

HOW TO NURSE "FLU" VICTIMS

Instructions for Home Care in Cases for Which Professional Aid Is Not Available.

At the request of "The Tribune" Miss Edna L. Foley of the Visiting Nurses' association has prepared instructions and suggestions for the home nursing care of victims of the influenza-pneumonia epidemic. Miss Foley said the work of the association has increased 400 per cent during the epidemic. Fifteen of her own nurses are among the victims. There is a serious shortage of nurses everywhere.

Therefore it is believed her suggestions will be of great value in thousands of homes. They also will be of material aid even to trained nurses not widely experienced in handling these cases.

Miss Foley's instructions follow:

ESSENTIALS.

1. Fresh air.
2. Rest in bed and sleep.
3. Isolation (no visitors).
4. Plenty of water to drink.
5. Nourishing food.
6. Gentle, unworried service. (Avoid chattering, nagging, or questioning. Anticipate wants of sickest patients; convalescents usually ask for what they want.)

Keep the patients in isolated room, in separate beds, if possible.

Keep patient in bed all of the time. (This means patient must not get up to go to the bathroom.)

Two or three pillows arranged step fashion, the lowest well under the shoulders, will make breathing easier.

Keep arms and shoulders well covered.

Ventilate the room freely, but prevent drafts across the bed or any chilling of patient.

For restless, feverish people, reduce bed covering; patients with no fever need to feel snug and warm.

At the onset, headache and backache are frequent. Cold cloths to head (moist, but not dripping), changed gently and without conversation, every few minutes give some relief. A hot water bottle to the back, a hot mustard foot bath, or rubbing the back with witch-hazel, may relieve the patient. In doing these things avoid exposure that may cause the slightest chill.

Unless the patient is extremely feverish or perspiring profusely, do not insist upon daily bathing. Wash face and hands, especially after eating.

An old night gown slit up the back to the yoke is easily changed and more comfortably worn than the usual kind.

CARE OF MOUTH.

Let patient brush teeth regularly if able. Tooth brush should be kept standing in weak solution of boric acid.

A mouth wash every few hours and cold cream to the lips help keep the mouth in normal condition.

If patient is extremely weak, swab the teeth carefully with moistened cotton applications three times daily.

COUGH.

Patient should keep mouth covered when coughing. Paper napkins or

three thicknesses of toilet paper used only once, are safer and better than rags or handkerchiefs.

Keep a small paper bag pinned to bedside, within easy reach of patient's hand, to receive the used napkins. Change bag at least twice daily, or whenever it becomes half full.

The invisible spray from mouth and nose during coughing and sneezing is as dangerous as visible expectoration.

Convalescent patients can be masked; weak patients are annoyed by them.

FOOD.

For unhappy, feverish patients, liquid diet, hot or cold, as preferred—milk, lemonade, weak tea and coffee, broths.

For convalescents and patients not feverish, soft diet—gruels, cooked cereals, milk toast, jellies, soft boiled eggs, etc.

All patients should drink some water every hour when awake.

Extremely weak patients should be coaxed to take liquid nourishment at least every two hours.

PRECAUTIONS.

The influenza germ is short lived and is killed by air and sunshine; nevertheless, observe every precaution.

All mouth washes, bath water, excreta, and uneaten liquid food should be thrown into the toilet by the attendant.

All bags, napkins, scraps of uneaten food, mouth swabs, etc., should be wrapped in clean newspaper before being carried from the sickroom to be destroyed by burning.

All linen—sheets, masks, towels, etc.—should be submerged in a large kettle of cold water in sickroom. This can be safely carried to the kitchen stove, and when contents have been boiled five minutes any one may finish caring for the linen.

When attendant cannot stop to wash her own hands, door knobs, faucets, etc., should be protected by scraps of newspaper which may be destroyed after each using.

Attendants must be constantly masked, must wear big all over apron in sickroom, changing it to a different one always before entering any other part of the house.

Attendant must keep facilities for washing her own hands—soap, nail brush and paper towels—in clean place and never touch the patient or patient's utensils without afterward cleansing her own hands thoroughly. Running water is better and safer than a basin of weak disinfectant kept for the hands alone.

Everything used for the patient should be kept separate from the supplies for the rest of the household. This means dishes, bed linen, bath wrapper, towels, face cloths, rocking chair, etc.

Families can help visiting nurses and aids by having hot water, towels, and newspapers ready whenever nurse is expected.

Send to Chicago chapter, American Red Cross, 1201 Tower building, for other printed instructions.

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