

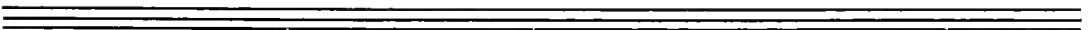
The
PIONEER

1942

To
Miss Snodgrass
From
Saint Agnes School of Nursing

Foreword

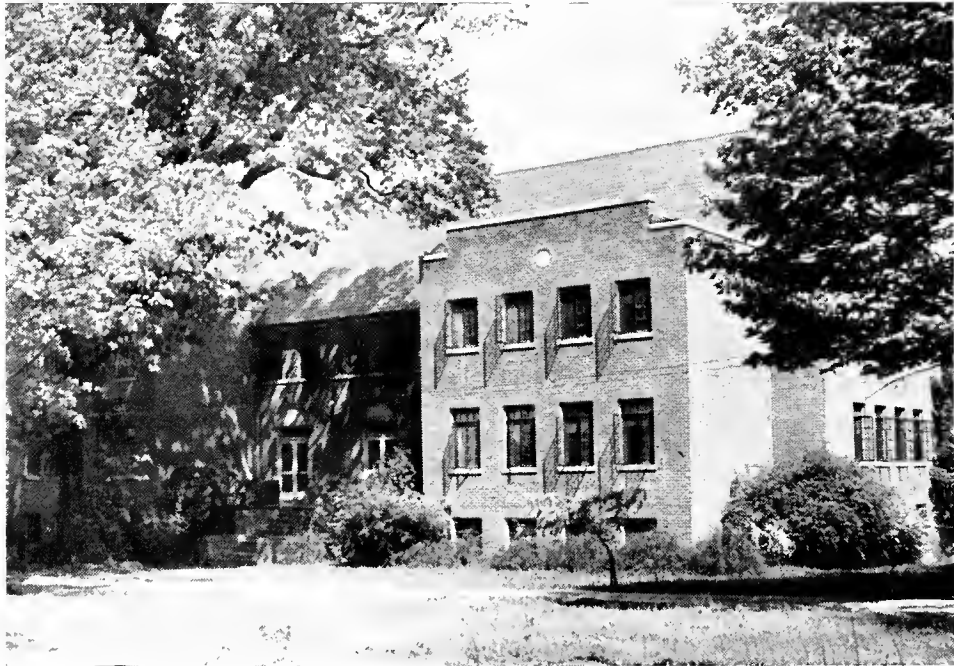
WE have enjoyed the privilege of representing our school in presenting to you the second edition of "The Pioneer," our yearbook. In the past few months we have planned for it, worked for it, lived with it. May it recall the profound traditions of a glorious past, inspire the future and remind us who are about to leave of the National Emergency and the urge for a still greater future. If through your associations, your memories, the value can be increased, the joy of service will then be realized.



The Hospital



The Nurses' Home





THE STUDENT BODY OF SAINT AGNES SCHOOL OF NURSING IN
GRATEFUL APPRECIATION DEDICATE THIS BOOK TO

HUBERT ASHLEY ROYSTER
A.B., M.D., ScD. (Hon.), F.A.C.S.

Chief of Staff

SURGEON-IN-CHIEF, ST. AGNES HOSPITAL
(1899-1941)

Dedication

To those who know thee not
No words can point :
To those who know thee
All words are faint :

My fervent wish is that the members of the present class, and all other classes, may go forth to their duties in the world, imbued with the dignity of their profession, fortified by high ideals and sustained by the spirit of Saint Agnes.

HUBERT A. ROYSTER.



MISS RUTH ESTHER FEIDER, A.B., R.N.
Administrator



MRS. ROSA MAI GODLEY, R.N.
Director of the School of Nursing

Faculty



MISS FLORENCE HARGETT, R.N.

Director of Nursing Service

MRS. LILA HAYWOOD, R.N.

Operating Room Supervisor



Faculty



MISS LEAH INEZ HENRY, R.N.
Head Nurse



MISS JEANETTE VAUGHN, R.N.
Head Nurse



MISS ALICE E. HEYWARD, R.N.
Head Nurse



MRS. W. B. STREETER, R.N.
Head Nurse



MISS ALBERTINE MASON
Matron

Meet the Staff

ADMINISTRATOR: Miss Ruth E. Feider, A.B., R.N., who comes to us from the Mission field in Nevada, bringing with her the spirit of the West. An able administrator and executive, Miss Feider rates the admiration and respect of all those with whom she comes in contact. Not only is she great in executive ability but she is also a nurse who knows her profession, and a devout churchwoman which accounts for her being here. She is the U. T. O's gift to St. Agnes.

DIRECTOR OF THE SCHOOL OF NURSING: Mrs. Rosa Mai Godley, R.N., who hails from Harlem School of Nursing, New York City, and has hopes of raising the curriculum and the nursing technique of St. Agnes to equal that of Harlem School of Nursing. Where the nursing profession is concerned, she knows the answers for she is a Twentieth Century Florence Nightingale.

DIRECTOR OF NURSING SERVICE: Miss Florence Hargett, R.N., of Mercy Hospital, Philadelphia, Pa., most recently at Margaret Hague Maternity Center, Jersey City, N. J., who is just what St. Agnes needed to see that our patients are properly cared for. She knows her profession thoroughly, but obstetrics is her specialty.

OPERATING ROOM SUPERVISOR: Mrs. Lila Haywood, who is a graduate of this institution but has been employed in other hospitals since her graduation. A fine operating room supervisor she is!

HEAD NURSES: Miss J. Vaughn, Grady Memorial Hospital, Atlanta, Ga. Always a smile for her patients.

Miss L. Henry—Second Floor—University of Georgia School of Nursing, Augusta, Ga. Business is her motto.

Miss A. Heyward, University of Georgia School of Nursing, Augusta, Ga. She knows just what to do.

Mrs. W. M. Streefer, University of Georgia School of Nursing, Augusta, Ga. She says nothing and does much.

BOOKKEEPER: Miss Louise Murphy, graduate of Livingstone College, Salisbury, N. C., and recently employed with the Wake Welfare Department, Raleigh, N. C. She balances the books and is indispensable to the hospital.

RECORD LIBRARIAN AND ADMITTING OFFICER: Miss Laura Edwards, former NYA Supervisor of the Cabarrus Street Project, Raleigh, N. C. She admits them and discharges them.

SOCIAL WORKER: Mrs. Sarah B. Brower, graduate of the Bishop Tuttle School of Social Work. She is the one to whom they all tell their troubles.

PHARMACIST: Mr. H. G. Price. He gives just what the doctors order.

INTERNES: Dr. N. R. Frisby, graduate of Middlesex Medical College, Waltham, Mass. His aim is to be an army physician.

Dr. M. McGoodwin, graduate of Middlesex Medical College, Waltham, Mass. A very promising future.

MATRON: Miss Albertine Mason. She maintains law and order in the dormitory, for girls will be girls.

—S. JEFFERSON, Class of '44.

Officers for the Student Association — 1941-1942

<i>President</i>	MISS MYRTLE ROBERTS
<i>Vice President</i>	MISS RUTH MUMFORD
<i>First Vice President</i>	MISS COLLETTE DOTSON
<i>Second Vice President</i>	MISS VIRGIL JOHNSON
<i>Secretary</i>	MISS CHRISTABELLE BRAGG
<i>Assistant Secretary</i>	MISS LUDELLE MADDOX
<i>Treasurer</i>	MISS JESSIE TONEY
<i>Chaplain</i>	MISS RUTH ERWIN

Officers for the Student Council—1941-1942

MISS MYRTLE ROBERTS
MISS VIRGIL JOHNSON
MISS RUTH MUMFORD

MISS JANIE TILLMAN
MISS ROSA HAMPTON
MISS CHRISTABELLE BRAGG

Officers for the Yearbook Staff—1941-1942

<i>Editor-in-Chief</i>	MISS JESSIE TONEY
<i>Assistant Editor-in-Chief</i>	MISS VIRGIL JOHNSON
<i>Social Editors</i>	MISSSES MARY WIGGINS, SAMMYE JEFFERSON AND BERNICE BOHANNON
<i>Literary Editors</i>	MISSSES JESSIE TONEY, VIRGIL JOHNSON, ALTHEA CARTER AND CATHERINE BRYANT
<i>Art Editors</i>	MISSSES CHRISTABELLE BRAGG, BERNICE BOHANNON AND MARIETTA CONNELLY
<i>Photography Editors</i>	MISSSES JOHNSY TERRY, MARY WIGGINS, LUDELLE MADDOX AND ALTHEA CARTER
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<i>Circulating Managers</i>	MISSSES KATHERINE LOWE, ROSA HAMPTON, NELLIE WILSON AND BEATRICE WATSON
<i>Advertising Managers</i>	MISSSES HELEN GLENN, WILLIE CAPEL AND MARY HURD

Class Officers

<i>President</i>	VIRGIL JOHNSON
<i>Secretary</i>	KATHERINE LOWE
<i>Treasurer</i>	WILLIE F. CAPEL
<i>Historian</i>	JESSIE TONEY

CLASS FLOWER: Talisman Rose.

CLASS MOTTO: "We strive not to equal, but to excell."

CLASS COLORS: Aqua Blue and Pink.

Class Poem

From mountain peaks we have not climbed
We've followed stars we could not see;
And rocked on seas we have not sailed
We've dreamed of worlds that could not be.

Yet through the mists we could not pierce
We glimpsed unerringly and bright,
St. Agnes shining true and kind
Upon the remnants of our night.

And so on down through all the years,
Whatsoever may betide us;
Fortune or gladness, woe or tears,
May St. Agnes' spirit guide us.

—VIRGIL JOHNSON, Class of '42.

Florence Nightingale Pledge

I solemnly pledge myself before God and in the presence of this assembly to pass my life in purity and to practice my profession faithfully. I will abstain from whatever is deleterious and mischievous and will not take or knowingly administer any harmful drug. I will do all in my power to maintain and elevate the standard of my profession and will hold in confidence all personal matters committed to my keeping, and all family affairs coming to my knowledge in the practice of my calling. With loyalty will I endeavor to aid the physician in his work and devote myself to the welfare of those committed to my care.

Class History

In September, 1939, a group of 14 students had assembled at St. Agnes Nurses' Home to seek for knowledge in the nursing profession.

After a week of being here we were given our blue uniforms with no bibs. A month later a bib was given. With this blue-and-white Dutch Cleanser's Lady's uniform, we did the cleaning and making beds in the wards assigned, plus going to class.

We took the blame for many wrongs, especially of things left undone. We struggled along with aching feet, until the bell said, "Time to eat."

As time marched on for our class we swayed and sweat so we could pass, when Christmas came we knew the time, the mid-term exams would come up soon.

Well, at last that's off our chest. We passed, you bet; you know we guessed. For later on it was mapped. We would get our stripes and be capped.

As the time passed by for most,
Some of our classmates dropped, of course;
But we couldn't stop our weary run,
For the days were dying with the sun.

Wednesday and Thursday of every week,
To old Rex Clinic we went to seek
The ways in which public health play
An important part in your life each day.

Vacation days started in June,
And off to home, airy as a balloon;
Then back on duty, full of pep,
For plenty of work and many a step.

Miss St. Agnes was a senior nurse,
And that meant money from your purse;
To make the homecoming of our school,
Stand out in history by President Gould.

As our junior year rolled around,
Eleven of us arrived safe and sound;
We studied awful hard to see
The days which were soon to be.

No time to waste, no time to fret,
For we had work we couldn't forget;
No time to think of idle play,
When we were blessed with eight hours a day.

Eleven stood as iron men,
That some glad day we could win
The victory of our nursing profession,
With a very true confession.

On the day of February the first,
A new time and age seemed to have birth;
A group of newcomers joined us then,
To stick three years through thick and thin.

In August, 1940, Mrs. Godley came
Our Director of Nursing Education with fame;
In the summer of 1941
Miss Feider, our superintendent did come.

Through many a hardship, tale and scold,
We came with grief which was untold;
We kept our chins up through the war,
Maybe some day we'll get a star.

Our hearts leaped up when we beheld,
When 1941 by Father Time was told;
On our caps were placed a black band,
Our senior year for it did stand.

Not a star that's made by man,
But a star by God's own hand;
While on earth we'll have our trouble,
But He'll give us stars by the double.

The graduating class of 1942 ends its history making by wishing our dear Alma Mater, our true colors blue and white, our schoolmates, advisors, and instructors a desire to continue putting your shoulder to the wheel and push to make St. Agnes School of Nursing bloom with every phase of the nursing profession.

—J. TOXEY, Class of '42.

Class Song

Dear St. Agnes, how we'll miss you,
Miss you as the days are long;
But we know you are so true,
To our grads so brave and strong.

Then to all our fellow students,
As they follow in our trail;
Pave the way for those who follow
After you, and cannot fail.

So we'll leave you, Dear Alma Mater,
Standing firm and waving high;
Carrying all the load and burden,
As you have in days gone by.

To our school we owe with honors,
Strength to serve our countrymen
Leaving as a farewell to you:
So long, student body and friends,
So long, student body and friends.

—J. TONEY, '42.

The Last Will and Testament

We, the graduating class of Saint Agnes School for Nurses, being of sound mind, and in view of the fact that we are about to make our departure, do bequeath our few good points and many bad points to those we are leaving behind us.

To the Class of 1943, we bequeath our right of seniority.

To the Class of 1944, we bequeath our stubborn and contrary disposition, for verily I say unto you, we are a stiff-necked and rebellious race of people, reaping where we have sown not and gathering where we have strewn not.

To the Faculty, we bequeath a restful future after their brave struggle to bring us out of ignorance.

To Miss Feider, Administrator, we bequeath peace, success, fewer complaints and all hoped-for improvements.

To Mrs. Godley, Director, School of Nursing, we will a student body with the ability to "carry an order" as and when ordered.

To Miss Mason, Matron, we will quiet at night and a living room floor free from foot-prints.

PERSONALLY: I, Katherine Lowe, bequeath to O. Brinson and J. Shade my surplus amount of adipose tissue.

I, Collette Dotson, bequeath to M. Hurd my million-dollar smile.

I, Helen Glenn, will to S. Jefferson and M. Connelly my ability to be late to class.

I, Willie Capel, will to A. Norwood and H. Clyburn my ability to be neat.

I, Johnsy Terry, bequeath to J. Reddick my ability to make a nurse.

I, Janie Tillman, bequeath to B. Bohannon to go hither and yon and to make contacts.

I, Grace Martin, will to N. Duncan and L. Maddox my jitterbug potentialities.

I, Jessie Toney, will to A. Carter my ability to be a silent listener to conversations.

I, Virgil Johnson, will to E. Scott and J. Patterson my love of good literature.

I, Fannie Joyner, will to no student my stay in the hospital as a patient.

I, Mary Wiggins, bequeath to Ruth Mumford my ability for an untidy room.

We hate to leave you and we know you can't do without us, but just recall our days with you and be not dismayed, for life is like that.

Signed in blood, we of the Class of 1942 are:

COLLETTE DOTSON

WILLIE CAPEL

JESSIE TONEY

JOHNSY TERRY

JANIE TILLMAN

VIRGIL JOHNSON

HELEN GLENN

MARY WIGGINS

KATHERINE LOWE

FANNIE JOYNER

GRACE MARTIN

CLASS OF '42.



MYRTLE ROBERTS

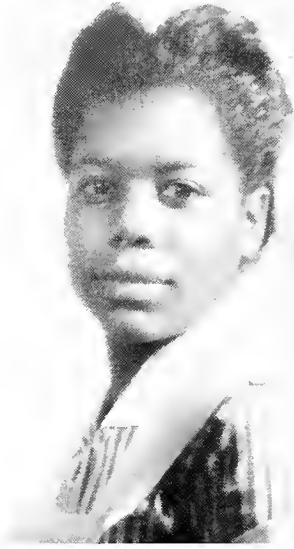
President, Students' Association

The purpose of this association is to assist in the promotion and directing of school activities and interests.

To increase coöperation among the faculty, residence staff, and student body.

To encourage and maintain the spirit of individual pride in the practice of the ideal for which our school, and the nursing profession have been established.

Seniors



KATHERINE LOWE—Lexington, N. C.

“Kat” to do post graduate work at
Columbia University.

WILLIE CAPEL—Candler, N. C.

“Red”—to be 1-a in the Army.



JOHNSY TERRY—Henderson, N. C.

“Simp”—to be a Doctor.

Seniors

MARY H. WIGGINS—Omaha, Neb.
“Hedde”—a man to call my own.



GRACE MARTIN—Jenkinsville, S. C.
“B. Martin”—to get her Mrs. degree.



JESSIE TONEY—Elliot, S. C.
“Toney” to be an ideal nurse.

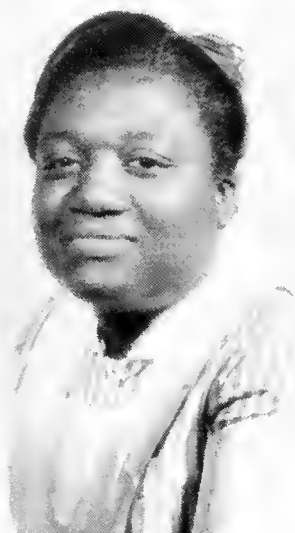


Seniors



JANIE TILLMAN—Youngstown, Ohio
“Tiney”—to be an Operating Room
Supervisor.

COLLETTE DOTSON—Lynchburg, Va.
“Collette”—to possess the filthy here.



HELEN GLENN—Goldsboro, N. C.
“Joe” to be a mortician.

Seniors



FANNIE JOYNER—Dover, N. C.
“Fannie”—to wear a uniform.

VIRGIL JOHNSON—Memphis, Tenn.
“Grannie”—to be an Army Nurse.



Senior Class

- S** is for *Smiling* which Terry does always.
E is for *Energy* which Glenn has in limitless amounts.
N is for *Neatness* which typifies Capel.
I is for *Ideals* which Johnson is full of.
O is for *Orderliness* which Dotson possesses.
R is for *Right* which Toney usually is.
- C** is for *Capable* which means Martin.
L is for *Laughter* which in Wiggins is unsuppressible.
A is for *Ability* which Lowe seems to have.
S is for *Sincerity* which Tillman has.
S is for *Sweetness*, another way of spelling Joyner.

—M. WIGGINS, Class of '42.

Class Prophecy

This is the year 1952—that long-awaited, eventful day has arrived at last. The Class of 1942 is holding its reunion on the spacious lawn at the home of Miss Virgil C. Johnson, Miss Johnson, who was former president of the Class of '42, is now superintendent of "The Old Folks Convalescent Home" in Chicago.

Mrs. Sandy Headen, Jr., formerly Miss Jessie Toney, arrives from Indiana where she is doing private duty nursing. She informs us that her two-year-old twins are doing fine and are both girls.

Looking out through the archway, we see Miss Willie Capel, Lieutenant, alighting from her new '52 Pontiac, from Camp Blanding in Florida. Closing her door, she sights Miss Helen Glenn and yells. Miss Glenn is doing public health nursing "Deep in the heart of Texas."

Suddenly the telephone is heard ringing. Miss Janie Tillman is calling to notify Miss Johnson that she is on her way out, after leaving her monoplane at the airport; she takes a taxi out. Miss Tillman is Operating Room Supervisor at the General Hospital in Oklahoma.

Suddenly Miss Lowe appears, looking tired and worn out, with a small, black bag in her left hand. Miss Lowe, as Superintendent of Nurses at Harlem Hospital in New York City, has been trying to raise the educational standards of nursing there since the war.

Miss Johnson just received a telegram from Mrs. Bynam Moore, nee Miss Grace Martin, stating that she won't be able to attend our reunion due to family responsibilities; tells us that her septuplets are all boys but one.

Mrs. O. Morse, nee Mary Wiggins, arrived the next day from New York, looking as if she just stepped out of Vogue Magazine. She apologizes for arriving late due to her many social activities and also servant trouble.

Miss Collette Dotson, Educational Director at Saint Phillip's Hospital in Richmond, Virginia, seems to be having quite a bit of trouble with her students and sends her apologies for her absence.

Doctor Johnsy Terry is here. She has recently finished studying at Meharry Medical College and plans to do her internship at Saint Agnes Hospital in Raleigh, N. C., which has recently been rated with New York City.

Miss Fannie Bell Joyner looks quite cheerful as she tells of her work for Dr. W. B. Pettiford, famous urologist who has quite a spacious suite in Raleigh, N. C.

After several hours of reminiscing, discussion and dinner, the group adjourned until further meeting.

CLASS OF '42.

Senior Catalogue

MISS CAPEL	<i>Neatest</i>
MISS DOTSON	<i>Most Executive</i>
MISS GLENN	<i>Most Athletic</i>
MISS JOHNSON	<i>Most Poetic</i>
MISS JOYNER	<i>Quietest</i>
MISS LOWE	<i>Most Ambitious</i>
MISS MARTIN	<i>Highest Tempered</i>
MISS TERRY	<i>Biggest Flirt</i>
MISS TILLMAN	<i>Most Talkative</i>
MISS TONEY	<i>Best Natured</i>
MISS WIGGINS	<i>Best Dressed</i>

—H. GLENN, Class of '42.

When Gabriel Blows His Horn:

1. Jessie Toney will be teaching jitterbug lessons.
2. Helen Glenn will probably be raging for food.
3. Mary Wiggins will be settling her love affairs.
4. Katherine Lowe will be trying to snatch one more minute's sleep.
5. Johnsy Terry will show us her diary.
6. Janie Tillman will have found the ideal man.
7. Collette Dotson will be planning her next season's wardrobe.
8. Grace Martin will be teaching pediatries.
9. Willie Capel will have attained her ideal.
10. Fannie Joyner will have a car.
11. Virgil Johnson will still be giving advice to Mary Wiggins.

—V. JOHNSON, '42.

Class of '42

<i>Name</i>	<i>Answers to</i>	<i>Should be</i>	<i>Famous for</i>	<i>Weakness</i>	<i>Disposition</i>	<i>Destination</i>
TERRY	Simp	Calmed down	Laughing	Internee	Sunny	Woman in white
MARTIN	B. Martin	Handled carefully	Temper	Arguing	Explosive	Cottage
TILLMAN	Jamie	Silenced	Talking	Good time	Cheery	Prevaletines
CAPEL	Red	Appreciated	Complaining	Sleeping	Energetic	Public health
GLENN	Joe	Quieted	Bad feet	Peanut butter	Effervescent	District Supt.
TONEY	Jessie	Fed	Jitterbugging	Gum	Denure	Follies
JOYNER	Fonnie	Amply fed	Moods	Collard greens	Explosive	
DOTSON	Dot	Humored	Fussing	Clothes	Impish	Magazine cover
WIGGINS	Hedde	Applauded	Impudence	Opposite sex	Lackadaisical	Soft lights and sweet music
LOWE	Kat	Reduced	Eating	J.....	Bubbling	Cottage

—M. WIGGINS, Class of '42.

Humor

VISITOR: May I see Mrs. X?

STUDENT NURSE: I'm sorry, you'll have to go to the office.

DIRECTOR: He doesn't need to go to the office, I sent him to you.

STUDENT NURSE TO VISITOR: I'm sorry, the patient died last night.

DIRECTOR: (Slowly walks away.)

DIRECTOR: How can you chart the condition of a patient if you haven't asked him how he is feeling and how he rested?

STUDENT NURSE: Sorry, Mrs..... but the patient happens to be a two-months-old baby.

EDUCATIONAL DIRECTOR (entering a noisy hall): You seniors make more noise than the preliminary students.

SENIORS: Oh, give them a chance; they haven't been here long enough.

SUPERVISOR: Nurse, where are Bobby's shoes? (Bobby is a five-months-old baby.)

NURSE (to Bobby): Bobby, where are your shoes?

MATRON: Do you know how to stand straight?

STUDENT (in an oversize uniform): I am standing straight; it's only my uniform that's at ease.

—C. DOTSON, Class of '42.

Suggestions

1. A sterile nurse to hold Dr. W. F. Clark's ash tray.
2. Long single suture material for Dr. L. T. Delany.
3. More Good looking nurses for Dr. Perry to flirt with.
4. A box of perfect plaster for Dr. H. A. Thompson.
5. A nurse who knows how to open sterile goods for Dr. A. Webb.
6. A nurse to satisfy Dr. Pettiford in surgery and the delivery room.
7. A nurse who can work fast enough to keep up with Dr. Lawrence.
8. A stool in the O. R. for short nurses to tie Dr. K. P. Neal's gown.
9. A nurse to help Dr. Judd economize.
10. An interne who can do Dr. Ruark's laboratory work.
11. A map of the hospital showing the rooms of his patients for Dr. Umphlet.
12. Bigger ash trays in the clinic for Dr. Royster.
13. An office nurse to get Dr. Rhodes' operations right.
14. A pan of cyanide solution for Dr. Smith.
15. A perfect heart for Dr. Caviness.
16. More leisure for Dr. Frisby.
17. More sleep for Dr. McGoodwin.

—K. LOWE, Class of '42.

Last Day Thoughts

DEAR SCHOOL:

As I sit in my room thinking that my days as a student nurse are almost over, a wave of nostalgia sweeps over me, and I think of the many scenes through my training days that have led to this day.

I entered training as all students do, eager and anticipating the many wonderful things I would soon know how to do.

First, there were lessons in the classrooms; introducing Sallie Chase and Susie Skeleton. They were the most patient of all patients, their patience having come of long suffering and much nursing care. Poor Sally; how patiently she takes twelve or more hyperdermics in one morning, has her back rubbed and washed and powdered times without number. Her mustard plaster never blisters, though I forgot the vaseline or left the plaster on a few minutes over time. And Susie—how often did I take away an arm or part of her head so that I might see how bones are put together. And her sister, Susie Q., who has muscles and skin, was very patient, too; she even allowed her brain and her heart to be taken out.

There were the days in the chemistry lab when I'm sure the nurses' guardian angel must have been near to prevent an accident, when some of the mixtures I made could have turned to dynamite. And the microbiology and dietetics labs; learning to distinguish the organisms that cause the diseases and the dietary treatments.

Finally, after much trial and error on my friends Sallie, Susie and Susie Q., I was allowed to go on the wards in the hospital. At last, I thought, I am really a nurse. But I met a few bumps because Mrs. X was not as patient as Sallie. Mr. X's leg hurt if it were moved quickly, he groaned and Susie Skeleton never did, even if her hand were completely taken off her wrist. By and by, however, I learned to move Mr. X's leg without hurting him and when he went home he had a good leg. Mrs. X turned out to be a very sweet lady and a marvel of a patient.

The days were busy and passed quickly and I found myself beginning my second year, to study cases, and advanced theories about medical and surgical diseases, emergency treatment and applying things I'd learned, wherever opportunity came. Thus a second year was spent.

The third year found me studying subjects that help one get adjusted to professional life, smoothing out kinks and wrinkles, learning how to be self-reliant, which, above all things, a nurse must be.

Now these days of study are almost over; I must face a future with a challenge and try always to bring the best out of any situation in which I may find myself. It is to the principles of honest work and living that have been instilled here that I trust myself to accept that challenge.

As I leave I would say to loyal Sallie and Susie and to my instructors who so tirelessly taught, I am now a product of your making, and because I am, I feel that I will always do what is good, because your products have a good label.

A Fond Adieu,

VIRGIL JOHNSON, Class of '42.

First Day in Surgery

It is 7:00 a.m.—first day in surgery! How exciting! At last I have arrived. The most wonderful place in the hospital; everything is white and shining. No beds to make, no temperatures to take—life at last is as rosy a picture as we have seen (in the movies); no hustle or bustle, everything in quiet tones. How wonderful!

Nine a.m. the chief surgeon has just phoned in that he is doing an emergency operation at 9:30. could we please be ready? Of course, Doctor! At last here's where I'll shine.

First, I must hang scrub suits in the dressing room, see that there is plenty of ice water, caps and mouth pieces for the doctors and internes; go for the patient who has been prepared on the floor. I hope the wheel does not come off the stretcher when I get out of the elevator. At last I am back to the surgery; the patient is all right, perhaps a little excited because the wheel did come off in spite of the fact that I was very careful.

There are a hundred things to do: keep the sterilizer boiling, keep inquisitive people out, try to be prompt and help keep the surgeon's temper cool (a hard job sometimes).

Eleven a.m. Finally the operation is complete the patient is safely back in bed. I return to my assignment. The doctors didn't see the hangers for their scrub suits or rather the hangers fell to the floor in various corners. There is a large pail of sponges that await attention, duties are many and varied. Finally, I wade through the fog and the place regains some of its morning freshness.

Three thirty. At last the hour comes when I can go off duty. I have a rosy vision of what I'll do for my feet; they are Oh well, that's a nurse's secret. The glamor of the surgery fades for a few hours, but it is still the most interesting place in the hospital—until you pass the nursery.

—VIRGIL JOHNSON, Class of '42.

Songs

WILLIE CAPEL
COLLETTE DOTSON
HELEN GLENN
VIRGIL JOHNSON
FONNIE JOYNER
KATHERINE LOWE
GRACE MARTIN
JOHNSY TERRY
JANIE TILLMAN
JESSIE TONEY
MARY WIGGINS

"What's the Matter With Love?"
"I'm Falling for You."
"Deep in the Heart of Texas."
"Slide, Mr. Trombone."
"You Won't Let Me Go."
"All Alone and Lonely."
"Blues in the Night."
"Tonight We Love."
"It's Torture."
"I'll Be Ever So Grateful."
"I Got It Bad and That Ain't Good."

—K. LOWE, Class of '42.

Just Imagine:

W. Capel being pleased on duty.
C. Dotson not knowing a diagnosis and its treatment.
H. Glenn being quiet on Senior Hall.
V. Johnson not rushing.
F. Joyner not having her moody spells.
K. Lowe not trying to show you a deep point.
G. Martin taking things as they come.
J. Terry not flirting.
J. Tillman quiet during a discussion.
J. Toney being loud, wrong and out of order.
M. Wiggins not being impudent.

—W. CAPEL, Class of '42.

Our Defense Program

Due to the national crisis and its vast production program that calls for the use of all possible resources, we, the personnel and students of St. Agnes School of Nursing feel it our duty and privilege to participate in this nationwide program. This work is necessary for the protection of our patients and the community at large as well as our own.

On January 21, 1942, a group of nine students met with Mrs. R. M. Godley, Director of the School of Nursing, and Miss R. E. Feider, Administrator, to organize as a part of the defense program at St. Agnes Hospital. Plans were discussed by the group, the object of which is "To stimulate an interest among the student body as their part in the defense program." The student body was divided into three groups with Miss Johnsy Terry as general chairman.

Group one, with Miss Mary Wiggins as chairman, is composed of Misses Ludelle Maddox, Sammie Jefferson, Jessie Toney, Virgil Johnson, Rosa Hampton, Addie Norwood, Bernice Bohannon, Maxine Kelly, Beatrice Watson, Hope Clyburn, and Juanita Shade.

Group two, with Miss Johnsy Terry as chairman, is composed of Misses Myrtle Roberts, Althea Carter, Katherine Lowe, Willie Capel, Mamie Frierson, Ruth Erwin, Louise Patterson, Eleanor Harding, Nora Duncan, Lillian Loggins, Hortense White, and Odessa Brinson. This group has charge of transporting patients.

Group three, with Miss Janie Tillman as chairman, is composed of Misses Nellie Wilson, Catherine Bryant, Helen Glenn, Collette Dotson, Grace Martin, Christabelle Bragg, Ethel Scott, Mary Hurd, Ruth Mumford, Lina Brown, and Judie Reddick. This group is in charge of drugs and linens.

The students have participated wholeheartedly in our program. Each student was instructed to keep her uniform at a handy position so as to dress and be out of the building in not more than three minutes. Orderliness and quietness were points greatly stressed as well as remaining cool, calm and collected. Several blackouts have been practiced which were very well done; the last of which the nurses went to the hospital, taking the places assigned them respectively on the wards. This was done during the citywide blackout April 24, 1942, and was very effective. All rules were observed by patients, students and faculty.

We are going to do all we can for the protection of others and help to win the war.

—JOHNSY TERRY, Class of '42.



Black Bands

An exciting day dawned for the seniors when we knew we would receive black bands for our caps. Fortunately the day was fair and there were few classes.

The living room was simply but beautifully arranged with flowers and the soft lights cast shadows that made the guests look very pleasant, indeed.

A hush fell over the guests as we marched double file into the room to the stirring and solemn hymn, "God of Our Fathers, Whose Almighty Hands."

After being presented to our Administrator, whose talk was short but very impressive, the candles were lighted, and we were given our caps.

A short program was given afterward in which we tried to express our gratitude to our instructors for their united efforts that had made possible this day.

—VIOLET JOHNSON, Class of '42.

Junior Class



History of the Junior Class

September, 1941. . . . Well, the history of the Class of '43 continues. Buses, trains and what not bringing students from vacation and into a new school year R-O-L-L C-A-L-L.

Miss Roberts here? Fine. . . . Miss Bragg—late, but here. . . . Misses Hampton, Hurd, Frier-son, Erwin, Scott, Norwood, Maddox, all present. Miss Mumford? Miss Mumford, well where can that young lady be? Absent? Well, not for long, we hope.

October 1st—Classes began and our new responsibilities. The class schedule a mile long. Whee! We struggled through that month, but how I don't know.

November, the great event of our class. We received two black bands on our caps definitely de-noting junior year. And how proudly we wore them!

December and holidays once a year; boxes from home all wrapped in shiny Christmas paper. Joy for everyone!

The new year—1942. Each junior looks forward to this year with high hopes of making it a successful one.

With our hopes up and one eye on the book, we are watching the first semester close, and mid-term examinations.

Well, they are soon over and we can all take a deep breath and relieve the strain.

There's the door bell. Wonder who's coming? Quick steps on the stairs; a short "Hey, Junior!" What? Well, if it isn't Miss Mumford. Back again; we welcomed her to the Junior Class.

Alas! Alas! There's a cloud hanging over the Junior Class. Some of our members are ill. Had to be hospitalized, but only for a short time. The cloud is passing and we are all together again.

What's this, birds singing, trees budding? Why, it's spring, and the time the Junior's fancy turns to the well-known thing called . . . tennis. Yes, the grand old sport. Ugh! A little soreness and a few stiff joints after the first try out, but that will soon wear off, we hope.

A gala affair; tall, charming Miss Bragg was crowned May Queen at a lovely dance sponsored by the Freshman Class. She won over three other contestants. From this affair we drift into . . .

Soft music, beautiful dresses, ribbons and flowers floating around the highlight of the class. The Junior-Senior Prom. Classes forgotten for the moment; the Junior Hour, a night of simplicity.

Hey, what's this? Let me in on it! Bags are being packed. Excitement is filling the air.

Boy! Vacation beginning and I must get into the midst of it!

Just as the winter fades, as the spring begins, so must I close the second chapter of the his-tory of the Class of 1943.

Yours truly,

NELLIE WILSON, '43.

Freshman Class



History of the Class of '44

As we look back over the past few months it is very pleasant to think of the progress we have made. Eight months ago, September 14, 1941, we were just beginning—17 in number—and representing six states: Alabama, Georgia, Indiana, New York, North Carolina and Pennsylvania. We came to St. Agnes School of Nursing with the determination to make of ourselves the type of nurses that the world has need for.

After an extensive educational orientation program of one week, we organized our class and settled down to routine schedule.

In the beginning we found it difficult to get our bearings; however, with encouragement from Miss Feider and Mrs. Godley and others who had the interest of the school at heart, we gradually became adjusted and began to work in earnest on our studies and ward duties.

Our first day on duty will long be remembered because to us it was the beginning of a dream come true.

Although our schedule was very heavy, in addition to ward duty, we studied very hard and worked faithfully, for to us our duties were a source of pleasure. When the first honor roll went up our class was well represented with seven members having averages of 90 and above, namely: Misses Lillian Leggins, Marietta Connelly, Beatrice Watson, Sammie Jefferson, Bernice Bohannon, Edna Shaw and Catherine Bryant.

At first the sailing was far from smooth, but that did not stop us because our minds were made up.

After having recovered from our excitement about the first honor roll, news came of the homecoming game at which some lucky nurse would reign as "Miss St. Agnes." After having elected Misses Hope Clyburn and Hortense White as candidates for attendants to "Miss St. Agnes," we began working feverishly to give them financial backing. Our efforts yielded the largest amount raised by either of the classes and at the homecoming game Misses Clyburn and White were lovely attendants dressed in dark blue suits with beautiful chrysanthemum corsages.

There was never a dull moment for us, for no sooner had we finished the homecoming game than Thanksgiving was just around the corner. Which meant a big day for us. We had a half day off duty and a lovely Thanksgiving dinner in the bargain.

We worked very hard but we didn't mind, because we enjoyed our work so much. A happy set we were.

Immediately after Thanksgiving we began a drive for funds with which to upholster our living room furniture for Christmas. With the sales of ice cream, candy, sandwiches, etc., we were able to raise the largest sum.

When the November honor roll was posted we were still going strong with five students with averages ranging from 95 to 97, namely: Misses Bohannon, Bryant, Carter, Jefferson and Leggins.

One day there was good news for us: Restrictions lifted from December 5th to January 5th, which meant that we, the preliminaries, could have out-of-town visitors and movie dates. It is useless to say how we took advantage of this golden opportunity. It will suffice to say we did. Merrily we rolled along with our ward duty, studies and, of course, week-end dates. Almost before we realized it Christmas was here and with it the rush that always accompanies the Yuletide season. We were very busy but we did not forget the real meaning of Christmas in our haste. Before us was the picture of the Baby Jesus, God's gift to the world. Since we were so happy, we wanted to contribute to some one's else happiness, so we began Christmas Day at 4:00 a.m. by singing carols to our patients here in the hospital and then driving out to the Sanatorium where we sang to the patients there. With such a beginning you can guess that our Christmas Day was perfect.

Without warning the holiday season was over and gone, with it our privileges, but we didn't mind, realizing that nothing good lasts forever.

About this time our defense program was organized with Miss Johnsy Terry as chairman, our class being represented by Miss Carter on Transportation of Patients Committee, Miss Jefferson on the Linen and Supply Committee, and Miss Bryant on the Drug Committee.

Mid-term examinations were announced for the last week in January which meant study for us for we knew our preliminary period ended with these examinations, and of course we were very anxious to pass our "Trelin" period so that we might receive the school cap.

On January 26th, 17 nervous girls entered the classroom to take that first mid-term examination. Mrs. Godley must have sensed our nervousness, for again she encouraged us, saying: "You can do it, girls, I am depending on you." From then on we went into each classroom with the assurance that we would make the grade, we just had to, to do justice to those parents back home who were praying for our success, and for those instructors who had faith in our ability to do the work. And on Friday, January 30th, when exams were over and completed, and averages went up, 17 girls were congratulated by the administration on their splendid efforts and achievements. Again we were well represented on the honor roll, having five members of our class with averages of 95 and above, namely: Misses Bernice Bohannon, Catherine Bryant, Althea Carter, Sammye Jefferson, Lillian Leggins.

With a song in our hearts, we turned our efforts to our cupping exercises, as that would be the true beginning of our careers as nurses. As our administrator put it, "We had arrived." On March 16th we again emerged with flying colors. Seventeen girls received the school cap, a record to be proud of, for never before in the history of St. Agnes had the entire class reached this goal. And those girls who had maintained the highest average for the first semester were presented beautiful corsages, the compliments of Mrs. Godley. Respectively: Miss S. Jefferson receiving a bouquet for the highest average, Misses Bryant, Carter, Bohannon and Leggins, corsages for their splendid efforts and outstanding achievements during the first semester. With the determination that from this moment on we must be true, for there are those who trust us, we went back to our duties of cheering those patients who needed our care.

A word about our Lenten season observance: Although other events were occurring, Lent was by no means forgotten. We welcomed this time to take stock of ourselves spiritually and our sacrifices and contributions were made wholeheartedly.

With the coming of Easter, spring was here and with it spring fever for us. For a few days we could hardly overcome the feeling of wanting to get away from it all, but duty called and we could not follow our impulses.

In the celebration of the Raleigh Sesquicentennial out of the outstanding features was a victory parade. St. Agnes Hospital was represented by six student nurses, four of them being from our midst, namely: Misses Jefferson, White, Reddick and Bryant.

Although St. Agnes had never sponsored a May Queen contest, we, the brilliant Freshmen, got the idea that it was just about time we staged the initial May Queen contest, Miss Hortense White being elected as our candidate. It would sound egotistical to say just how well we planned and carried out the contest, but facts are facts. The contest culminated in a May Queen ball held in the living room of the Nurses' Home. For the first time in our short history, the "Big 17" witnessed defeat by the close margin of five cents. Of course our spirits were not daunted, as we lost to our good friends, the Juniors.

So ends chapter one of the history of the Class of '44. Until next term, then we'll just say, "So long."

—SAMMYE JEFFERSON, '44; ALTHEA CARTER, '44.

Superstitions of the Freshman Class

What Would Happen if:

- Nora was a *Raw* can instead of a *Duncan*?
- Clyburn was *Faith* instead of *Hope*?
- Eleanor was *Softing* instead of *Harding*?
- Lina was *Red* instead of *Brown*?
- Althea was *Buster* instead of *Carter*?
- Odessa was *Brindaughter* instead of *Brimson*?
- Sammye was *Washington* instead of *Jefferson*?
- Beatrice was *Killson* instead of *Watson*?
- Catherine was *Brybee* instead of *Bryant*?
- Judie was *Whiterick* instead of *Redbrick*?
- Lillian was *Boots* instead of *Leggins*?
- Hortense was *Purple* instead of *White*?
- Louise was *Hitterson* instead of *Patterson*?
- Marietta was *Bonnely* instead of *Connely*?
- Juanita was *Sun* instead of *Shade*?
- Bernice was *Mohammon* instead of *Bohammon*?
- Maxine was *Jelly* instead of *Kelly*?

—N. E. DUNCAN, Class of '44.

Who's Who Among the Frosh

I, the sponsor of this column, am in no way responsible for the material contained herein. This column is a result of the Freshman Class votes.

JUDIE M. REDDRICK	<i>Best Dressed</i>
BEATRICE WATSON	<i>Cutest</i>
HOPE H. CLYBURN	<i>Best Looking</i>
LINA LEAN BROWN	<i>Personality</i>
LINA LEAN BROWN	<i>Cutest Smile</i>
E. BERNICE BOHANNON	<i>Best Liked</i>
JUDIE M. REDDRICK	<i>Neatest</i>
HOPE H. CLYBURN	<i>Most Attractive</i>
LOUISE PATTERSON	<i>Most Popular</i>
MARIETTA CONNELLY	<i>Best Dancer</i>
ALTHEA CARTER	<i>Most Studious</i>
HORTENSE WHITE	<i>Quietest</i>
E. BERNICE BOHANNON	<i>Best All-round Student</i>
ALTHEA CARTER	<i>Most Ambitious</i>
LOUISE PATTERSON	<i>Most Shapely</i>
HORTENSE WHITE	<i>Prettiest Hair</i>
BEATRICE WATSON	<i>Prettiest Eyes</i>
LILLIAN LEGGINS	<i>Most Talkative</i>
MARIETTA CONNELLY	<i>Most Friendly</i>
SAMMYE JEFFERSON	<i>Laziest</i>
MARIETTA CONNELLY	<i>Class Flirt</i>
HOPE H. CLYBURN	<i>Biggest Jiver</i>

—H. H. CLYBURN, '44.

Nurse's Psalm

Nursing is my destiny, I shall not pass.
 It maketh me to live over in the hospital.
 It leadeth me from the Chapel to the Nurses' Home.
 It disturbs my mind. It leadeth me in the paths of knowledge for my future's sake.
 Yea, though I study Psychology and the Sciences conscientiously, I know nothing;
 for I am all mixed up.
 My fellow sufferers they comfort me.
 The teachers sit at a table. Their words enter into my ears.
 My ears soon runneth over.
 Surely Nursing Art and Anatomy will follow me all the days of my life, for I will
 remain a student nurse for ever and ever, Amen. —N. E. DUNCAN, '44.

A Nurse's Last Request

When I die, bury me deep,
Place "Rothweiler and White" at my feet;
Put my "Psychology papers" under my arm,
Tell Mr. McClemy they did me harm.

Place my "Chemistry" at my side,
Tell Mr. Woods just why I died;
Place my Nursing History at my head,
Tell Mrs. Godley I'm glad I'm dead.

Place my "Materia Med." on my chest,
Tell Miss Feider I did my best;
Put my ward work on my back,
And in return I'm going to haunt Miss Hargett's shack.

I think Miss Vaughn was a pretty bad sport,
Making me write hundreds of nurse's notes;
Put my orders in my hand,
Tell Miss Heyward I'm in the Promised Land.

I hate the innocence of the world at large,
But I wish them the worst of the murder charge;
And when they finish killing you, too,
Count up your "U's" and follow through.

Now that you'll never see me more,
Hurry and hunt me on the shady shore;
Where we can talk till after twelve,
And ignore Miss Mason's bell as well.

—HOPE H. CLYBURN, Class of '44.

Let's Go, Saint Agnes!

Yea, St. Agnes! We're on the upward trend,
Yea, St. Agnes! We're with you 'til the end,
Dear St. Agnes! We're going to the top,
Dear St. Agnes! We'll never, never stop.

We've tasted success, we like its flavor,
Upward we'll go, never will we waver,
With us it will be one continuous flight,
Until we have reached the uttermost height!

And when the goal is finally reached,
We will consider the sermon very well preached,
If any should ask by whom were you sent,
Say the Freshmen were behind you one hundred per cent.
Yea, St. Agnes! Yea! Yea!

—MARIETTA CONNELLY, Class of '44.

The 1941 Freshmen

When we arrived on St. Agnes' campus, 1941,
We knew from the beginning there was work to be done;
We all started out happy at heart,
To know that now was a time for us to do our part.

The task was not an easy one, we were made to understand,
But the work that we did, every one thought was grand;
We had courage—to not give up, no matter how hard the task would be,
In order to do our work presentably for visitors to see.

When we look back from the beginning to the present day,
We believe we will be successful, if we continue in this way.
Of course, there will be times when we will want to shed some tears,
But we will be successful nurses after three hard years.

—HORTENSE WHITE, Class of '44.

An Angel in Disguise

She is a gift to our world,
Our country and our race;
Her knowledge to us she unfurled,
And took naught in its place.

She's benefited young and old,
The poor and needy, too;
None of her knowledge has she sold,
She's of the stock that's true.

She is a true American,
With curses at her hurled;
Her wisdom was a hurricane,
Which woke up this old world.

Tho' this may seem like worthless chatter,
Or meaningless palaver;
We'll adore you, it doesn't matter
What you do, Miss Feider.

—ALTHEA L. CARTER, '44.



CHAPEL

Preliminary Students



The Probe's View of Nursing

We have come to one of the most important periods in life; we have arrived at a place where expectations run high, and where not only our parents and instructors, but ourselves are inclined to speak of our careers and prospects. This is only natural. Still we must remember that neither talk nor sentiments will pay bills. They must be cashed in to reach their real value. As long as talk is never more than vocalized breath and as long as sentiment is but a quickened heart beat, however laudable both of these may be, we shall fail to move towards the goal. In other words, our plans, no matter how praiseworthy they may be, will be of no avail unless they have the backing of a firm resolution to dare and to do.

Notwithstanding the adverse remarks of a few isolated critics, it is the well-trained nurse that does most for the welfare and progress of mankind. Hence the necessity for nursing has increased and will continue to increase as long as civilization continues to advance in this complexity.

At the present time, more than ever before, all issues call for leaders. It is for this reason that we are especially to be congratulated on our efforts to enlarge our visions and knowledge, to broaden our horizon, and to control our thinking by good and sound principles. Moreover, the present age is strenuous and complex, with a multitude of duties to be performed and a host of things to do. These duties must be executed, and it is the well-trained nurse that is best prepared for their execution. Her training fits her for service and makes her a larger, truer woman. And since duty well done always is a source of joy, it is obvious that the true nurse's prospects for happiness are greater than those of the illiterate.

Every generation of man since the world began, has tried to live by man's favorite rule, "Every man for himself, or every organization or institution for itself," but soon or late, across the face of such effort God has written the word "failure."

The student that thinks of only the profit in the profession of nursing will suddenly realize what a great mistake she has made. She will, too, suddenly realize by this time that she has been so self-centered, self-indulgent, self-satisfied and self-esteemed and fit only to be replaced by a more stalwart and sterling student.

In going in and about our daily tasks, may we be filled with the spirit of true service and thus enrich not only our lives, but also the lives of others.

—CATHERINE BYRD, CLASS OF '45.

Here and There at St. Agnes



Junior-Senior Prom



Treatment and Nursing Care of Burned Patients

An important event occurred in our hospital October 20, 1941, when a six-year-old child was admitted suffering from severe burns over the abdomen, chest, back and upper portion of the arms. The clothing was removed as soon as possible. Nurses who have treated burns by the old method understand it. A new conception of burns has been brought about, however, as a result of their treatment by tannic acid and silver nitrate. No nurse who has seen this treatment used has any aversion to caring for a patient.

Under the old treatment there was always pus, high temperature, general sepsis, long and trying weeks of convalescence, and often death in the end. With tannic acid and silver nitrate treatment the surface is clean and dry, the temperature low, the general condition good, and hope is given to those unfortunates. Many who would have died are saved.

A change takes place when the tannic acid and silver nitrate treatment is applied, whether to a large or to a small burn. The treatment changes the burn lesion into one comparable to a surgical wound. It makes the treatment superior to other procedures from these points of view:

1. The saving of lives that would be lost through the slower method of tanning.
2. Stopping immediately the loss of body fluids, thereby preventing the consequent concentration of the blood.
3. The immediate prevention of shock.
4. Immediate prevention of the absorption of toxins.
5. Prevention of infection by the short period of application of moisture and the early drying of the tanned tissue.
6. The saving of the kidneys and other organs from the effects of fluid concentration and the absorption of toxins and infection.
7. The greater comfort of the patient.
8. The fact that the patient is carried safely past the first 24 hours, the most critical period following a serious burn.
9. Prevention of further breaking down of tissues, resulting from long applications of wet dressings.
10. Prevention of chilling, resulting from the long application of cold, wet dressings.
11. The formation of a thin, flexible coagulum.
12. The speedy healing of the burned areas with a shortened period of hospitalization.
13. The prevention or minimizing of heavy contracting scars by early, rapid healing in the absence of infection.
14. The lessening of the amount of skin grafting and secondary corrective surgery.

The tannic acid and silver nitrate treatment is applied as follows: The patient is given a narcotic which is repeated as often as necessary for comfort. Fluids must be forced throughout. Oil in any form should not be used. If any such application has been used, it must be removed with ether, benzine, or ethyl acetate before treatment is applied. All blebs are opened and all loose skin and other burned tissues are removed. The area is cleaned with sterile water and sterile green soap. A thorough application of fresh five per cent tannic acid solution is made by means of cotton swabs. Following this, ten per cent silver nitrate solution is applied in the same manner. The local treat-



ment being completed, the patient is placed in a tent heated by electric light bulbs and hot water bottles and the burned areas are dried and kept dry, while large quantities of fluids are administered internally. In a few days the coagulum is removed, as early as possible.

Occasionally moisture will be hidden beneath crusts where drying has not been satisfactorily accomplished, and such areas are unhealed. Unhealed areas are treated by the application of oxyquinoline sulphate scarlet red gauze.

The duties of the nurse are equally important with those of the physician. Under this treatment the nurse has two chief duties to perform, namely; dry and keep dry the tanned areas, and force the fluid intake. Of course these are additional to the ordinary nursing procedures.

Under the tannic acid treatment, with no oil applications, albumin and other abnormal elements do not appear in the urine, with the exception of sugar, which may appear in the first specimen.

A Bradford frame is useful in certain cases, where the burn covers an extensive area of the body, and a comfortable position of rest for the patient is difficult to obtain.

The nurse must be mindful of the condition of the patient when healing begins, taking cognizance that flexor surfaces are not allowed to heal in the position of the flexor.

Solutions usually administered in severe burn cases to avoid shock are: Normal saline solution, glucose, Ringer's solution and others as ordered by the doctor. By administering five per cent glucose in the early period, we thereby aid the protection of the liver against the absorption of toxic substances. Large quantities of salt are lost following a burn and this must be replaced. Too much salt, however, added to the blood will produce salt edema, hence extreme care must be taken in this step.

In severe burn cases large quantities of fluid are lost from the circulation, chiefly in three ways: (1) oozing from the surface, (2) the fluid which leaves the circulation and enters the intercellular spaces, forming edema, and (3) that which is lost by perspiration. To these, of course, must be added that which leaves the body through the lungs, the urine, and the bowels, and the vomitus, too, when present.

Shock is manifested when the body fluid reaches a certain low point.

The nurse, who understands the aims and objects desired in the treatment of burns, can do much in furthering the recovery of an otherwise doomed patient. Our purpose has been to help toward that undertaking.

Solutions of tannic acid used should never be more than one hour old, hence they are made up with sterile water when they are actually needed for use. Ten ounces of ten per cent silver nitrate solution, intravenous sets, complete with solutions; plenty of old linen packaged and sterilized for draping the table and bed, should be kept on hand.

In addition to the above-mentioned methods of procedure, the bottom sheets are covered with sterile linen and the patient is kept warm by artificial heat attached to a cradle, which has been placed over the patient. The cradle is large enough to allow the patient to move about if he so desires, and to give the nurse ample working room.

An even temperature is kept by the regulation thermometer placed in the bed for that purpose. The patient is never allowed to perspire as that would prohibit the crust from remaining dry. Usually the patient wears no gown and no dressings are placed over body burns. The patient is turned frequently to keep all areas dry and to give comfort.

If treatment is properly carried out, sepsis is avoided or controlled.

A high caloric diet is usually ordered. The treatment is not difficult nor is it characterized by painful dressings. Shock is minimized at once and recovery results.

The treatment of this case in our hospital fell right in with the progressive era going on at present at our hospital. Here was established our first oxygen treatment, which did its bit, along with tannic acid treatment.

Recently researchers have found that burns may be treated even more successfully by spraying the area with sulfadiazine and using the triple treatment recommended by its discoverers.

Nursing care is a grand piece of work, and that is what our nurses are doing. They are always ready to handle burns as emergencies. We have been taught how to care for burns and our treatments have proven successful.

We are very grateful to our administrator, our staff and instructors for the good material and instructions provided. Therefore, we can truthfully say, "When we do what we are taught, we do it with skill."

—WILLIE F. CAPEL, Class of '42.

A Greater Saint Agnes

Under the administration of Miss Ruth Esther Feider, St. Agnes Hospital has undergone many improvements. The greatest and most influential change has been the change in governmental administration, establishing a Board of Managers, with Mr. Alexander Webb as chairman.

Among the changes and enlargements in the personnel are the addition of a bookkeeper, admitting officer and record librarian, housekeeper and medical social worker.

Improvements in the plant itself include the addition of a pharmacy with a registered pharmacist in charge, a larger emergency room, the installation of a switchboard and the correction of faulty plumbing.

The school of nursing is also progressing along with other phases of the institution. For the first time in the history of St. Agnes, a mid-term class has been accepted, giving rise to an increasing number of graduates per year. The entire staff and student body now work eight-hour shifts, which is a great improvement over the previous shifts.

In this short time much has been accomplished; we feel that, with continuation of such improvements, St. Agnes School of Nursing will become one of the greatest centers of nursing education.

—C. BRYANT, A. CARTER AND S. JEFFERSON.



Saint Agnes Has Its Initial May Queen Contest

For the first time in the history of Saint Agnes School of Nursing, a May Queen Contest was sponsored by the Freshman Class.

Candidates were selected from each of the four classes, namely: Senior Class, Miss Collette Dotson; Junior Class, Miss Christabelle Bragg; Freshman Class, Miss Hortense White; Preliminary Class, Miss Evelyn Delaney.

The candidate with the highest number of votes, Miss Christabelle Bragg, was crowned Queen of the May by the Director of the School of Nursing, Mrs. Rosa Mai Godley.

The contest culminated in a gala affair, the May Queen Ball, where the May Queen, after having received her crown, due honors and congratulations, reigned with Misses Dotson, White and Delaney as attendants.

The Queen and attendants were beautifully attired in lovely formals with corsages presented by our Director of the School, Mrs. Godley.

The contest netted \$56.07, the Senior Class raising \$5, the Junior Class \$21.06, the Freshman Class \$21.01, the Preliminary Class \$9.

The evening's entertainment was carefully planned and enjoyed by all, although next year we are looking forward to a bigger and better May Queen Contest.

—SAMMYE JEFFERSON AND ALTHEA CARTER.

Preparedness

"Prepare"—Prepare for your life's work with a scientific preparation, for the nursing profession needs trained brains.

Nurses have a responsibility that goes beyond that of an ordinary profession. There is a life at stake. In our profession we deal with people who need assistance to overcome some diseases that have overpowered them physically, spiritually and mentally. We, therefore, conscious of our powers, can uphold our profession because of our innate desire to express ourselves to the utmost. This expression of ourselves cannot be had in an instant; it calls for time, growth and training.

On every hand we see people who are working at a tremendous disadvantage, doing the little things playing the little game in life when they are capable of doing bigger things. The reason for this is they have not called out their reserves, and do not know what is possible in them. They are ignorant of their powers.

Many never have prepared for the big things they are capable of doing, so they go through life working in mediocrity, because of the lack of proper training along the line of their chosen work; they are handicapped throughout their career.

What would you think of a jeweler who had a very valuable rough diamond and only ground one facet, leaving practically all of the greatest wealth of the diamond, its most beautiful brilliance, its most marvelous possibilities, shut up inside where no one could see or appreciate or utilize its value? Suppose it were impossible ever to grind more than one facet of this immense diamond. Think of the loss in value.

Let us not grind one facet of our great human diamond, leaving marvelous possibilities, untold wealth hidden within us. Shall we be content with "R.N.'s"? Then reach an age when it will almost be impossible to grind other facets and then cry, "If I had only kept on!"

There is nothing like a splendid preparation for life's work. Never mind the sacrifices.

LET'S GET IT AT ANY COST!

—LUDELE MADDOX, Class of '43.

Miss Saint Agnes

It's gone but not forgotten, for it was a beautiful "Homecoming Day," with Miss Johnsy Terry as "Miss Saint Agnes," attended by her five ladies-in-waiting, Misses Jamie Tillman, Ludelle Maddox, Christabelle Bragg, Hortense White and Hope Clyburn.

"Miss Saint Agnes" and her attendants were decorously perched on a beautifully decorated car, with several of the nurses following in an ambulance just as colorful.

At 1:30 on the afternoon of October 25, 1941, the parade slowly eased its way from St. Augustine's campus up Tarboro Street, which was crowded with spectators.

"Miss St. Augustine" and her attendants demurely dressed in blue and white were one of the outstanding features of the parade.

After winding its way through the streets of the city, the parade reached its destination, Clavis Heights Park, where the homecoming game was to be played between Livingstone and St. Augustine.

At 2:30 came the kick-off after tense moments of waiting for the teams to assemble.

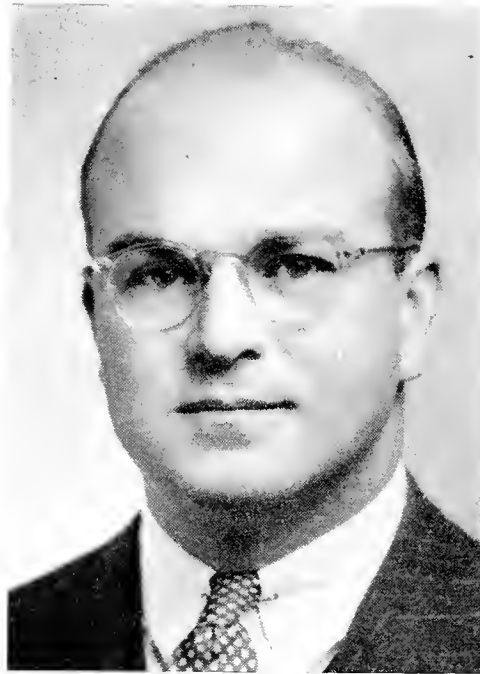
Between halves "Miss Saint Agnes" graciously presented "Miss Saint Augustine" with an exquisite bouquet of yellow chrysanthemums while the crowd loudly applauded.

Dear old Livingstone was beaten by a score of 3-0, after terrific struggling on both sides.

The day was fittingly ended with a dance, enjoyed by all.—CHRISTABELLE BRAGG, Class of '43.



HOMECOMING



Nursing Care of the Severely Burned

A child or adult is burned deeply and widely over the body, greasy ointments are hastily applied to the burns, and the patient is rushed to the hospital. The patient is in extreme pain, but usually shock is not present. After some sedative has been administered the burned surfaces are cleaned of dirt, grease, and the like, and a protection and antiseptic coating applied. Perhaps blood plasma has been obtained, or whole blood, if plasma is not available. This and large amounts of intravenous fluids have been started. Such treatments offset shock as much as possible, give the patient a chance to prevent infection, prevent liver and kidney drainage toxicity. However, the treatment of this patient has just begun. Nursing care for a burned patient is arduous, oft times difficult and disheartening. But the reward of seeing a severely ill patient recover, without disfiguring scars is sufficient for careful, painstaking, and patient care.

Recent advances in fluid and blood plasma values of the well and ill person are most important in the burned patient. This is due to the large amounts of fluids (water, sodium chloride, etc.) which are lost to the circulation, either by actual loss through the burned site, dehydration, or bleeding into the tissues. Blood plasma leaks into the tissues from the circulation; there is a marked increase in the cellular elements of the blood which gives a high hemoglobin and red cell count. Coincidentally there is a slowing of the circulation and a decreased kidney function which forebodes a serious upset of bodily functions.

It is thus seen that excellent care of such a patient is imperative. The doctor administers the intravenous fluids but the nurse must see that the patient takes large amounts of fluids by mouth. These patients are so ill that merely placing a container of orange juice, water, or the like within reach is of no value. They must be coaxed to drink and drink freely. If large enough amounts are taken by the means of drinking, then only small amounts need be given by infusion.

Even the smallest amounts must be recorded carefully, for such patients are judged on the amount of fluid intake over a period of 12 to 24 hours. The urinary output must be recorded and totaled. Again the progress is dependent upon the reading.

The many complications of pneumonia, phlebitis, etc., are to the greatest part avoided by excellent nursing care. The good nurse changes the position of the patient frequently, making the patient more comfortable and preventing complications from stasis or gravity.

If the patient survives the first critical period, it is then the nurse's job to remove the eschar which has been applied. Hurried, careless applications of the simple procedure of applying wet compresses ends in infection from too long a period before removing this protective coating.

In the last analysis the nurse works with the doctor as a team. It is the nurse that prevents further trouble, foresees complications by acute observation, and by sympathetic care leads the patient through a trying time to health.

—ALEXANDER WEBB, JR., M.D.

Tuberculosis: Prevention, Control, Nursing Care

Tuberculosis having been the most destructive disease in the history of man and being responsible for about one twentieth of all deaths, is a disease of ancient origin.

History of this disease dates back to the decades of early Egyptians as revealed in the study of tuberculous bones and remnants of old tuberculous adhesions in the chests of Egyptian mummies.

Others who contributed to the early discovery, cause and treatment of the disease are: Hippocrates, Galen, Sylvius de la Boe of Holland, Laennec of Paris, Willemin of France, Robert Koch of Germany, James Carson of Liverpool and Carlo Forlanini of Italy.

The modern treatment of tuberculosis dates from the early sanatoria of Brehmer (1839) and Dettweiler (1870), both of Germany, and Trudeau (1884) of America.

With the discovery of the stethoscope, X-ray, fluoroscope and various methods of collapse therapy, enormous strides have been made toward the prevention of this destructive disease.

Tuberculosis is caused by the multiplication of a micro-organism known as the tubercle bacillus within the body. This germ was first demonstrated by Robert Koch in 1882. The tubercle bacillus belongs to a group of bacteria called acid-fast. They contain a waxy and fatty substance which makes it difficult for stains in watery solution to penetrate them. These organisms are called acid-fast because, after being dyed, they are difficult to discolor. The type which most frequently affects man is known as the human type tubercle bacillus, but the disease may also be transferred to man by the bovine type bacillus which is prevalent in cows.

The common method of infection is by transmission of the tubercle bacilli from the infected to the uninfected people, usually by air-borne particles that originate from the sputum. The site most frequently attacked being the lung tissue which has less resistance to the growth of tubercle bacilli than any of the other organs of the animal body. However, their growth may be carried to other organs of the body through the blood stream.

The diagnosis has become a great responsibility of the physician and nurse. The nurses are to find the cases and report them, determine the patient's financial status, suggest examination, make arrangements for examinations and further treatment, if necessary, and to be efficient in assisting the physician.

The physician's responsibility is to make an accurate diagnosis of the condition of the patient's lungs.

The diagnosis is made possible by correct history of the patient, physical examination of the patient, including: Careful inspection, palpation, percussion and auscultation of the chest, by the use of stethoscope, nose and throat examination, X-ray, sputum examination and other laboratory tests. After the cause of the patient's illness has been determined the extent of the disease in the lung should be estimated.

The types of lesions formed by the tubercle bacillus are classified as: (1) Minimal, which is a slight lesion confined to a small part of one or both lungs, (2) Moderately advanced, which may involve one or both lungs, with slight lesions, which may extend through not more than the volume of one lung or the equivalent of this in both lungs. The lesion may be dense and confluent and may extend through not more than one third the volume of the lung, (3) Far advanced, lesion more extensive than moderately advanced.

The symptoms of tuberculosis may be as follows: (1) None, (2) Slight, (3) Moderate, (4) Severe. These symptoms may be present with any lesion.

In the treatment of tuberculosis the physician must rely upon the appearance of the X-ray, laboratory reports, age, sex, race, economic status and disposition of the patient, also the presence of other complications.

The treatment varies in accordance with the type of lesion present to include strict bed rest, good food and fresh air in most cases, also collapse therapy, which includes:

Pneumothorax, lateral or bilateral, which is the introduction of air into the pleural cavity; the object being to collapse the lung in order to prevent movement of the diseased lung.

Pneumonolysis, which is an operation severing of lung adhesions, indicated when collapse of the diseased portion of the lung is prevented by adhesions.

Thoracoplasty, a major operation sometimes indicated for patients with chronic disease of unilateral character and the pleura is adhered, preventing successful pneumothorax. The operation consists of removal of portions of the ribs on the affected side, usually three, reducing the size of the thorax. This operation is performed in three stages.

Phrenic operation, which involves severing, crushing and removal of the phrenic nerve. The object being to paralyze the diaphragm thus limiting the movement of the lung.

Case finding which is any of the prophylactic measures of tuberculosis is made possible by the nationwide campaign in its effort to prevent and eliminate the disease. The survey method of case finding is most frequently used. This method consists of X-ray and examination of patients with symptoms and of associates of patients with known tuberculosis.

The groups used in survey plans are: students of high schools, colleges and institutions, nurses and medical students.

Tuberculosis among nurses presents a serious problem. To meet and solve this problem a proper understanding at the beginning of the student's career, and immediate prophylactic examinations are necessary. Regular examinations of students should be made on entrance to the school. Check-up X-rays should be made every three months. All patients should be fluoroscoped and a tuberculin test made before being admitted to the hospital. Adequate equipment and good nursing technique should be a part of each hospital receiving tuberculous patients. All nurses should have periodic chest examinations in order to decrease the prevalence of the disease among nurses who are exposed to these organisms.

The results of the treatment of tuberculosis depends upon the type of nursing care the patient receives as well as his condition. The nursing care is directed toward the comfort of the patient:

this should be the first object of the nurse. This care includes careful bedmaking, serving of meals on time, careful planning of meals so that they will contain nourishing food plus the vitamins and minerals necessary to promote the healing of the lesion, stressing the importance of rest, checking the temperature, pulse and respiration, weight, observing hemoptysis and other symptoms, providing suitable ventilation, restricting visitors, and to assisting in the prevention of contagion by destroying sputum and other discharges from the patient, careful isolation and gown technique, concurrent disinfection of contaminated areas, hand washing and careful disinfection of articles coming in direct contact with patients such as furniture, trays, dishes, books, magazines and linen.

With the establishment of the tuberculosis dispensary or clinic in every city and rural section a greater chance for the prevention of the disease is possible. Therefore, as nurses let us help by assisting in finding these cases and reporting them, obtaining the cooperation of the patient, finding some means of medical attention for the patient and by assisting the patient to understand his disease. Help the doctors by becoming efficient in assisting with treatments and in rehabilitation of the patient so that he may return to his community prepared to resume his responsibilities.

—MYRTLE ROBERTS, Class of '43.

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It Is Not Always Easy To:

Apologize	Stand on your own
Begin again	Make the best of a situation
Admit error	Look on the bright side of life
Be unselfish	Speak the truth
Take advice	Be broadminded
Be charitable	Be flexible
Be considerate	Be fair
Keep trying	Think
Obey	Speak at the right time
Correct mistakes	Control our temper
Forgive and forget	<i>But it always pays!</i>

—N. WILSON, Class of '43.

Repentance and Redemption

I do not ask silver or gold,
All that I ask is: "Bless my soul";
Lord, make me what you'd have me be,
So that I, too, Thy face might see.

I come, O Lord, ere my life is spent,
On bended knee I now repent:
Lord, bless me, help me, Thy word spread:
Of the wrath of man I have no dread.

Strengthen me, Lord; heal Thou my heart,
It's all for Thee, not just a part;
Help me that I might help another,
And be to him a loving brother.

I've done some evil and some good,
On the very brink of hell I've stood;
I've laughed at Christians as they passed by,
But now, O God, for Thee I'd die.

I've been a sinner, Lord, 'tis true,
But now I turn, I come to You;
I see you, Lord; you've heard my voice,
To do Your will, Lord, is my choice.

I'm going now to spread the news,
On my feet now are holy shoes;
I plead to sinners, they pass me by,
I can but stand alone and cry:

"The Lord Jehovah cares for me,"
Then one man stops, he shares my glee;
Thou hast forsaken us it seemed,
But now, O God, we're both redeemed.

—ALTHEA CARTER, '44.

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