

must run. Will try and write soon again. The news is glorious and I think we shall have peace by Christmas—at least no more fighting. My love to you all and many thanks for the many wonderful things you have sent us.

Graduate of the Presbyterian Hospital, New York

A. S. W.

HOSPITALITY TO ARMY NURSES

Dear Editor: One of my duties, self-imposed, as a Home Defense Nurse has been to make the Army nurses with whom I come in contact a little happier and I wish to pay a tribute to the real unselfishness of this body of women. With few exceptions they are strangers to each other in a strange city, their work is new and they must adjust themselves to it and to new surroundings; their comforts are few and yet the complaints are fewer. It takes little to give them pleasure and they are all so appreciative. An auto ride after the day's work is done is a real treat, a dinner or lunch in a home means much to them, to meet the right kind of people in their own homes helps to deaden the homesickness they all experience. These little attentions by the people of a city will mean that the nurses will always remember that city with kind thoughts. The pleasure of the hosts is also great.

Texas

A. L. D.

EIGHT-HOUR SYSTEM IN A 200-BED HOSPITAL

Dear Editor: In the Crouse-Irving Hospital, Syracuse, N. Y., the following plan for an eight-hour day for nurses in training has been in operation for a year and a half, and has proved satisfactory to patients, nurses, and the hospital. The day nurses have an eight-hour day, for a total of forty-eight hours a week; the night nurses, a seven-hour night for seven nights, making a total of forty-nine hours a week. On five days each week, the day nurses work from 7 a. m. to 7 p. m., with four hours off duty for rest, meals, and classes. During the other two days, one of which is Sunday, they are given one day's time. It has been found best to award this time in two parts, two and a half hours off duty being given on Sunday, and five and a half hours on some other day. On Sunday each nurse works five and a half hours, instead of eight, and on some other day in the week, two and a half, instead of eight. On this day she works from 7 a. m. to 9.30 a. m., and has the balance of the day off duty. Supply-room nurses go on the floors during the week, and operating-room nurses on Sunday, to meet any extra requirements. Maternity and operating-room nurses are called on duty when needed. Night nurses are divided into two groups, one of which is on duty from 5.30 p. m. to 12.30 a. m., and the other from 12.30 a. m. to 7.30 a. m. An emergency night nurse works from 7 p. m. to 2 a. m., her duties being to prepare a hot midnight dinner for the night nurses, and to relieve wherever necessary. Nurses of the first group eat at 12.30 a. m., and the second group at midnight. Whenever it is desirable to put pupil nurses on special duty, they are given a twelve-hour shift, either by day or night, and are credited with time and a half. Crouse-Irving is a hospital of two hundred beds, and during last year has had an average of one hundred and fifty patients and seventy-five pupil nurses. The year's experience proves that a general hospital can successfully use the eight-hour system, with the above proportion of nurses and patients. It is doubtful whether any more day nurses are required than under the old system, but two night shifts require twice as many as the previous twelve-hour plan. These two shifts, however, cover fourteen hours instead of twelve, and give very material aid to the day nurses, assisting with much of the work after 5.30 p. m. and

before 7.30 a. m. Probably the only additional expense in running the eight-hour system is the cost of the extra number of night nurses required. In Crouse-Irving, sixteen to eighteen night nurses are needed, instead of eight or nine. To offset this extra expense, are the facts that the eight-hour system is of the greatest advantage from the standpoint of the health of the nurses, especially the night nurses, and that the extra time off duty allows plenty of opportunity for study, and does away with sleepy and tired nurses in the class room. This plan is also a means of inducing a very superior class of young women to enter training, which is of the greatest advantage to the patients and to the school.

Elsie W. Hillen, Superintendent of Nurses.

Crouse-Irving Hospital, Syracuse, N. Y.

A GOOD MASK

Dear Editor: I would like to say that I have tried the mask for contagious diseases designed by Dr. Dannenburg, described in the July number of the JOURNAL. I made one from the description given and wore it through two scarlet fever cases, also during the influenza epidemic in the fall, and again this winter, going from one case to another, and I am thankful to say did not take the disease. This mask is far ahead of those the state of Massachusetts gave out to nurses, or those furnished by the Red Cross, or the gauze tied around the face, worn in hospitals, which did not prove satisfactory. I wore it with six thicknesses of gauze, wet, as I changed them whenever taking the mask off. I kept a basin of boiling water to drop them in. The wet gauze I find better than dry. This is only one of many articles I have found helpful from the JOURNAL.

Maine

A. M. D.

PORTIONS OF LETTERS FROM NURSES IN SERVICE

I.

Dear ———: We hear to-night that hostilities may cease to-morrow. I am praying they may. If it were possible to continue with any other sacrifice than precious lives and mutilation of sacred bodies, I should not be willing to stop now. Several weeks ago I went with other nurses to help out where the wounded were pouring in by the thousands from the Argonne; it was the most depressing experience I ever had. After ten days we were recalled to care for hundreds and hundreds pouring in here from another sector suffering with influenza and pneumonia. With the exception of blankets and cots we were equipped for less than one-half the number admitted and were necessarily obliged to compromise everything in order to cope with the situation. Imagine having 280 medical patients and six medicine glasses, no cups or bowls available; all dishes were collected after meals and sent to the sterilizer. The difficulties we worked under were many, the laundry work was appalling, all drinking water had to be chlorinated. The water here has been contaminated for some time and therefore, on arrival, I explained to the boys just what an epidemic of cholera means. One of the nurses said to me, "You certainly put the fear of God into them." However, we had no dysentery in my building, for which I was thankful. For two days, while we were busiest, all water was turned off. Water was hauled for the kitchens only,—cold, cold, everywhere. The smallest kind of stoves were used to heat wards the exact size of those at the New York Hospital. No lights after dark and on cloudy days this means 4 p. m. Intermittent Boche planes are over us day and night, with constant firing from anti-aircraft guns and often shrapnel