

THE TERRITORY FOR THE SEAT OF GOVERNMENT.

Regulations under the Nurses Registration Ordinance 1933.

I CHARLES WILLIAM CLANAN MARR, Minister of State for Health, in pursuance of the powers conferred by the *Nurses Registration Ordinance 1933*, hereby make the following Regulations to come into operation on the 10th February, 1933.

Dated this sixth day of February, 1933.

C. W. C. MARR
Minister of State for Health.

NURSING REGULATIONS.

Short title.

Chairman to be
executive
officer of Board.
Meetings of the
Board.

1. These Regulations may be cited as the Nursing Regulations.
2. The Chairman shall be the Executive Officer of the Board.
- 3.—(1.) At all meetings of the Board voting shall be by show of hands unless a ballot is called for by any member present.
(2.) No resolution passed, or any act, matter or thing done, or authorized to be done, by or at any meeting, shall be rescinded, amended, cancelled or revoked at any subsequent meeting unless notice of the proposed rescission, amendment, cancellation or revocation has been given in the notice convening the meeting.
(3.) Notice of any motion or resolution intended to be proposed at any meeting shall be given to the Chairman in writing at least seven clear days prior to the meeting and such notice when so delivered shall be embodied in the business paper and sent to members.
(4.) Upon the signing of the Minutes of any meeting by the Chairman or Deputy Chairman at a subsequent meeting, those Minutes shall be binding and conclusive for all purposes.

Entries to be
made in
Register.

4. The particulars to be entered into the Register of Nurses with respect to the registration of any person shall be as follow:—
Number;
Date of registration;
Name of nurse;
Professional address; and
Qualifications.

Registration
fee.

- 5.—(1.) The fee for the issue of a certificate of registration of a nurse shall be Ten shillings.
(2.) The Board may issue a temporary permit under section 35 of the Ordinance without fee.

Certificate of
registration.

6. A Certificate of Registration in accordance with the following form signed by the Chairman or the Deputy Chairman, shall be issued to every nurse registered by the Board:—

Commonwealth of Australia.

Nurses Registration Ordinance 1933.

NURSES REGISTRATION BOARD OF THE TERRITORY FOR THE SEAT OF GOVERNMENT.
Canberra, 1933.

REGISTRATION CERTIFICATE.

No.	Date of Registration.	Name of Nurse.	Professional Address.	Qualifications.

I hereby certify that this is a true copy of the entry of the above specified name in the Register of Nurses of the Territory for the Seat of Government of the Commonwealth of Australia.

Chairman (or Deputy Chairman,
as the case may be).

NOTE.—A registered nurse who changes her professional address is required by section 27 of the Ordinance to give notice of the fact forthwith by post to the Chairman of the Nurses Registration Board.

7. Any hospital which fulfils, to the satisfaction of the Board, the following requirements shall be entitled to apply for the approval of the Board as a general training school for nurses for the purposes of the Ordinance:—

Training
Schools for
General Nurses.

- (a) No person other than a registered nurse shall hold (except in emergency) any appointment in the hospital, whether honorary or otherwise, as the Matron or Sister or Nurse in Charge of the nursing of patients;
- (b) The Matron or Sister or Nurse in Charge of the nursing shall have had not less than three years' training in a hospital or hospitals approved by the Board for this purpose;
- (c) The period of the course of training for nurses shall be not less than three years;
- (d) The daily average number of occupied medical and surgical beds shall be not less than forty;
- (e) General surgical and medical cases, both male and female, shall be treated in the hospital;
- (f) Pupil nurses shall receive practical instruction in the wards 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;
- (g) Pupil nurses shall attend a systematic course of lectures and receive instruction from legally qualified medical practitioners, and from the Matron or other registered nurse or lecturer approved by the Board in accordance with such curriculum of study as is determined by the Board; and
- (h) Arrangements shall be made for pupil nurses to receive a course of instruction, as determined by the Board, by a qualified cookery teacher approved by the Board in invalid cookery.

8. Any hospital which fulfils, to the satisfaction of the Board, the following requirements, shall be entitled to apply for the approval of the Board as a training school for midwifery nurses for the purposes of the Ordinance:—

Training
Schools for
Midwifery
Nurses.

- (a) The Matron shall be a registered general and midwifery nurse with adequate hospital training, and shall hold a nursing certificate approved by the Board;
- (b) The period of training shall be—
 - (i) in the case of a nurse registered by the Board as a general nurse, not less than six months; and
 - (ii) in the case of any other person, not less than twelve months;
- (c) There shall be provided at the Hospital permanently reserved and approved accommodation for at least ten maternity cases, the daily average number of occupied maternity beds shall be not less than five, with a total number of maternity cases treated each year of not less than one hundred;
- (d) Pupil nurses shall receive practical instruction in the wards thereof from the Matron or other registered nurse, and take an active part in the nursing of maternity patients, and assist during actual parturition;
- (e) Pupil nurses shall attend a systematic course of lectures and receive instructions from legally qualified medical practitioners, and from the Matron or other registered nurse or lecturer approved by the Board in accordance with such curriculum of study as is determined by the Board.
- (f) Arrangements shall be made for the pupil nurses to receive a course of instruction, as determined by the Board, by a qualified cookery teacher approved by the Board in invalid cookery;
- (g) The staff shall include at least two nurses registered as both general and midwifery nurses with adequate hospital training and actually engaged in nursing at the hospital; and
- (h) Each of the pupil nurses shall make ante-natal examinations of at least twenty pregnant women, personally conduct and deliver not less than twenty cases of labour, and nurse at least twenty lying-in patients during the ten days immediately following delivery.

Training
Schools for
Infants' Nurses.

9. Any hospital for sick children which fulfils, to the satisfaction of the Board, the following requirements shall be entitled to apply for the approval of the Board as a training school for infants nurses for the purposes of the Ordinance:—

- (a) The Matron shall be a registered general nurse with adequate hospital training, including the nursing of infants, and hold a nursing certificate as a general nurse approved by the Board;
- (b) The period of training shall be—
 - (i) in the case of a nurse registered by the Board as a general or midwifery nurse, not less than six months; and
 - (ii) in the case of any other person, not less than two years;
- (c) The daily average of occupied beds shall be not less than twenty;
- (d) Systematic courses of instruction in theoretical and practical nursing shall be given during the period of training by the medical staff and the matron of such hospital or by lecturers approved by the Board in accordance with such curriculum of study as is determined by the Board; and
- (e) The staff includes at least three nurses registered as general and infants nurses, with adequate hospital training and actually engaged in nursing at the hospital.

Training
schools for
Mental Nurses.

10. Any hospital which fulfils, to the satisfaction of the Board, the following requirements shall be entitled to apply for the approval of the Board as a training school for mental nurses for the purposes of the Ordinance:—

- (a) The Matron and chief attendant shall be registered mental nurses with adequate hospital training;
- (b) The daily average number of occupied beds therein shall be not less than one hundred;
- (c) Systematic courses of instruction in theoretical and practical nursing shall be given during the period of training by the medical staff and the matron or chief attendant of such hospital, or by lecturers approved by the Board in accordance with such curriculum of study as is determined by the Board; and
- (d) The staff shall include at least two registered mental nurses with adequate hospital training, and holding nursing certificates approved by the Board.

Training
schools for
nurses.

11.—(1.) The Board may approve of any hospital as a training school for general, midwifery, mental, or infant nurses, and may at any time cancel such approval.

(2.) Written notice addressed by the Chairman of the Board to the Secretary or person in charge of the Hospital shall be sufficient evidence of such approval or cancellation.

The training of
Pupil Nurses.

12.—(1.) A pupil nurse before commencing her training shall furnish evidence to the satisfaction of the medical superintendent, matron, or other controlling authority of the hospital that she has—

- (a) in the case of a general, mental and infant nurse, attained the age of eighteen years;
- (b) in the case of a midwifery nurse, attained the age of twenty years;
- (c) passed an examination deemed by the Board to be sufficient evidence that she has attained a satisfactory standard of general educational knowledge;
- (d) produced two satisfactory testimonials as to her character; and
- (e) produced a medical certificate of physical fitness for training.

(2.) The Board may, before registration under the Ordinance, require the production of satisfactory evidence in relation to any of the matters set out in the last preceding sub-regulation.

Period of
probation.

13. A pupil nurse shall, before being accepted by the hospital for training as a pupil nurse, undergo a period of probation of one month's duration.

Continuance of
training at
other training
school.

14. Whenever a pupil nurse, for any cause which the Board considers to be sufficient and reasonable, discontinues her prescribed training in any approved training school, the Board may, on application by such nurse, grant her permission to continue training at the same or some other approved training school under such conditions as the Board decides.

15. Should any pupil nurse be absent from training for any period or periods exceeding in the aggregate two weeks in any year (excluding weekly or annual leave), her term of training shall be extended to cover the period of her absence in excess of that time: Absence from training.

Provided that nothing in this regulation shall apply to midwifery nurses who shall complete the full term of training prescribed without any deductions on account of leave.

16.—(1.) The course of instruction in the theory and practice of nursing shall be as determined by the Board. Courses of Study.

(2.) Pupil nurses shall attend such number of lectures and demonstrations as the Board determines.

17. The Board shall from time to time hold such examinations of candidates in such subjects as it thinks fit. Examinations to be held.

18. The examination papers shall be set and the answers examined by such persons as are from time to time appointed by the Board for that purpose, and the Board may issue to the examiners such instructions as it considers necessary in connexion with the preparation and examination of such papers. Examination papers.

19. Examinations shall be conducted in the presence of a supervisor appointed by the Board. Supervision of examinations.

20. The Board may from time to time give to intending candidates details of the scope of the subjects of the examination which the Board is by these Regulations required to hold, and specify the books of reference in each such subject to be studied by candidates, but twelve months' notice shall be given before any alteration in the books so specified is made. Text books to be specified by Board.

THE CONDUCT OF EXAMINATIONS.

21. All examinations, including sectional examinations shall be held at such times and places as the Board from time to time appoints.

22. A candidate shall make application for examination not later than seven days before the date fixed for the examination and shall remit with her application the prescribed examination fee.

23. The examination fee shall be Ten shillings:

Provided that for all pupil nurses in training at the Canberra Government Hospital the fee shall be Five shillings.

24. The application for examination shall be in accordance with Form B in the Schedule to these Regulations and shall be accompanied by a certificate to the effect that she has attended the number of lectures and demonstrations specified by the Board.

25. A nurse shall not be eligible for the final examination until she has completed the required course of training, provided that in the event of the end of her period of training falling between two examinations, the Board may permit her to present herself at the earlier one, but she shall complete her term of training before receiving the certificate.

26. The examinations of the candidates shall be written, practical and oral. In the written, oral and practical sections of the examination of candidates for certificates of registration, the maximum number of marks obtainable in each section shall be 100. The number of marks required for a pass shall not be less than 60 in each section.

27.—(1.) A candidate who fails to qualify for a certificate of registration may sit at the next following examination for the purpose of qualifying for such certificate:

Provided that, on the recommendation of the examiners, the Board may permit such candidate to sit for deferred examination in one or more subjects.

(2.) The fee for such deferred examination shall be Ten shillings.

28. Any candidate who during the examination shows a lack of acquaintance with the ordinary subjects of elementary education may be rejected on that ground alone.

29. Two sectional examinations shall not be taken in the same year, and a pupil nurse shall not sit for examination until she has completed at least six months' study in the subject or subjects set for examination.

30. Sections shall be taken in the order determined by the Board, and each section shall be completed before study for the next section is begun.

31. Pupil nurses shall not be eligible to sit for examination unless the preceding section or sections are completed satisfactorily:

Provided that, in the case of partial failure or sickness, the candidate may be permitted by the Board to sit for examination in the subject failed in or missed on account of sickness during the following year's section.

SPECIAL RULES FOR THE CONDUCT OF REGISTERED MIDWIFERY NURSES.

Cleanliness to be practised.

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

Equipment to be carried.

33. When called to a confinement, a midwifery nurse 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 (douche apparatus), which shall be used for this purpose only;
- (b) a suitable appliance (other than (1)) for clearing out the bowel (enema);
- (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) sterile tape for tying umbilical cord;
- (i) sterile dressing for cord;
- (j) antiseptic soap;
- (k) efficient antiseptics for sterilizing hands, for douching, and for cleaning infant's eyelids;
- (l) sound rubber gloves;
- (m) drop-bottle containing an efficient antiseptic for the infant's eyes;
- (n) a supply of absorbent cotton wool;
- (o) three small bowls.

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

Inquiries to be made.

35. 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 as regards both mother and child. She shall advise as to personal and general arrangements for the confinement and, where necessary, with the consent of the patient, visit the house. She shall also take such other action as the circumstances demand. When the arrangement for the confinement is made with the management of a maternity hospital, the matron or other registered midwifery nurse of such hospital must carry out the above requirements.

Temperatures to be taken.

36. During the whole period of her attendance upon any patient every midwifery nurse shall take the temperature of the patient at least every morning and every evening and shall record the temperature upon a proper clinical temperature chart immediately upon each occasion of taking.

Action in special cases.

37. 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 labour, or a still-birth, the midwifery nurse engaged shall explain to the patient that her case is one in which the advice of a medical practitioner is required, and urge her to seek such advice, or attend at a hospital, or an ante-natal clinic, or other suitable institution.

38. In the event of any abnormality existing or occurring during pregnancy, labour or lying-in, the midwifery nurse in attendance must explain to the husband or the nearest relative or friend present that the case is one in which the attendance of a legally qualified medical practitioner is required.

39. For the purposes of these Regulations the following shall be deemed to be abnormalities, and if any of the conditions specified in paragraph (i) of sub-clauses (a), (b), (c), (d), (e) are present or occur, the midwifery nurse must explain that a legally qualified medical practitioner should be summoned urgently:—

(a) Pregnancy—

- (i) when there is excessive loss of blood; when fits or convulsions occur;
- (ii) when there is loss of blood; when the patient is a dwarf or deformed; when there is any abnormality in the size or shape of the uterus; when there is any abnormal position or presentation; excessive sickness; puffiness of hands or face; dimness of vision; persistent headache; albuminuria; dangerous varicose veins; purulent discharge; sores of the genitals.

(b) Labour—

- (i) fits or convulsions; malpresentation; presentation other than the uncomplicated head; when no presentation can be made out; excessive bleeding; non-expulsion of the placenta and membranes within two hours after birth of child; when labour is unduly prolonged; when the general condition of the patient is unsatisfactory;
- (ii) purulent discharge; sores of the genitals; rupture of the perineum or other injuries of the soft parts.

(c) Lying-in—

- (i) fits or convulsions; post-partum hæmorrhage;
- (ii) abdominal swellings and tenderness; offensive lochia; rigor; rise of temperature above 100.4 degrees F.; quickening of pulse above 100 for more than twenty-four hours; unusual swelling of the breasts with local tenderness or pain; white leg.

(d) General—

- (i) when a patient appears to be dead or lying.

(e) The child—

- (i) vomiting of blood or passage of blood by the bowels; hæmorrhage from the naval;
- (ii) injuries received during birth; malformation or deformity in a child that seems likely to live; dangerous feebleness; inflammation of or discharge from the eyes; serious skin eruption; inflammation about the naval.

40. Every midwifery nurse shall immediately report to the Medical Officer of Health in writing in or to the effect of Form F if she is in attendance on a case of puerperal pyrexia, and shall forthwith take all reasonable precautions to provide against the spread of possible infection, until she obtains advice from a medical practitioner that the patient's condition is not due to infection of puerperal origin. If, however, the patient's condition is due to such infection, the midwifery nurse shall forthwith notify the Medical Officer of Health accordingly, in or to the effect of Form F and she shall not attend any other pregnant or lying-in woman until she produces to the Medical Officer of Health a certificate from a legally qualified medical practitioner that she is not liable to convey infection, and has received the written permission of the Medical Officer of Health to resume practice. A fee of one shilling shall, on application, be paid for such notification.

Puerperal pyrexia to be reported.

For the purposes of this regulation "puerperal pyrexia" is defined as any febrile condition occurring in a woman from the end of the first to the end of the tenth day after abortion, miscarriage, or child-birth, in which a temperature of 100.4 F. (38 C.) or higher occurs upon more than one day during that period.

41. Every midwifery nurse shall immediately report to the Medical Officer of Health in writing if she contracts any of the diseases mentioned in this clause, or if she has recently been in contact with any of the diseases mentioned in this clause other than measles, whooping cough, chicken-pox, mumps; and she shall not attend any abortion, miscarriage, confinement or lying-in case until she has received the permission of the Medical Officer of Health to resume practice. The diseases referred to are diphtheria, scarlet fever, infantile paralysis, epidemic cerebro-spinal fever, enteric fever (including paratyphoid fever) puerperal pyrexia due to infection of puerperal origin, erysipelas, smallpox.

Infectious diseases.

Septals. 42. Any midwifery nurse who has any septic condition on her person, including any septic condition associated with or consequent upon any disease specified in the preceding regulations, shall not attend any abortion, miscarriage, confinement or lying-in case until she holds a certificate from a legally qualified medical practitioner setting out that she has ceased to be liable to convey infection. Such certificate shall be carefully preserved by her for inspection by a person authorized by the Medical Officer of Health in that behalf.

Cleanliness and gloves. 43. Before touching the external generative parts of any patient, or their surrounding parts, the midwifery nurse must 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.

Cleansing. 44. The midwifery nurse must early during the labour thoroughly cleanse the patient's external generative parts with soap and water, and then swab them with an efficient antiseptic solution. In particular parts must be swabbed with the antiseptic solution on the following occasions:—

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

The swabbing with antiseptic solution must be repeated before a douche is given, and before any manipulative procedure is carried out by her. For this purpose a nurse must use only sterile absorbent cotton wool or other clean sterile material.

45. No more internal examinations, manipulative procedure, nor douching shall be carried out than are absolutely necessary; and a nurse shall not make any vaginal examination contrary to the instructions of the medical attendant.

Precautions. 46. A midwifery nurse in attendance on a patient in labour must not leave the patient without giving an address by means of which she can be found without delay; and after the commencement of the second stage of labour she must remain with the patient until after the expulsion of the placenta and membranes, and as long thereafter as may be necessary. If the case be one where a medical practitioner has been sent for on account of the confinement being abnormal, or because of threatened danger, she must carry out his instructions pending his arrival. If for any reason the services of a medical practitioner are not available the midwifery nurse must remain with the patient, and take such action as she considers advisable in the interests of the patient.

47. The midwifery nurse in attendance on a patient must examine the placenta and membranes after they are expelled, and satisfy herself that they are complete.

48. As soon as possible after delivery the midwifery nurse must remove from the lying-in room all soiled linen, blood, faecal matters, placenta, and membranes.

49. The midwifery nurse in attendance on a patient shall be personally responsible for the daily washing of the mother and child, the dressing of the umbilicus, and for the cleanliness and comfort of the patient; and (except where a medical practitioner is in attendance) for the proper dieting of the mother and child during the lying-in period—which shall be held to mean the time occupied by the labour and the period of ten days immediately following.

50. In the case of a child born apparently dead the midwifery nurse must carry out the recognized methods of resuscitation.

51. At the earliest moment after the child's head is born, and if possible before the eyes are opened, the eyelids must be carefully cleansed.

Patient to be revisited.

52. A midwifery nurse who leaves a patient whom she has attended in labour must revisit such patient within fifteen hours immediately following the delivery, and thereafter at least once daily during the period for which she is engaged. If prevented from so doing she shall enter the reason in her record. The midwifery nurse shall take the

pulse and temperature of the patient at each of her visits, and record these details in a notebook or on a chart, which must be carefully preserved, together with particulars of any drugs, other than simple aperients, which have been administered by her to the patient.

53. Every midwifery nurse shall forthwith notify the Medical Officer of Health in or to the effect of Form C of every death which occurs in her practice. Deaths to be notified.

54. Every midwifery nurse shall forthwith notify the Medical Officer of Health in or to the effect of Form D of every still-birth which occurs in her practice. For the purpose of this regulation "still-birth" shall mean an infant which is of seven or more months of intra-uterine development, but which was not born alive. Still-births to be notified.

55. Every midwifery nurse shall keep a record in or to the effect of Form E and in the book supplied for the purpose by the Director-General of every case attended by her, and on request she shall allow any person authorized by the Medical Officer of Health to inspect the instruments, appliances, and all records required to be kept by her, and to make extract from or copies of such records. Records to be kept.

SCHEDULE.

FORM A.

THE TERRITORY FOR THE SEAT OF GOVERNMENT.
Nurses Registration Ordinance 1933.

FORM A.—APPLICATION FOR REGISTRATION.

Each person submitting an application for registration shall do so in the following form:—

The Chairman,
Nurses Registration Board,
Canberra, F.C.T.

I, _____, submit this application for registration under the *Nurses Registration Ordinance 1933* as a nurse.

In support of this application I furnish the following particulars and tender the documents specified hereunder:—

Age.
Birthplace.
Whether natural born or naturalized British subject.
Educational qualifications.
*Names of two persons testifying as to character.
Institution at which the prescribed training was received.
Qualifications or certificates held.

(Signed)

Date / /

* Testimonials should accompany the application.

FORM B.

THE TERRITORY FOR THE SEAT OF GOVERNMENT.
Nurses Registration Ordinance 1933.

FORM B.—APPLICATION FOR PERMISSION TO SIT FOR EXAMINATION FOR REGISTRATION.

Each person submitting an application for permission to sit for examination for registration shall do so in the following form:—

The Chairman,
Nurses Registration Board,
Canberra, F.C.T.

I, _____, submit this application for permission to sit for examination for registration under the *Nurses Registration Ordinance 1933*, as a nurse.

In support of this application I furnish the following particulars:—

Age.
Birthplace.
Whether natural born or naturalized British subject.
Educational qualifications.
Evidence of physical fitness.
*Names of two persons testifying as to character.
Institution at which the prescribed training was received.
Qualifications or certificates held.

(Signed)

Date / /

* Testimonials should accompany the application.

THE TERRITORY FOR THE SEAT OF GOVERNMENT.

Nurses Registration Ordinance 1933.

FORM C.—NOTIFICATION OF DEATH.

The Medical Officer of Health,
Canberra,

I [name in full], of [full address], holding a Certificate of Registration (No.) as a Midwifery Nurse under the Nurses Registration Ordinance 1933, hereby notify that the following death occurred in my practice on the day of , 19 :—

Name of deceased.
Address of deceased.
Age of deceased.
Date of delivery.
Stated cause of death.
Name and address of medical practitioner in attendance.

.....
(Signature of Midwifery Nurse.)

Date / /

FORM D.

THE TERRITORY FOR THE SEAT OF GOVERNMENT.

Nurses Registration Ordinance 1933.

FORM D.—NOTIFICATION OF STILL-BIRTH.

The Medical Officer of Health,
Canberra.

I, [full name], of [full address], holding a Certificate of Registration (No.) as a Midwifery Nurse under the Nurses Registration Ordinance 1933, hereby notify that on the day of , [patient's full name], of [patient's full address], was delivered by me before my arrival [strike out words not applicable] of a still-born child.

Sex.
Probable period of intra-uterine development, in months.
Condition of child.
Presentation.

.....
(Signature of Midwifery Nurse.)

Date / /

FORM E.

THE TERRITORY FOR THE SEAT OF GOVERNMENT.

Nurses Registration Ordinance 1933.

FORM E.—MIDWIFERY REGISTER.

1. No. of case.
2. The Mother.
 - (1) Name.
 - (2) Address.
 - (3) Age.
 - (4) History of previous pregnancies, labour and miscarriages.
 - (5) Labour—
 - (a) Date and hour when labour began.
 - (b) Presentation.
 - (c) Date and hour when child was born.
 - (d) Complications (if any) during labour (instrumental delivery, manual removal of placenta, laceration of perineum, &c.).
 - (6) Lying-in period—
 - (a) General progress.
 - (b) Complications (if any).
 - (c) Condition when attendance ceased.
3. The Child—
 - (1) Sex.
 - (2) Living or still-born.
 - (3) Full time or premature.
 - (4) If premature, probable period of intra-uterine development.
 - (5) Weight at birth.
 - (6) Condition at birth.
 - (7) Progress during lying-in period.
 - (8) Whether wholly breast-fed.
 - (9) If not breast-fed, state reasons and method of feeding adopted.
 - (10) Weight when attendance ceased.
 - (11) Condition when attendance ceased.

SCHEDULE—*continued.*

FORM E—*continued.*

4. The Midwife—

- (1) Date and hour of arrival.
- (2) Date and hour when first revisited after delivery.
- (3) Date and time of subsequent visits.
- (4) Date when attendance ceased.

5. Name and address of practitioner in attendance (if any).

6. Remarks, including any other abnormal conditions or circumstances.

.....
(Signature of Midwifery Nurse.)

(Address).....

Date / /

FORM F.

THE TERRITORY FOR THE SEAT OF GOVERNMENT.

Nurses Registration Ordinance 1933.

FORM F.—NOTIFICATION OF PUERPERAL PYREXIA.

The Medical Officer of Health,
Canberra.

(a) Full name. I (a) of (b)
(b) Full address. holding a Certificate of Registration (No.) as a Midwifery Nurse under
(c) Patient's full name. the *Nurses Registration Ordinance 1933*, hereby notify that (c)
of (d) under my care is suffering from puerperal pyrexia
(d) Patient's full address. subsequent to (c) abortion, miscarriage, or childbirth.
(e) Strike out Date of (e) abortion, miscarriage, or childbirth.
words Probable period of pregnancy, in months.
Inapplicable. Name and address of Medical Practitioner (if any) in attendance.

.....
(Signature of Midwifery Nurse.)

Date / /