

we sent out the first issue of our quarterly newsletter, the Circulator. Though I must admit there are times when I wish no one had ever thought of it, we have found it an excellent means for the dissemination of information and ideas. I hope that you on the receiving end have also found it helpful.

One of our most valuable tools in training our nurses is the Manual of Procedures. Dr. Hamlin and I rewrote the Manual last year bringing it up to date again. I am sure you will be interested in knowing that we have had many requests for copies of the Manual from outside sources even from outside the United States. We have also received many flattering comments about it from which we gather it is generally considered as one of the best in the field of industrial medicine.

Most of you saw the article regarding our Manual in the American Association of Industrial Nurses' Newsletter of September 1952. It was most complimentary and is indicative of AAIN's recognition of our nursing program. The recognition has been mutual. Brake Shoe has lent its support to AAIN almost from the beginning as the only nursing organization directed by and entirely devoted to industrial nurses and their problems. Mr. Dunn has served on the AAIN Management Advisory Council for several years and, as you know, I am at present a member of the Board of Directors.

Some of this job of building the structure on the framework we were given has not been easy. We have had to sell our program and our ideas to management and to the employees. Sometimes it has been difficult because some people just don't like nurses, some don't like women where they work, some don't like changes from "the old way". At times, it has been rather discouraging. For years, our plants had operated without nurses and they saw no reason why they should not continue the same way. Medical records, such as they were, were kept in the personnel files. Even though it would relieve them of quite a bit of work, there were some office managers and personnel directors who did not want to change the routine. In one or two instances in my own experience, it has taken several visits to the plant and a lot of persuasion and education to get the routine changed.

There have been instances where plant management has burdened the nurse with non-nursing clerical work or has told her when an injury should or should not receive medical care. It has again taken persuasion and often unlimited patience to straighten matters out.

Our troubles have not always been with management, of course. We have had our troubles with nurses, too. One nurse took all injuries even quite minor ones and redressings to the doctor. We certainly could not blame her management for objecting.

In one plant where we had trouble separating the medical files from the personnel files, we found that the nurse did not know what the term "confidential" really meant. The right nurse in that plant soon won management over.

We have had nurses who were dictatorial or who refused to follow suggestions made either by management or the Medical Department.