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 wing the Kitimat River in a  
 direction to the summit between  
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 tion along the valley of the  
 Skeena River, at or near  
 ce crossing the Skeena River  
 of a high level bridge and over  
 arances, thence north-easterly  
 th of the Kitsumkaen River  
 ur its co., so to the summit of  
 F., and thence, following the  
 the Nass River, at or near  
 distance of approximately one  
 d twelve miles; (b) from the  
 the Blackwater River, with  
 ver, following the course of  
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**ARMY NURSES SKILLFUL, BUT TOO HURRIED FOR SENTIMENT**

CONVALESCENTS SING AND ENJOY THEMSELVES IN A NOISY WARD—PHONOGRAPHS AND MUSIC PROVIDED SICK SOLDIERS.

Paris, France, Jan. 19.—Why and how I became sufficiently ill, and why I was sent, by proper authority, to a British military hospital of the Royal Army Medical Corps are points that I may not yet explain; and, besides, they have little to do with the story. Let it suffice that I came down from the north in a Red Cross motor with a fever that dulled my senses, and, without my asking, found myself the next day lying in a three-bed ward in one of the best known military hospitals in Paris. There I remained twenty-three days, and in describing the hospital staff and its work, I appear biased—well, then, I admit it. And I think every soldier feels as I feel.

The beginning is hazy in my memory—of being half carried up a flight of marble stairs, of pulling off the few clothes I wore before the nurse in charge could find an orderly to undress me and tumbling into the hastily prepared bed. After that, days and nights punctuated by—but that is the story.

**Pretty Illusion Vanishes.**  
 I remember first of all the departure of a pretty hallucination about military hospitals and trained nurses—"sisters," as they are called. I was just sick enough to long for this immaculate nurse, performing every duty with perfection, and placing her cold hand on my hot forehead.

As I became more lucid I learned that in British military hospitals, the sisters' hand touch the men only to change a dressing, or to wash them, or perhaps to rub on some alcohol and to feel the pulse. This last duty is performed in such an impersonal manner that it is just barely one finger on the patient's wrist.

Where are the scenes of a nurse reading to a convalescent wounded, of a gentle hand on a fevered brow, of the hand-to-hand clasp of encouragement or sympathy? I can say quite definitely that these things do not exist except on picture post-cards and the cinematograph.

**Too Busy for Sentiment.**  
 British nursing sisters, in their always immaculate aprons of white, their stiff, white cuffs and collars, their dresses of dark blue or blue and white stripes, according to their ranks, are, first of all, busy. After that they are cheerful, but if they are sentimental they do not let it be known.

The sisters in this hospital were marvelously skillful. I should say much more so than American trained nurses. They are serious, in the broad French sense of "seriesuses," if for no other reason than that they are not permitted to be trained nurses until they are old enough—24 years—to know why they wish to be.

**Do Better Than Surgeons.**  
 I have seen military dressers—surgeon-students, they are—dress a wound, and next day a sister do it, and that she did it 50 per cent better was shown by the patient's improvement. To see two sisters change the sheets on a bed occupied by a man who cannot be moved an inch, at the same time raising his spirits by their subdued gaiety, is enough alone to arouse one's enthusiasm.

So with the original idea gone and a new one in its place, which I soon began to like better, my days came and went. Every four hours my only diversion—a sister with medicine, thermometer, sometimes with milk and soda water.

The day they brought me there were in the room several soldiers in various kinds of pyjamas or parts of uniforms with bandaged arms and heads. One of them, who shared the ward with me—one bed being empty—was a most mournful creature. He had never gotten to the front,

On the way to the defence of Paris last September his horse had stepped on his hand and now the arm was affected and the crushed hand worse than useless.

**Hopeless, but Proud of Wound.**  
 He had been in the hospital about two months, and had begun to lose hope, but he took a profound interest in the x-ray negatives of his hand and proudly showed them to the other wounded who called from time to time.

I didn't enjoy him, nor the convalescents singing and laughing in the adjoining ward, nor the noise of a phonograph with its insistent repetitions of "It's a Long Way to Tipperary," to say nothing of the twice-a-day clatter of pans in the scullery nearby. Consequently I was most disagreeable, my nurse told me afterward.

The sister, always so thoughtful, whom I had come to recognize as the one who looked after me by day, asked me one morning, while washing my face and hands: "How would you like a room by yourself?" That suited me well, and it was not long afterward that three orderlies came in with a stretcher. With surprising facility they slipped their arms under me, raised me flat on my back and lowered me without a jar to the stretcher on the floor.

**Stretcher Riding is Pleasant.**  
 I had an opportunity during two or three minutes' journey to consider stretcher riding, I was surprised to feel the smoothness and ease of it. The only slight discomfort was caused by my head being perhaps an inch too near the after bearer and occasionally it touched his thigh. But I am longer than most soldiers.

The quiet of the new room, the "baths" in bed, and alcoholic rubs night and morning had their effect, and after ten days' stay there came one day with afternoon tea a piece of bread! And there my illness began to end, and the rest of the time I passed talking to wounded and making observations.

A day or two later a night sister, coming in with the 10 o'clock thermometer and medicine, was radiant.

"There are 250 wounded coming tonight!" was her subdued exclamation.

For her it was a delightful expectation. Nurses and orderlies who had been on duty all day came into my room with beds and equipment. They made preparations until midnight, when the wounded began to arrive.

**Wounded Come In From Ypres.**  
 Two soldiers who thirty-six hours before had been in trenches south of Ypres were brought into my room on stretchers, and lifted with systematic care to beds of fresh, white sheets and blankets. Then the quickly moving fingers of the sisters cut off breeches from the shrapnel-grilled knees of one. He was a non-commissioned officer, who had been thirty hours in a hospital train, a train that had first been sent to Boulogne, where the hospitals were full with 10,000 or 12,000 wounded, and then to Paris.

Happy, busy sisters, who had been on duty since 9 and 10 o'clock in the morning, worked until 2 and 3 a. m. From fourteen the number was increased to fifty-eight, while several floors of this once very fashionable hotel that not been used before were opened as wards. The wounded lying in my room, or ward, were far from comfortable; but they were glad of those beds, with big box springs and thick mattresses.

**Work Makes Nurses Happy.**  
 The happiest people in the hospital were the nurses. "There are sure to be a lot of interesting cases," one of them had told me before the wounded arrived.

That is their attitude first; then

it is to give the best possible care. When wounded become convalescent the sisters' interest and attention wane. The untrained French assistants then assume some of the English sisters' duties.

Several days later, when I was out of bed, I went frequently around the wards to see the wounded. Strangely enough, the inevitable question, "Where are you wounded?" never seems to bore anyone.

Evidence of the skill of the surgeons was found everywhere. Here was a soldier who had three bullet holes through his chest to the back, who was kept day and night in a sitting position. In two years, the doctor told me, he might be well again.

**Few Amputations Necessary.**  
 Amputation was rare. There was only one man among the fifty-eight who had lost a limb—his right arm—and he did not seem to regret it very much.

Those who were able to walk strolled about the corridors and the wards, joking and exchanging reminiscences in the strange language of the trenches. They were dressed, for the most part, in heavy French pyjamas or bath-robots.

The day after the "fresh lot of wounded"—to quote a sister—arrived was a busy one in the four operating theatres, and the hysterical shrieks and laughter that sounded frequently down the corridors were evidence that some did not bear the chloroform easily.

**Cooking by Leading Paris Chefs.**  
 Food! Misery was forgotten when, the day after their arrival, the wounded from the front saw their luncheon plates. Quite different from trench fare were the good things prepared by one of the best chefs in Paris. And along with it, for most of them, was beer or wine. After luncheon one of the French assistants brought around cigarettes. The wounded always had plenty to smoke.

When I was out of bed at last I ate with a "Tommy" in our room from a mahogany table covered with a piece of oilcloth. When the sister brought us tea, bread and butter and jam at 4:30 o'clock the oilcloth-covered table was lighted by an amber-shaded lamp that had once served at the bedside of a hotel guest paying \$3 or \$4 a day for a room in the ultra-modern Paris hostelry.—E. Percy Noel, in Toronto Star.

A man has reason, but a woman has reasons.

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