

Muffins. If we haven't time to make bread at least we can have our own muffins, and these the bakers haven't offered to make for us yet. Here is the simplest of all muffin rules, and we can vary it indefinitely. One-half cup milk, one and one-half tablespoons melted butter, one cup pastry flour, two teaspoons baking powder, one-quarter teaspoon salt, one teaspoon sugar. No eggs, you see, in this rule. Mix all the dry ingredients, and sift them twice. Stir in the milk, making a smooth batter; add the melted butter, beat vigorously for a few seconds, turn into buttered muffin tins and bake in a hot oven twenty to twenty-five minutes. The batter should be thick enough to drop easily from the end of a spoon. The muffin tins should be filled about two-thirds full of the mixture.

Now for some of the variations. You may make the muffins more or less sweet, to suit your taste. You may leave out one-half teaspoon of baking powder and substitute one egg beaten until very light and added after the milk. You may increase the butter, thereby making a richer and more tender muffin. Success depends upon having the batter of the right consistency, keeping wet and dry ingredients separate until the last minute, getting them into the oven quickly after they are in the pans, and the proper degree of heat for baking. With a gas range, the oven is more likely to be too hot than too cold.

RULES GOVERNING AN OPERATING ROOM FOR OUTSIDE SURGICAL SERVICE

FROM THE LAKESIDE HOSPITAL, CLEVELAND

THE resident physician and the head nurse will be held equally responsible for the general management of the operating room.

All cases for operation shall be reported by the resident physician to the head nurse by 7 A.M. and they shall be posted upon the bulletin board.

The resident physician and the head nurse will be held responsible for the methods of sterilization and the thoroughness in the carrying out of the methods.

All instruments for repair or orders for new instruments shall be sent at once to the office of the principal of the training school.

Patients' friends must remain in the room provided for them. They must not be in evidence in the operating room.

The resident physician will give orders for sending for the patients for operation.

Operations will be performed daily and will as nearly as possible begin at about 8.30–9 A.M.

The temperature of the operating room shall be 75–80°.

A nurse must accompany each patient from the operating room to the ward, and she shall return promptly to the operating room all operating room blankets, hot water bags, pus basins, tongue forceps, etc., that may have been sent up with the patient.

Care of the Operating Room Linen.—Use carefully, avoiding destruction by stains or burning in sterilization. After use, send to the laundry as soon as possible in bags provided for the purpose, after having removed blood-clots, etc. Do not use operating room towels for drying instruments and utensils.

Time Off Duty.—The head nurse must alternate with her pupils in taking time off duty. The second assistant pupil will be in charge of the operating room during the absence of the head nurse. The head nurse will take every other Saturday P.M. and all day Sunday off. The alternate week, the head nurse will take one-half day off duty and one-half day on public holidays. The orderly must be on duty when the head nurse is off duty.

Department.—It is expected that the nurses, while on duty in the surgical pavilion, will attend quietly to their various duties, remembering that the work of the operating room must be regarded strictly from the professional standpoint, and must not be discussed anywhere except in the operating room. It is also expected that the nurses will do everything in their power to conduct the work of the operating rooms in a quiet manner, avoiding unnecessary noise and confusion.

Co-operation.—The lives of patients are daily entrusted to those working in the operating room, and it is only through a hearty co-operation of those connected with this department that the patients' best interests are served. So it is earnestly urged that any slips of technic which may be recognized shall be at once brought to the offender's notice, whether he be a doctor, nurse, or orderly, in order that it be at once rectified, before any damage be done.

Communications.—Any questions, messages or other information with which the operator is concerned, are to be first submitted to the resident in order that he, in turn, may call the surgeon's attention to the matter when there is the first opportunity. Doctors, while visiting in the operating room are requested to wear the long white coats provided for such use.

Care of the Instruments.—For cleaning purposes, the following preparation must be used: One piece of soap (Proctor & Gamble), in

one pint of water, add whiting to thicken, remove from stove, and add one ounce of ammonia. After cleaning, rinse instrument in a very hot lysol solution, dry carefully. Sapolio, kleanit, and other preparations of the kind must not be used. No sweeping will be done in the operating rooms or in the corridors. The floors must be thoroughly mopped twice a day, morning and evening, with clean soapsuds. All dusting is to be done systematically with a wet duster.

The windows of the surgical pavilion must not be opened when there is any question of dust being blown in.

Laboratory tests must be made, at irregular intervals, of the linen, sutures, saline solutions, and a written report of same sent to the principal's office.

Fresh Tissue.—Specimens of tissue removed at operation are to be received and closely wrapped in several thicknesses of wet gauze wrung out of plain water. They are then to be labelled with the date, patient's name, and room number, as found on the list of operations posted for the day. At the end of the operating morning the orderly is to put the tissue in the refrigerator located on the first floor of the Pathological Building.

The anæsthetist must notify the resident physician before leaving the hospital, allowing sufficient time for rearrangement, leaving telephone number in case of an emergency call.

Anæsthetic Room.—Absolute silence is to prevail, as far as possible.

On patient's arrival, operating room blankets are to be substituted for ward blankets, Kelley pad, and rubber sheets put in position, and preparation made for the scrub-up, so that anæsthesia and cleansing the field of operation may progress synchronously.

Notify the resident that the patient is down.

The upper air passages are to be sprayed with albolene in all cases where ether is to be administered. Boil ether masks and atomizer tips before using.

IN *The Federation Bulletin*. Mrs. Ellen Richards writes of "Sanitation in Daily Life" and makes a plea for an aroused conscience among women for cleaner food supplies. They should insist upon clean handling of food from the time it leaves the garden or the manufacturer, through the store or market, and during its preparation in the kitchen. It is largely a crusade for clean hands. "Habits never to be forgotten must be inculcated in the children."