.

Experience in public speaking—at least three lectures and demonstrations.

Ante-natal Care.

Theoretical (at least ten lectures, of which seven must be attended).—

From medical officers—six.

Vital statistics.

Effect of ante-natal care on mother and baby.

Maternal hygiene.

Course of normal pregnancy.

Complications of pregnancy.

Position of infant welfare worker concerning ante-natal problems, medical etiquette, &c.

From matron or sister-in-charge—four.

Rules for maintenance of health *re* clothing, exercises, rest, bathing, care and preparation of breasts, care of teeth, urine testing, mental outlook, &c.

Practical.—

There shall be six attendances at the ante-natal clinics in the public hospitals under tuition from the honorary medical officer in charge of the clinic.

There shall be at least three demonstrations in the Mothercraft Home or Centre in ante-natal care (preparation of home for confinement, cutting patterns, exercises, &c.), of which the trainee shall attend three, and be demonstrator in at least two.

The trainee shall keep records of at least two ante-natal cases while in the District Infant Welfare Centre.

Post-natal Care of Mother and Infant.

Theoretical (at least 30 lectures, of which 25 must be attended).—

Subject-matter of lectures to be delivered by medical officers and matron or nurses in charge.

Infant welfare nursing—

A study of principles and purposes.

Vital statistics.

Management of centre.

Medical etiquette.

Relationship with other activities.

Study of the normal baby—

General examination.

General nutrition—height, weight, age, colour, turgidity, &c.

Normal progress.

Management of normal baby—

Regulation of bodily functions.

Training of nerve centres—

(a) Heat centres—bathing, clothing, ventilation, &c.

(b) Evacuation centres.

(c) Sleep, habits, &c.

Normal diet—

Breast feeding.

Weaning.

9-12 months' diet.

1-2 years' diet.

Study of all diets under following headings:—

Intake—Nature of food, vitamin-content.

Balance and percentage composition.

Caloric values, &c.

Method of taking—amount, interval, rate, posture, &c.

Digestibility.

Assimilability—height, weight, age, progress, colour, firmness, turgidity, &c.

Excretions.

Study of incorrect natural feeding—

Over-feeding, under-feeding, maintenance and re-establishment of breast milk.

Study of unnatural feeding—

Artificial feeding—complete, complementary, and supplementary.
Correct measurement and modification of milk mixtures.
Care of food and feeding-vessels.

Study of and management of premature, delicate, and malnutrition babies.

Recognition of the abnormal—

Study of conditions needing urgent medical advice—

Any hæmorrhage.
Acute vomiting.
Convulsion.
Collapse or unconsciousness.
Difficult respiration.
Pyrexia.
Loss of power in limbs.
Difficulty in swallowing.

Study of the digestive tract—

Anatomy and physiology and some of the more common conditions needing medical attention, such as—
Vomiting.
Abdominal pain.
Abnormal stools (constipation, diarrhœa, &c.).

Study from preventive medicine aspect of the diseases—

Rickets and scurvy.
Infectious diseases.
Venereal diseases.
Tubercular diseases.
Respiratory diseases.
Eye, ear, nose, and throat diseases.

Practical.—

Diet classes shall be held daily in residential and district centres.

During period of training in the residential department, the trainee must have under supervision, consecutive observation and care of a nursing mother or mothers for at least fourteen days; also of a delicate or of a premature baby or babies for at least fourteen days; also of artificially-fed babies for at least 28 days; and consecutive experience in food dispensary for at least fourteen days.

The trainee shall attend ten demonstrations and shall be demonstrator in at least six.

The demonstrations shall be given in the following subjects, in addition to ante-natal and posture demonstrations:—

Breast feeding.

Artificial feeding—

Care of cow's milk.
Care of feeding utensils.
Milk modification mixtures.
Normal feeding of children from nine months to two years.
Bathing and dressing a normal baby.
Making baby's bed and ventilating room.
Baby clothing, including clothing for babe with delicate skin.
Premature baby.
Care of teeth.
What to do till the doctor comes.

During training in District Infant Welfare Centre the trainee shall do home visiting, shall keep records of such cases, shall conduct at least four test-feedings, also examination, weighing, and measuring of at least four new babies.

The trainee shall pay not less than twenty visits to the homes.

She must have under supervision in the home—

A case of breast stimulation, and shall pay not less than four visits.
A case of artificial feeding, and shall pay not less than six visits.
A case of premature or delicate baby, and pay not less than six visits.
She shall visit new babies, and pay not less than four visits.

The trainee shall attend three clinics from medical officer in centre.

SIXTH SCHEDULE.

The curriculum of study for a "Refresher Course" in Infant Welfare Nursing shall include the subjects and matters hereafter prescribed:—

Experience in routine office work, record keeping, correspondence, &c.

Theoretical (at least twelve lectures, of which nine must be attended).—
Subject-matter of lectures to be delivered by medical officers and matron or nurse in charge.

Medical and nursing etiquette, mothercraft home and centre management.
Ante-natal care.

Study of normal infant—

General examination.
General nutrition—height, weight, age, colour, turgidity, &c.
Normal progress.

Management of normal baby—

Regulation of bodily functions.

Training of nerve centres—

- (a) Heat—bathing, clothing, ventilation, &c.
- (b) Evacuation centres.
- (c) Sleep, habits, &c.

Normal diet—

Breast feeding.

Weaning.

9-12 months' diet.

1-2 years' diet.

Study of all diets under following headings:—

Intake.—Nature of food, vitamin content, balance and percentage composition, caloric values, &c., method of taking—amount, interval, rate, posture, &c.

Digestibility.

Assimilability.—Height, weight, age, progress, colour, firmness, turgidity, &c.

Excretions.

Study of natural feeding—

Over-feeding, under-feeding, maintenance, and re-establishment of breast milk.

Test feedings.

Study of unnatural feeding—

Artificial feeding—complete, complementary, and supplementary.

Correct measurement and modification of milk mixtures.

Care of food and feeding vessels.

Study of and management of premature, delicate, and malnutrition babies.

Recognition of the abnormal.

Study of conditions needing urgent medical advice—vomiting, abdominal pain, abnormal stools (constipation, diarrhoea, &c.), rickets and scurvy.

Practical.—

There shall be three attendances at the ante-natal clinics in the public hospitals under tuition from the honorary medical officer in charge of the clinic.

The trainee shall keep records of at least two ante-natal cases while in the District Infant Welfare Centre.

Diet classes shall be held daily in residential and district centres.

During period of training in the residential department, the trainee must have under supervision, consecutive observation, and care of a nursing mother or mothers for at least fourteen days; also of a delicate or of a premature baby or babies for at least seven days; also of artificially-fed babies for at least fourteen days; and consecutive experience in food dispensary for at least seven days.

The trainee shall attend at least six demonstrations, and shall be demonstrator in at least two.

The demonstrations shall be given in the following subjects:—Ante-natal care, breast feeding, artificial feeding, care of cow's milk, care of feeding utensils, milk modification mixtures, bed making, ventilation, clothing, premature baby.

During training of at least seven days in District Infant Welfare Centre the trainee shall do home visiting, shall keep records of such cases, shall conduct at least four test feedings, also examination, weighing, and measuring of at least four new babies.

The trainee shall pay not less than ten visits to the homes.

SEVENTH SCHEDULE.

The curriculum of study for training in the nursing of Tuberculous Diseases shall include the subjects and matters hereafter prescribed:—

Medical Section.

Theoretical (at least twelve lectures, of which three-fourths must be attended, to be given by a legally qualified medical practitioner approved by Nurses Board).

1. (a) What is a sanatorium?
(b) What is the relation of a sanatorium to the anti-tuberculosis scheme?
2. Anatomy of the respiratory system.
3. Physiology of the respiratory system.
4. *Ætiology* of pulmonary tuberculosis.
5. Symptoms of pulmonary tuberculosis.
6. Prognosis of pulmonary tuberculosis.
7. Treatment of pulmonary tuberculosis.
8. Demonstration of artificial pneumothorax followed by screening of patient (surgery).
9. Demonstration of types of pulmonary lesions, with X-ray films (X-ray room).
10. Discussion of leaflets issued by Public Health Department.
11. Forms of tuberculosis, other than pulmonary.
12. Recapitulation.

Nursing Section.

Theoretical (twenty lectures, of which three-fourths must be attended, to be given by matron or other lecturer approved by Nurses Board).

Ethics in nursing.

Observation and significance of symptoms.

Case reporting.

Symptoms and nursing treatment in relation to tuberculosis affecting—

The skin,
Circulatory system,
Respiratory system,
Digestive system,
Urinary system,
Nervous system.

Nursing in Special Cases.

Pleurisy and pleural effusion, empyema, tapping of chest, hæmoptosis, mental derangement, caries of spine, tubercular joints.

Principles of Sanatorium Treatment.

Open air, rest (absolute, partial), feeding, graduated exercises and work, value of temperature, pulse, and respiration as a guide to treatment.

Practical.

Care of bedding, linen, blankets, waterproofs, &c.
Sanitary methods of cleansing utensils.
Disposal and disinfection of sputum, linen, and dressings.
Sterilization of flasks and mugs used for tuberculosis sputum.
Dealing with diet sheets, requisition forms, clinical and ward notices.
Case taking on admission of new patients.
Temperature, pulse, respiration, and blood pressure charting.
Inhalation, steam kettle, oxygen.
Uses of respiratory inhaler, insufflator.
Injection—hypodermic and intramuscular.
Infusion—subcutaneous and intravenous.
Settings, aspiration, tapping lumbar puncture, artificial pneumothorax.
Preparing and cleaning apparatus.
Preparing and serving meals.
Preparing and serving small ward trays.
Reporting on stool, sputum, vomitus.
Special work.
Blood sedimentation tests.

Treatment of Tuberculous Patients in their Homes.

Theoretical (at least twelve lectures, of which three-fourths must be attended, to be given by a legally qualified medical practitioner approved by the Nurses Board), and

Practical instruction to be obtained under the supervision of the sister-in-charge at an approved Chest Clinic. (The trainee shall attend the clinic for at least one week, during which time she shall pay at least ten visits to patients in their homes.)

Methods of Isolation.

Educational methods in respect to patients, attendants, and contacts.

Exercise and occupation.

Disinfection and reservation of eating and drinking utensils.

Disposal of soiled clothing, sheets, dressings, excreta, and sputa.

Sterilization of flasks and mugs used for sputum.

Dietetic treatment.

Medicinal treatment.

Emergencies—haemorrhage, shock, &c.

EIGHTH SCHEDULE.

The curriculum of study for training in the nursing of Orthopaedic diseases shall include the subjects and matters hereafter prescribed:—

Theoretical (at least twenty lectures, of which three-fourths must be attended, to be given by a legally qualified medical practitioner approved by the Nurses Board).

Introductory.

Anatomy and physiology of the locomotor system in suitable detail, bones, epiphyses, joints, muscles, tendons, ligaments, fascia, bursae, nerves, &c.

Social Significance of Crippling.—Fields of Orthopaedic nursing and after-care.

Special Departments of Orthopaedic Hospital.—Examining, X-ray, plaster, operating, splint and brace, physiotherapy, and heliotherapy rooms.

Orthopaedic Terminology.—Preparation of patients for Orthopaedic examination.

*Orthopaedic Diseases and Deformities.**Introductory.*

Action of gravity, balance, symmetry, asymmetry, compensation of deformity, development in utero.

Symptoms, signs, treatment, nursing, observation, precautions, care and after-care of the following:—

Congenital dislocation of the hip.
Deformities of the foot, including club foot.
Deformities of the vertebral column.
Torticollis.
Rickets.

Surgical Tuberculosis.—Causes, varieties, age, incidence, sources of infection, manifestations, general constitutional treatment of tuberculosis, tuberculosis of the bones and joints, early changes, production of deformity, care on admission, manner of handling patient, apparatus used in prevention or correction of deformity, care during quiescent stage.

Treatment, nursing care, observation.

After-care, early signs of relapse.

Tuberculosis of the various joints.

Complications, with particular reference to abscess, compression, paraplegia, meningitis.

Arthritis.—Osteomyelitis, injuries and fractures, tumours of bone, internal derangement of knee.

Paralysis and Deformities therefrom.—Poliomyelitis, signs, symptoms, treatment and nursing in acute stage.

Prevention of deformity, deformities commonly met, re-education.

Spastic.

Obstetric and other paralyses.

Orthopaedic Treatment.

Principles.

Splints.—Names of splints and frames; faults in nursing patients in splints, prevention of pressure sores; removal, inspection, and cleaning of splints.

Extension Apparatus.—Different methods of applying extension; nursing care and observation.

Braces and shoes.

Heliotherapy.—Treatment in the open air.

Plaster of Paris.—Technique, care of plaster splints, care of patients in splints, possibility of interference with nerve and blood supply; precautions, observation, and treatment; removal of plasters.

General principles of good posture.

Physiotherapy, occupational therapy.

Orthopaedic Operations.—Pre-operative preparation; operative technique, non-touch technique; tourniquets, instruments, Orthopaedic tables.

Demonstration of types of Orthopaedic cases with X-ray films.

Nursing Section.

Theoretical.

Principles of Orthopaedic Nursing (at least twelve lectures, of which three-fourths must be attended, to be given by matron or other lecturer approved by Nurses Board).

Prevention of deformity in chronic illness.

Special nursing points of chronic cases, e.g., tuberculosis cases in splints, bed-making.

Diets.—Special foods.

Drugs used in Orthopaedic cases.

Nursing of special cases.

Emergencies.

Practical.

Case taking.

Preparation of case for examination.

Care of X-rays.

Plaster Room.—Preparation of patient; preparation of plaster bandages, plaster splints; care of patients after the application of plasters.

Operations.—Theatre work and post-operative care.

Heliotherapy.

After-care.—The nurse should be capable of giving instructions to parents and patients regarding splints, plasters, footwear, attendance at clinics, &c.

Ninth Schedule.

The Curriculum of Study for training in the Nursing of Infectious Diseases shall include the subjects and matters hereafter prescribed:—

Medical Section.

(a) *Theoretical.*—(At least ten lectures, of which seven must be attended, to be given by a legally qualified Medical Practitioner approved by the Board.) To include the general principles of infection and immunity, and the course, complications, and indications for management and treatment of Diphtheria, Scarlet Fever, Measles, Whooping Cough, and/or such other Infectious Diseases as are present.

1. General principles of infection and immunity.

2. Diphtheria, nature and course.

3. Diphtheria, complications and treatment.

4. Scarlet Fever.

5. Scarlet Fever and treatment.

6. Method of preventing spread of infection—barrier and cubicle nursing.

7. Laryngeal Diphtheria.

8. Measles.

9. Whooping Cough.

10. Resumé and demonstrations of special work.

(b) *Practical.*—Bedside Clinics by members of Medical Staff (of which three must be attended).

Nursing Section.

(a) *Theoretical*.—(Ten lectures, of which seven must be attended, to be given by Matron or other lecturer approved by the Nurses Board.)

1. Elementary bacteriology, and results of infection.
2. Principles of isolation and disinfection.
3. Methods of disinfection—
 - (a) Concurrent.
 - (b) Terminal.
4. Principles of nursing of fevers, and management of convalescence.
5. Applied Anatomy and Physiology of Respiratory Tract.
6. Description of methods of local treatment of throat and nose—
 - (a) Taking throat swabs.
 - (b) Nasal swab.
 - (c) Throat douching.
 - (d) Nasal douching.
7. Nurses duties in preparation for, management of, and after care of laryngeal diphtheria requiring operation—
 - (a) Intubation.
 - (b) Tracheotomy.
8. Use of steam tent.
9. Ear infections, paracentesis, tympanie, mastoiditis, preparation for, and after care of mastoid and intracranial operations. Tonsillectomy and adenectomy.
10. Resumé and demonstration of special work.

(b) *Practical*.—The practical training shall include the subjects and matters hereinafter mentioned, in so far as the scheduled diseases, conditions, and special method of treatment are available.

Diphtheria. Scarlet Fever. Specials.

Administration of Sera, Intramuscular
 Administration of Sera, Intra-theal
 Administration of Sera, Intravenous
 Barrier Nursing, closed
 Barrier Nursing, open
 Case taking, Ambulance
 Case taking, Ward
 Desquamation
 Disinfection, concurrent
 Disinfection, terminal
 Diphtheria, Faucial
 Diphtheria, Laryngeal
 Diphtheria, Nasal
 Ear Toilet
 Ear Syringing
 Examination of Ears
 Examination of Eyes
 Examination of Mouth
 Examination of Nose
 Examination of Skin
 Examination of Throat
 Feeding adults
 Feeding children
 Feeding infants
 Intubation
 Koplik's spots
 Lumbar puncture
 Management in Convalescence
 Measles with Convulsions
 Measles with Entero-colitis
 Measles with Conjunctivitis
 Measles with Bronchitis
 Measles with Encephalitis
 Measles with Laryngitis
 Measles with Otitis media
 Measles with Pneumonia
 Measles with Stomatitis
 Nasal feeding
 Nasal douche
 Nasal toilet
 Nursing after Intubation
 Nursing after Tracheotomy
 Nursing after Tonsillectomy
 Nursing after Mastoid operation
 Paralysis of palate
 Paralysis of pharynx
 Paralysis of skeletal muscles
 Paralysis of eye muscles
 Pertussis with Convulsions
 Pertussis with Entero-colitis
 Pertussis with Bronchitis
 Pertussis with Encephalitis
 Pertussis with Otitis media
 Pertussis with Pneumonia
 Poliomyelitis, acute cases
 Poliomyelitis, respirator cases
 Poliomyelitis, splint cases
 Rash in Measles

PRACTICAL TRAINING—SUBJECTS AND MATTERS—*continued.*

	Diphtheria.	Scarlet Fever.	Specials.
Rash in Scarlet			
Rash in Rubella			
Rash in Varicella			
Rash in other conditions			
Salines, intravenous			
Salines, intraperitoneal			
Salines, rectal			
Scarlet Fever, with Adenitis			
Scarlet Fever, with Nephritis			
Scarlet Fever, with Otitis media			
Scarlet Fever, with Rheumatism			
Serum rash			
Steam tent			
Throat douching			
Throat swabbing			
Tracheotomy			
Varicella			

Tenth Schedule.

The curriculum of study for training in the Nursing of Gynaecological Diseases Nursing shall include the subjects and matters hereafter prescribed.

Surgical Section.

(a) *Theoretical.*—(At least ten lectures, of which seven must be attended, to be given by a legally-qualified medical practitioner approved by the Board.)

1. *Anatomy of the female pelvis—*

- (a) Lower urinary passages.
- (b) Termination of the food tract.
- (c) Genital organs—i. Internal.
ii. External.

2. *Physiology of the Reproductive Organs—*

- (a) Breasts.
- (b) Fallopian tubes.
- (c) Uterus.
- (d) Ovaries.
- (e) Menstruation—its function—the controlling force.
- (f) Puberty.
- (g) Menopause.

3. *Disorders of Menstruation—*

- (a) Amenorrhoea—Physiological.
Pathological.
- (b) Dysmenorrhoea—Types.
- (c) Menorrhagia.
- (d) Metorrhagia.

4. (a) *The Signs and Symptoms of Pregnancy—*

- (b) Abortion and miscarriage—signs and symptoms of various types.
- (c) Ectopic pregnancy.
- (d) Gonorrhoea—Syphilis.

5. *Gynaecological Examinations—*

Vaginal—Types—Trays—Positions.
Urinary—Cystoscopic—Catheterization.

6. *Asepsis.*—History—Nurses' part.

Antiseptics.—In common use—Strength, uses, means of application.

7. *Management of Operative Cases—*

Pre-operative treatment—general—special.
Theatre preparation.
Post operative.
Complications—general—specific.

8. (a) *Surgical Shock.*—Brief summary—treatment of.

- (b) *Haemorrhage.*—Types found in gynaecological work treatment.
- (c) *Blood Transfusion.*—Technique—apparatus—care and sterilization.

9. and 10. *Demonstration and Lectures in the Pathological Department.*

- (b) *Practical.*—Bedside clinics by members of the medical staff.

Nursing Section.

(a) *Theoretical.*—(Ten lectures, of which seven must be attended, to be given by the Matron or other lecturer approved by the Nurses Board).

1. *Admission Treatment of Gynaecological Patients—*

- (a) Attention and care—immediate—subsequent.
- (b) Preparation of patient and requisites for gynaecological examination.
- (c) Positions used for gynaecological examinations.

2. (a) *Intra-vaginal Medication—*

Douching } Conditions for which they are given.
Tampons } Methods employed.
Pessaries } Types of fluids, antiseptics and drugs used.

- (b) *Enemata used in Gynaecology.*—Pre- and post-operative preparation and methods of administration.

3. (a) *Pre-operative Treatment.*
 (b) *General Routine for Gynaecological Cases:*—Specific routine for cases such as—
 Complete Perineal Tear.
 Prolapse with Ulceration of the Cervix.
 Malignancy.
 A Debilitated Patient.
 4. *Nurses Theatre Duties*—
 (a) Routine duties during operations.
 (b) Care and sterilization of instruments, sutures, and gloves.
 5. *Post-operative Treatment*—
 Routine after treatment, with regard to shock and haemorrhage, post anaesthetic vomiting, position, diet, bladder, bowels, drugs, complications.
 6. *Radium and X-ray Therapy* in treatment of Gynaecological Cases—
 (a) Care of Radium.
 (b) Care of patient.
 (c) Care of the Radium worker and assistant.
- Demonstrations*—
 1. Positions used in Gynaecology.
 2. Instruments used in Gynaecology.
 3. Preparation of trays—care of instruments and gloves.
- At least four weeks' experience in the Gynaecological Operating Theatres to be included in the course.

ELEVENTH SCHEDULE.

(a) The curriculum of study for training in the nursing of eye, ear, nose, and throat diseases shall include the matters hereafter prescribed:—

MEDICAL SECTION.

Theoretical (at least twenty lectures of which three-fourths must be attended, to be given by a legally qualified medical practitioner approved by 'the Nurses' Board).

SECTION I. DISEASES OF THE EYE (Eight lectures).

- (a) *Physiology and anatomy of eye-ball.*
 Physiology and anatomy of orbit, lids, Lachrymal apparatus, external ocular muscles.
- (b) *Optics of prisms and lenses (convex, concave, cylindrical).*
 Mensuration.
 Normal and abnormal refractive states of eye. Myopia. Hypermetropia. Astigmatism. Accommodate. Convergence.
- (c) *Lids.*
 Diseases of: Blepharitis. Trichiasis, &c. Hordeolum chalazion.
 Deformities of: Entropion. Ectropion.
 Treatment of above.
Lachrymal apparatus.
 Structure.
 Diseases of: Eversion. Abscess. Obstruction.
 Treatment.
Mobility.
 Anatomy.
 Diseases of: Strabismus (paralytic Concomitant).
 Treatment.
Orbit.
 Structure.
 Diseases of: Periostitis. Cellulitis.
- (d) *Conjunctiva.*
 Anatomy.
 Diseases of: Inflammation—acute, sub-acute, chronic.
 Ophthalmia Neonatorum Phlyctenular. Trachoma.
 Spring catarrh.
 Treatment.
 Degenerations: Pinguecula. Pterygium.
 Burns.
- Cornea.*
 Anatomy.
 Diseases of: Ulcer (hypopyon, dendritic phlyctenular).
 I.K.
 Foreign bodies.
 Treatment.
- (e) *Sclera.*
 Structures and diseases (Episcleritis, Scleritis).
- Uvea.*
 Structure and function.
 Diseases of: Iritis and cyclitis.
 Symptoms, causes, and treatment.
- Glaucoma.*
 Symptoms, diagnosis, and treatment.
- Lens.*
 Functions.
 Cataract—Lamellar, anterior, polar, posterior polar, traumatic, complicated, diabetic, senile.
 Treatment.

(f) *Vitreous body.*

Structure and function.
Abnormalities.

Choroid.

Structure and function.
Diseases of: Inflammation, degenerations.

Retina.

Structure and function.
Diseases of: Vascular, inflammations, detachment.

Optic nerve.

Function and structure.
Diseases of: Inflammatory, Papillitis, optic neuritis, Retro—Vulbar.
Atrophy—Secondary, Primary.

Injuries.

Contusions—1. Abrasion.
2. Rupture.
3. Mydriasis.
4. Iridodialysis.
5. Dislocation of lens.
6. Cataract.

Perforations—1. Corneal.
2. Lenticular.

3. With retention of F.V.

Sympathetic Ophthalmia.

Pathology and treatment.

SECTION 2. DISEASES OF THE EAR.

(a) *The anatomy of the ear.**External ear.*

Auricle. External meatus.
Cartilaginous portion and bony portion.
Tympanic membrane.

Middle ear.

Ossicles. Eustachian tube.
Aitus. Antrum. Mastoid cells.
Relation to carotid artery and jugular vein.
Facial nerve.

Internal ear.

Organ of hearing—cochlea.
Organ of balance—semi-circular canals.
Endolymph.

(b) *Function of hearing.*

Sound waves in air, converted to fluid waves in endolymph which stimulated organ of Corti.

Deafness—1. Conduction deafness—wax, &c., in external ear.
disease in middle ear.

2. Nerve deafness—internal ear or auditory nerve.

Syringing ear: Lotion 100°F.

Furuncle.

Blockage of Eustachian tubes.
Post nasal congestion—adenoids.
Middle ear catarrh.
Acute suppurative otitis media.
Acute mastoid infection.
Cholesteatomatous material.
Deafness (sound-interpreting apparatus).
Fracture of skull.
Cerebral tumour.
Acute labyrinthitis.
Toxic auditory neuritis.
Ptosclerosis.

Tests for deafness—watch,
voice,

tuning fork. 32.64.128.256—4096.

Air conduction.

Bone conduction.

Weber's test. Rinne's test.

Galton's whistle.

Barany's box.

Aids to hearing.

Inflation. Politzer method.

Catheterization.

Horns. Trumpets.

Electrical aids.

(c) *Diseases of ear.**Furuncle.*

Ichthyol and Glyc. Acriflavin.

Injections. Heat.

Haematoma of auricle.

Dermatitis of external ear.

Foreign bodies—insects.

Traumatic rupture of drum.

Acute otitis media. C/o earache and deafness.

Scarlet measles. Influenza. Whooping cough.

Adenoids.

Post nasal plugging.

Paracentesis (myringotomy).

Ear toilets.

Simple mastoid (Schwartz operation) B.I.P.P. Flavine.

Conservative operation. Heath. Epitympanic. Bondy Jenkins. Modified radical.

Radical operation—drum and ossicles removed and Eustachian tube curetted.

(d) *Complications may follow mastoid operation.*

Erysipelas—Prontosil.
 Meningitis—C.S.F. Cloudy. Neck rigidity.
 Sinus Thrombosis—Rigors. Metastatic abscesses.
 Jugular vein tied.
 Sinus explored—clot removed.
 Blood transfusion.
 Labyrinthitis—Giddiness, loss of balance, vomiting.
 Nystagmus.
 Brain abscess—Cerebral. Headache.
 Cerebellin. Vomiting.
 Extradural. Optic neuritis.

SECTION 3.—FACIAL PARALYSIS.

(a) The nose.

Anatomy.
 External nose. Nares. Septum. Nasal cavity.
 Lateral wall. Turbinal nares. Roof.
 Olfactory mucosa. Mucous membrane.
 Nasopharynx. Roof. Posterior wall. Floor.
 Accessory nasal sinuses.
 Anterior group—Maxillary sinus. Frontal sinus.
 Anterior ethmoidal cell.
 Posterior group—Post ethmoidal cells.
 Sphenoidal sinuses.
 Maxillary sinus.
 Frontal sinuses.
 Ethmoidal cells.
 Sphenoidal sinuses.

Diseases of Nose.

(b) Obstruction. Polyps. Deviation haematoma.
 Loss of sense of smell.
 Epistaxis—adenoids, growths, diphtheria, kidney and blood diseases.
 Furuncle.
 Foreign bodies.
 Acute sinusitis.
 Frontal sinusitis.
 Acute ethmoidal sinusitis.
 Transillumination.
 Treatment—inhalaions, heat, sprays, douches.
 Antrum washout.
 Chronic sinusitis.
 Radical antrum (Caldwell Sac).

Complications of operation.

Haemorrhage.
 Meningitis.
 Cerebral abscess.
 Cavernous sinus thrombosis.
 Orbital cellulitis.
 Osteomyelitis.

SECTION 4.—THE MOUTH.

Anatomy—Roof. Floor. Walls.
 Teeth—Milk teeth. Permanent.
 Tongue. Papillae, ulcers, growths.
 Parotid gland.
 Gums—Vincent's angina.
 Soft palate. Hard palate. Tonsil.
 Acute tonsillitis. Quinsy. Diphtheria.
 Pharynx.
 Larynx.
 Epiglottitis.
 Thyroid cartilage. Cricoid. Vocal cords.
 Paralysis of cords. Diphtheria. Tracheotomy.
 Trachea. Foreign bodies.
 Oesophagus. Structures. Growths. Pouches.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 29.

Date— Hospital.
Annual Report of a Hospital Approved as a Training School for Nurses in Eye, Ear, Nose, and Throat Diseases Nursing for the Year ended 30th June, 19
 1. Total number of patients admitted during year.
 2. Daily average number of beds occupied for year ended 30th June, 19 .
 3. The number of operations performed during the year.
 4. The number of lectures given during each course of training for the year—
 (a) *Surgical section*—
 (1) Theoretical.
 (2) Practical.
 (b) *Nursing section*—
 (1) Theoretical.
 (2) Practical.
 5. Names and qualifications of lecturers during the year ended 30th June, 19
 6. Name in full and qualifications of Matron at 30th June, 19
 7. Number of trainees, and names in full, on staff during each course of training at 30th June, 19
 8. Number and names of registered nurses on staff, exclusive of Matron.
 (Signed) Medical Superintendent
 or Secretary.
 Matron.

Kindly return before (Signed) to
 Registrar, Nurses Board.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 30.

Application for Examination.

To the Registrar,
Nurses Board, Melbourne.

I hereby apply to sit for examination for a Certificate of Registration in the Special Branch of Nursing in Eye, Ear, Nose, and Throat Diseases Nursing, and in support of my application submit the required fee of £1 1s.

Name in full (Surname) (Christian names)

Present address—

Training school—

Date of commencing special training—

Signature of Nurse.

Nurses Regulations 1941.

FIRST SCHEDULE.

FORM 31.

Certificate of Completion of Training.

We hereby certify that _____ has completed six months training at the _____ Hospital, and that during that period she has attended the following number of lectures in—

(a) *Surgical lectures—*

(1) Theoretical.

(2) Practical.

(b) *Nursing lectures—*

(1) Theoretical.

(2) Practical.

(Signed)

Medical Officer.

(Signed)

Matron.

(Signed)

Secretary.

Section 2.—Diseases of the Ear (six lectures).

Section 3.—Diseases of the Nose (three lectures).

Section 4.—Diseases of Mouth and Throat (three lectures).

NURSING SECTION.

Theoretical (twenty lectures, of which three-fourths must be attended, to be given by Matron or other lecturer approved by Nurses Board).

(As applying to eye, ear, nose, and throat cases.)

Receiving new patients.

Pre- and post-operative nursing.

Observation and significance of symptoms.

Case reporting.

Symptoms and nursing treatment in relation to—Conditions of eye, ear, nose, and throat.

Preparing and serving meals.

Preparing and cleaning apparatus.

Throughout the course of lectures special emphasis should be placed upon those procedures which a nurse would be called upon to carry out such as—

Painting lids of eyes with caustic, removal of lashes, syringing of lachrymal duct, staining of cornea, carbolicization of ulcer.

Dated at Melbourne, this 30th day of August, 1941.

R. MARSHALL ALLAN, Chairman,

E. PITCHFORD, Registrar,

} Nurses Board.

NOTE.—These Regulations are a consolidation of the Nurses Regulations 1935, and the Nurses Regulations made in December, 1937, October and December, 1938, January and November, 1939, April, May, and July, 1940, March and May, 1941.

Approved by the Governor in Council,
9th September, 1941.

C. W. KINSMAN,
Clerk of the Executive Council.