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GOEWERMENSKENNISGEWING.

DEPARTEMENT VAN GESONDHEID.

No. R. 966.] [1 Julie 1960.
DIE SUID-AFRIKAANSE VERPLEEGSTERSRAAD.

REGULASIES VIR DIE OPLEIDING EN EKSAMINEER VAN VROEDVROUWE.

Die Minister van Gesondheid het, in uitoefening van die bevoegdheid hom verleen by subartikel (1) van artikel *elf* van die Wet op Verpleging, 1957 (Wet No. 69 van 1957), sy goedkeuring geheg aan die volgende regulasies vir die opleiding en eksamener van vroedvrouwe, wat deur die Suid-Afrikaanse Verpleegstersraad gemaak is ter vervanging van die regulasies uitgevaardig by Goewermentskennisgewing No. 676 van 8 April 1949, soos gewysig by Kennisgewings Nos. 533 van 10 Maart 1950, 1925 van 11 Augustus 1950, 93 van 12 Januarie 1951, 1950 van 27 Julie 1951, 802 van 10 April 1952 en 164 van 23 Januarie 1953:—

OPLEIDINGSKOLE.

1. (1) Geen hospitaal word as 'n opleidingskool goedgekeur nie, tensy dit voldoen aan die vereistes aangedui in Bylae A.

(2) (a) 'n Goedgekeurde opleidingskool wat kan voldoen aan die vereistes in Bylae C aangedui, kan aansoek doen om goedkeuring om leerlingvroedvrouwe gedurende die opleidingskursus onderrig te gee in die toediening van stikstofsuboksied- en lug-pynstilling. Die opleidingstydperk van leerlinge by opleidingskole wat ingevolge hierdie paragraaf goedgekeur is, word met veertien (14) dae verleng.

(b) 'n Bekwaamheidsertifikaat vir die toediening van stikstofsuboksied- en lug-pynstilling wat deur 'n goedgekeurde opleidingskool ooreenkomsdig subparagraaf (2) van paragraaf 5 van Bylae C uitgereik is, word as 'n addisionele kwalifikasie geregistreer; met dien verstande dat die besitter daarvan voldoen aan die voorgeskrewe vereistes vir die registrasie van 'n addisionele kwalifikasie.

(Die aandag word gevvestig op regulasie 6 van die regulasies betreffende die voorwaardes waaronder geregistreerde vroedvrouwe hulle beroep mag uitoefen, afgekondig by Goewermentskennisgewing No. 2297 van 29 Oktober 1948, soos gewysig.)

TOELATING TOT OPLEIDING.

2. 'n Kandidaat vir toelating tot opleiding moet die volgende aan die persoon in beheer van die opleidingskool voorlê:—

(1) (a) 'n Sertifikaat dat sy minstens standerd tien van 'n onderwysdepartement in die Unie of Suidwes-Afrika, of van die Universiteit van Suid-Afrika met goeie gevolg afgelê het; met dien verstande dat die persoon in beheer van 'n opleidingskool na haar goedgunke, 'n kandidaat wat nie in besit van so 'n sertifikaat is nie, kan toelaat; of

GOVERNMENT NOTICE.

DEPARTMENT OF HEALTH.

No. R. 966.] [1 July 1960.
THE SOUTH AFRICAN NURSING COUNCIL.

REGULATIONS FOR THE TRAINING AND EXAMINATION OF MIDWIVES.

The Minister of Health, in exercise of the powers conferred on him by sub-section (1) of section *eleven* of the Nursing Act, 1957 (Act No. 69 of 1957), has approved of the following regulations for the training and examination of midwives, made by the South African Nursing Council in substitution for the regulations published under Government Notice No. 676 of the 8th April, 1949, as amended by Notices Nos. 533 of the 10th March, 1950, 1925 of the 11th August, 1950, 93 of the 12th January, 1951, 1950 of the 27th July, 1951, 802 of the 10th April, 1952, and 164 of the 23rd January, 1953:—

TRAINING SCHOOLS.

1. (1) No hospital shall be approved of as a training school unless it conforms with the requirements specified in Annexure A.

(2) (a) An approved training school, which can conform with the requirements specified in Annexure C, may apply for approval to instruct student midwives during the course of training in the administration of nitrous oxide and air analgesia. The period of training of students at training schools approved of under this paragraph shall be extended by fourteen (14) days.

(b) A certificate of proficiency in the administration of nitrous oxide and air analgesia issued by an approved training school in terms of sub-paragraph (2) of paragraph 5 of Annexure C shall be registered as an additional qualification; provided the holder thereof complies with the prescribed requirements for the registration of an additional qualification.

(Attention is directed to regulation 6 of the regulations regarding the conditions under which registered midwives may carry on their calling, published under Government Notice No. 2297 of the 29th October, 1948, as amended.)

ADMISSION TO TRAINING.

2. A candidate for admission to training shall submit to the person in charge of the training school—

(1) (a) a certificate of having satisfactorily completed at least the tenth standard of an education department in the Union or South West Africa, or of the University of South Africa; provided that the person in charge of a training school may, at her discretion, admit a candidate who does not hold such a certificate; or

(b) bewys van registrasie by die Raad as 'n algemene verpleegster of as 'n psigiatriese verpleegster; met dien verstande dat 'n kandidaat wat nie as 'n algemene verpleegster of as 'n psigiatriese verpleegster geregistreer kan word nie slegs omdat sy onder een-en-twintig (21) jaar oud is, vir doeleinnes van hierdie regulasie, as aldus geregistreerd beskou sal word.

(2) bewys dat sy minstens negentien (19) jaar oud is.

[LET WEL.—Die aandag word gevvestig op—

(i) Goewermentskennisgewing No. 1129 van 8 Augustus 1958, ingevolge waarvan 'n leerling binne ses (6) weke na die datum van aanvang of hervatting van opleiding by 'n opleidingskool by die Raad 'n aansoek om registrasie moet indien, en ingevolge waarvan die Raad onmiddellik deur die persoon in beheer van 'n opleidingskool in kennis gestel moet word indien 'n leerling se opleiding om enige rede hoegenaamd by die opleidingskool gestaak is, met inbegrip van 'n oorplasing na 'n ander opleidingskool en of onder behoorlike autoriteit, aldan nie; en

(ii) Goewermentskennisgewing No. 1128 van 8 Augustus 1958 ingevolge waarvan geen persoon onder die ouderdom van een-en-twintig (21) jaar as 'n vroedvrou geregistreer mag word nie.]

OPLEIDINGSTYDPERK.

3. (1) Onderhewig aan die bepalings van paragrawe (2), (3), (4) en (5) is die opleiding ononderbroke.

(2) Behoudens waar anders bepaal, is die opleidingstydperk twee (2) jaar; met dien verstande dat die opleidingstydperk van alle leerlinge by opleidingskole waaraan goedkeuring verleen is om leerlinge gedurende die opleidingskursus onderrig te gee in die toediening van stikstofsuboksied- en lug-pynstilling, met 'n tydperk van veertien (14) dae verleng word. Die verlof wat ingevolge paragraaf (3) toegestaan kan word, en die siekterverlof (nie oortollige siekterverlof nie) wat ingevolge paragraaf (4) toegestaan kan word, word by die opleidingstydperk ingesluit.

(3) Aan 'n leerling mag gedurende elke volledige jaar van opleiding nie meer nie as dertig (30) dae afwesighedsverlof toegestaan word; met dien verstande dat aan 'n leerling na wie in paragraaf (3) van regulasie 4 verwys word, nie meer nie as sewe-en-dertig (37) dae afwesighedsverlof gedurende die opleidingstydperk van vyftien (15) maande toegestaan mag word.

(4) Aan 'n leerling mag siekterverlof van nie meer as veertien (14) dae nie, allesinsluitende, gedurende die voorgeskrewe opleidingstydperk toegestaan word. Siekterverlof wat veertien (14) dae te bove gaan, kan toegestaan word, maar sodanige siekterverlof moet ingewerk word sodat die voorgeskrewe opleidingstydperk voltooi word; met dien verstande dat, indien die siekterverlof wat toegestaan is negentig (90) dae, allesinsluitende, te bove gaan, die leerling, benewens die voorgeskrewe opleidingstydperk, 'n verlenging van opleiding gelyk aan die helfte van die siekterverlof wat allesinsluitende toegestaan is, moet deurloop, tensy die Raad anders bepaal.

(5) (a) Geen erkenning word aan opleiding verleent indien 'n onderbreking in die opleiding voor voltooiing van minstens ses (6) maande van die voorgeskrewe opleidingstydperk voorkom nie, tensy die Raad anders bepaal.

(b) Geen erkenning word aan vorige opleiding verleent nie indien daar meer as een onderbreking in die opleiding is, tensy die Raad anders bepaal.

(c) Die duur van enige onderbreking in die opleiding moet ingewerk word sodat die voorgeskrewe opleidingstydperk voltooi word. Indien 'n onderbreking 'n tydperk van negentig (90) dae te bove gaan, moet die leerling, benewens die voorgeskrewe opleidingstydperk, 'n verlenging van opleiding gelyk aan die helfte van die duur van sodanige onderbreking deurloop, tensy die Raad anders bepaal.

(b) proof of registration with the Council as a general nurse or as a psychiatric nurse; provided that a candidate who is debarred from registration as a general nurse or as a psychiatric nurse only because she is under twenty-one (21) years of age shall, for the purpose of this regulation, be deemed to be so registered;

(2) proof that she is at least nineteen (19) years of age.

[NOTE.—Attention is directed to—

- (i) Government Notice No. 1129 of the 8th August, 1958, in terms of which a student shall lodge an application for registration with the Council within six (6) weeks of the date of commencement or resumption of training at a training school and in terms of which the Council shall be notified forthwith by the person in charge of a training school if a student's training at the training school is terminated for any reason whatsoever, including a transfer to another training school and whether under proper authority or not; and
- (ii) Government Notice No. 1128 of the 8th August, 1958, in terms of which no person under the age of twenty-one (21) years may be registered as a midwife.]

PERIOD OF TRAINING.

3. (1) Subject to the provisions of paragraphs (2), (3), (4) and (5) training shall be continuous.

(2) Except as may be otherwise provided, the period of training shall be two (2) years; provided that the period of training of all students at training schools which have been granted approval to instruct students during the course of training in the administration of nitrous oxide and air analgesia, shall be extended by a period of fourteen (14) days. The leave which may be granted in terms of paragraph (3) and the sick leave (not excess sick leave) which may be granted in terms of paragraph (4) are included in the period of training.

(3) A student may be granted not more than thirty (30) days leave of absence in each complete year of training; provided that a student referred to in paragraph (3) of regulation 4 may be granted not more than thirty-seven (37) days' leave of absence in the period of training of fifteen (15) months.

(4) A student may be granted sick leave not exceeding fourteen (14) days in all during the prescribed period of training. Sick leave in excess of fourteen (14) days may be granted but such sick leave shall be made up so that the prescribed period of training is completed; provided that if the sick leave granted exceeds ninety (90) days in all the student shall, in addition to the prescribed period of training, undergo an extension of training equal to one-half of the sick leave granted in all, unless the Council determines otherwise.

(5) (a) No recognition of training shall be granted if a break in training occurs before the completion of at least six (6) months of the prescribed period of training, unless the Council determines otherwise.

(b) No recognition of previous training shall be granted if there is more than one break in training, unless the Council determines otherwise.

(c) The period of any break in training shall be made up so that the prescribed period of training is completed. If a break exceeds a period of ninety (90) days, the student shall, in addition to the prescribed period of training, undergo an extension of training equal to one-half of the period of such break, unless the Council determines otherwise.

(d) Vir doeleindes van hierdie regulasie sluit die uitdrukking „onderbreking in opleiding“ die volgende in—

- (i) enige afwesigheid van opleiding af wat nie in hierdie regulasie gemagtig is nie. So 'n afwesigheid, en die redes daarvoor, moet onmiddellik deur die persoon in beheer van die opleidingskool by die Raad rapporteer word;
- (ii) 'n oorplasing van een opleidingskool na 'n ander, uitgesonderd 'n oorplasing onder behoorlike outoriteit van een opleidingskool na 'n ander onder beheer van dieselfde ouwerheid;

[LET WEL.—Die aandag word gevëstig op Goewerments-kennisgewing No. 1129 van 8 Augustus 1958 wat van die persoon in beheer van 'n opleidingskool vereis om die raad onmiddellik in kennis te stel indien 'n leerling se opleiding by die opleidingskool om enige rede hoe-genaamd gestaak word, met inbegrip van 'n oorplasing na 'n ander opleidingskool, en of onder behoorlike outoriteit aldan nie, en wat van 'n leerling vereis om binne ses (6) weke na die datum van hervatting van opleiding 'n aansoek om registrasie by die Raad in te dien.]

(6) Indien die tydperke siekterverlof wat aan 'n leerling toegestaan is, saam met die duur van 'n onderbreking in die opleiding, 'n tydperk van negentig (90) dae, alles-inluitende, te bowe gaan, moet die leerling, benewens die voorgeskrewe opleidingstydperk, 'n verlenging van opleiding gelykstaande aan die helfte van sodanige tydperk deurloop, tensy die Raad anders bepaal.

(7) Saam met die kennisgewing van voltooiing van opleiding waarna in Goewermentskennisgewing No. 1129 van 8 Augustus 1958 verwys word, moet die persoon in beheer van die opleidingskool by die Raad 'n lys gevalle wat persoonlik deur die leerling verlos is, asook 'n lys van inwendige ondersoeke wat deur haar uitgevoer is, indien.

VRYSTELLINGS VAN OPLEIDING EN EKSAMENS.

4. (1) Leerlinge na wie in hierdie regulasie verwys word—

- (a) moet aan die bepalings van regulasie twee voldoen;
- (b) kry nie ingevolge meer as een van die hieropvolgende paragrawe vrystelling nie; en
- (c) moet die registrasie wat in elke geval van toepassing is, dwarsdeur die voorgeskrewe opleidingstydperk en totdat die uitslae van die betrokke eindeksamen gepubliseer is, handhaaf, by gebreke waarvan die toegestane vrystellings teruggetrek sal word.

(2) 'n Leerling wat op die datum van aanvangs van opleiding 'n geregistreerde algemene verpleegster is, word—

- (a) van een (1) jaar van die voorgeskrewe opleidingstydperk vrygestel; en
- (b) van die voorlopige eksamen vrygestel.

(3) 'n Leerling wat op die datum van aanvangs van opleiding 'n geregistreerde psigiatrisee verpleegster is, word—

- (a) van nege (9) maande van die voorgeskrewe opleidingstydperk vrygestel; en
- (b) van die voorlopige eksamen vrygestel.

(4) 'n Leerling wat die raad se voorlopige eksamen vir algemene verpleegsters en vir psigiatrisee verpleegsters met goeie gevolg afgelê het, word van die voorlopige eksamen vrygestel, maar sy moet voldoen aan die vereistes van die leerplan voorgeskryf in Bylae B, en moet die voorgeskrewe opleidingstydperk van twee (2) jaar deurloop.

(5) Die Raad kan sodanige ander vrystellings verleen as wat hy geskik mag ag.

LESINGS EN DEMONSTRASIES.

5. Behoudens waar anders bepaal, moet elke leerling 'n volledige kursus voorlesings en demonstrasies bywoon oor die onderwerpe voorgeskryf in die leerplan in Bylae B. Alle dosente en demonstrateurs moet in besit wees van kwalifikasies deur die Raad goedgekeur; met dien verstande dat daar oor die onderwerpe in paragrawe (10) tot (37) van Bylae B voorgeskryf, minstens twintig (20) lesings deur geneeshere, verkieslik spesialiste, en minstens vyftig (50) lesings en twintig (20) demonstrasies deur

(d) For the purposes of this regulation the expression "break in training" shall include—

- (i) any absence from training which is not authorised in this regulation. Any such absence, and the reasons for it, shall be reported to the Council forthwith by the person in charge of the training school;
- (ii) a transfer from one training school to another, excluding a transfer by proper authority from one training school to another under the control of the same authority.

[NOTE.—Attention is directed to Government Notice No. 1129 of the 8th August, 1958, which requires the person in charge of a training school to notify the Council forthwith if a student's training at the training school is terminated for any reason whatsoever, including a transfer to another training school and whether under proper authority or not, and which requires a student to lodge an application for registration with the Council within six (6) weeks of the date of resumption of training.]

(6) If the periods of sick leave granted to a student, together with the period of a break in training, exceed a period of ninety (90) days in all, the student shall in addition to the prescribed period of training, undergo an extension of training equal to one half of such period, unless the Council determines otherwise.

(7) Simultaneously with the notice of completion of training referred to in Government Notice No. 1129 of the 8th August, 1958, the person in charge of the training school shall submit to the Council a list of cases delivered by the student personally, as well as a list of internal examinations carried out by her.

EXEMPTIONS FROM TRAINING AND EXAMINATIONS.

4. (1) Students referred to in this regulation—

- (a) shall comply with the provisions of regulation 2;
- (b) shall not be granted exemptions under more than one of the succeeding paragraphs; and
- (c) shall maintain the registration applicable in each case throughout the prescribed period of training and until the results of the final examination concerned are published, failing which the exemptions granted shall be withdrawn.

(2) A student who is a registered general nurse on the date of commencement of training is exempted—

- (a) from one (1) year of the prescribed period of training; and
- (b) from the preliminary examination.

(3) A student who is a registered psychiatric nurse on the date of commencement of training is exempted—

- (a) from nine (9) months of the prescribed period of training; and
- (b) from the preliminary examination.

(4) A student who has passed in the Council's preliminary examination for general nurses and psychiatric nurses is exempted from the preliminary examination but she shall comply with the syllabus prescribed in Annexure B and she shall undergo the prescribed period of training of two (2) years.

(5) The Council may grant such other exemptions as it may deem fit.

LECTURES AND DEMONSTRATIONS.

5. Except as may be otherwise prescribed, every student shall attend a complete course of lectures and demonstrations in the subjects prescribed in the syllabus in Annexure B. All lectures and demonstrators shall hold qualifications approved of by the Council; provided that in the subjects prescribed in paragraphs (10) to (37) of Annexure B at least twenty (20) lectures shall be given by medical practitioners, preferably specialists, and at

geregistreerde vroedvroue gegee word. Hierbenewens, moet kliniese onderrig dwarsdeur die voorgeskrewe opleidingstydperk deur geneeshere en geregistreerde vroedvroue gegee word.

PRAKTISE OPLEIDING.

6. (1) Behoudens waar anders bepaal, moet elke leerling gedurende haar opleidingskursus onderrig ontvang in al die verplegings- en verloskundige procedures voorgeskryf in die leerplanne in Bylae B en dit uitvoer.

(2) Elke leerling—

- (a) moet vir minstens twintig (20) dae, allesinsluitende, opleiding in 'n voorgeboortedepartement of -kliniek ontvang. Die leerling moet swanger vroue aan huis besoek, en moet minstens dertig (30) swanger vroue ondersoek en leer hoe om toesig oor hulle te hou, met inbegrip van skatting van die bekken by vaginale ondersoek, plekbespreking en hou van rekords, en die gebruik van 'n bekkenmeter, bloeddrukapparaat en fetale stetoskoop;
- (b) moet minstens vyf (5) bevallings bywoon en onderrig daar ontvang, voordat sy toegelaat word om self gevalle waar te neem;
- (c) moet vir minstens vier (4) weke in 'n kraamsaal opleiding ontvang. Hierdie tydperk hoef nie aan-enlopend te wees nie;
- (d) moet die verloop van minstens dertig (30) bevallings bywoon en aanskou, terwyl sy sowel buik- as vaginale ondersoeke in die loop van die bevalling uitvoer en die pasiënte persoonlik verlos. Minstens twintig (20) vaginale ondersoeke en minstens tien (10) rektale ondersoeke moet gedoen word. Die bevindings van die twintig (20) vaginale ondersoeke en van die tien (10) rektale ondersoeke moet deur 'n geneesheer of 'n geregistreerde vroedvrou nagegaan word. Van die dertig (30) bevallings, moet minstens die eerste tien (10) by die opleidingskool, en van die res, minstens vyf (5) aan huis van die pasiënte gedoen word. Van die laaste vyf (5) verlossings in die opleidingskool, moet minstens twee (2) sonder direkte instruksie gedoen word. Nie meer nie as vyf (5) mag gevalle wees wat 'n geneesheer ontbied het om die bevalling persoonlik waar te neem;
- (e) moet vir minstens vier (4) weke in die distrik opleiding ontvang;
- (f) moet minstens dertig (30) kraamvroue en hulle babas verpleeg. Van hulle moet minstens vyf (5) in hulle eie huise, of in die geval van opleidingskole vir naturelle vroedvroue op die platteland, onder soortgelyke omstandighede as dié in sulke gebiedens, verpleeg word. Dertig (30) kraamvroue en hulle babas moet vir minstens tien (10) dae verpleeg word; met dien verstande dat, waar die verpleging van 'n kraamvrou en haar baba wat voor die tiende dag na die bevalling huis toe gestuur is, by die huis-voortgesit word, die verpleging aldus gedoen by die verpleging wat in die opleidingskool gedoen is, getel word;
- (g) moet rekords hou van die gevalle wat persoonlik deur haar verlos is, met inbegrip van die voorgeboortegeskiedenis en van die gevalle wat ingevolge hierdie regulasie deur haar verpleeg is;
- (h) moet elke moontlike geleenthed gebied word om onder geneeskundige toesig stuitliggings waar te neem, alhoewel vroedvroue slegs in 'n noodgeval toegelaat word om 'n stuitligging-geboorte sonder geneeskundige hulp waar te neem;
- (i) moet voorgeboorte-pasiënte wat aan abnormale toestande ly, verpleeg.

LEERPLAN.

7. Die leerplanne is soos voorgeskryf in Bylae B.

EKSAMENS.

8. (1) Die voorlopige eksamen is 'n skriftelike eksamen wat drie (3) uur duur oor die onderwerpe—

- (a) elementêre anatomie en fisiologie;
- (b) elementêre bakteriologie;

least fifty (50) lectures and twenty (20) demonstrations shall be given by registered midwives. In addition thereto clinical instruction shall be given throughout the prescribed period of training by medical practitioners and registered midwives.

PRACTICAL TRAINING.

6. (1) Except as may be otherwise prescribed, every student shall during the course of her training receive instruction in, and carry out, all the nursing and midwifery procedures prescribed in the syllabuses in Annexure B.

(2) Every student—

- (a) shall receive training in an ante-natal department or clinic for at least twenty (20) days in all. The student shall visit pregnant women in their homes and examine and receive instruction in the supervision of at least thirty (30) pregnant women, including the assessing of the pelvis by vaginal examination, the booking and keeping of records and the use of a pelvimeter, blood pressure apparatus and foetal stethoscope;
- (b) shall witness under instruction at least five (5) labours before being allowed to take cases;
- (c) shall receive training in a labour ward for at least four (4) weeks. This period need not be continuous;
- (d) shall attend and watch the progress of at least thirty (30) labours, making both abdominal and vaginal examinations during the course of the labour and personally delivering the patients. At least twenty (20) vaginal examinations and at least ten (10) rectal examinations shall be carried out. The twenty (20) vaginal examination findings and the ten (10) rectal examination findings shall be checked by a medical practitioner or a registered midwife. Of the thirty (30) deliveries at least the first ten (10) shall be done in the training school and of the remainder at least five (5) shall be done in the homes of the patients. Of the last five (5) deliveries in the training school at least two (2) shall be done without direct instruction. Not more than five (5) may be cases who have engaged a medical practitioner to attend the confinement personally;
- (e) shall receive training for at least four (4) weeks on the district;
- (f) shall nurse at least thirty (30) lying-in women and their infants. Of these at least five (5) shall be nursed in their own homes or, in the case of training schools for Native midwives in rural areas, under conditions similar to those pertaining in such areas. Thirty (30) lying-in women and their infants shall be nursed for at least ten (10) days; provided that where the nursing of a lying-in woman and her infant, who have been sent home before the tenth day after the delivery, is followed up at home, the nursing so carried out will count in addition to the nursing carried out in the training school;
- (g) shall keep records of the cases personally delivered by her, including the ante-natal history, and of the cases nursed by her in terms of this regulation;
- (h) shall be given every opportunity to conduct breech deliveries under medical supervision, although a midwife is allowed to conduct a breech delivery without medical assistance only in an emergency;
- (i) shall nurse ante-natal patients suffering from abnormal conditions.

SYLLABUS.

7. The syllabuses shall be as prescribed in Annexure B.

EXAMINATIONS.

8. (1) The preliminary examination shall be a written examination of three (3) hours duration on the subjects—

- (a) elementary anatomy and physiology;
- (b) elementary bacteriology;

- (c) higiëne;
(d) voedingsleer.

(2) Die eindeksamen word gestel oor die leerplan in Bylae B voorgeskryf en bestaan uit drie (3) gedeeltes, te wete—

- (a) 'n skriftelike gedeelte van twee (2) vraestelle wat elk twee (2) uur duur en wat uit tweehonderd (200) punte tel;
- (b) 'n mondeline gedeelte wat uit eenhonderd (100) punte tel;
- (c) 'n praktiese gedeelte wat uit eenhonderd (100) punte tel.

TOELATING TOT DIE VOORLOPIGE EKSAMEN.

(Die aandag word gevestig op regulasies 3, 4 en 13.)

9. 'n Kandidaat moet—

- (1) 'n aansoek om toelating ooreenkomstig regulasie 13 indien;
- (2) saam met die aansoek om toelating 'n sertifikaat van die persoon in beheer van die opleidingskool indien—
 - (a) dat sy teen die einde van die maand waarin die betrokke eksamen gehou word, minstens nege (9) maande van die voorgeskrewe opleidingstydperk voltooi sal hê; en
 - (b) dat sy teen die datum van die betrokke eksamen 'n volledige kursus lesings en praktiese klasse oor die onderwerpe anatomie en fisiologie, bakteriologie, higiëne en voedingsleer soos voorgeskryf in die leerplan in Bylae B sal bygewoon het.

TOELATING TOT DIE EINDEKSAMEN.

(Die aandag word gevestig op regulasies 3, 4 en 13.)

10. (1) 'n Kandidaat moet—

- (a) in die voorlopige eksamen geslaag het of vrystelling daarvan gekry het;
- (b) teen die einde van die maand waarin die betrokke eksamen gehou word, minstens twaalf (12) maande opleiding deurloop het vanaf die eerste dag van die maand waarin die voorlopige eksamen waarin sy geslaag het, gehou is;
- (c) 'n aansoek om toelating ooreenkomstig regulasie 13 indien;
- (d) saam met die aansoek om toelating 'n sertifikaat van die persoon in beheer van die opleidingskool indien
 - (i) dat sy teen die einde van die maand waarin die betrokke eksamen gehou word, die voorgeskrewe opleidingstydperk [insluitende enige tydperk van opleiding wat ingewerk moet word en enige verlenging van opleiding, maar uitgesondert die tydperk van veertien (14) dae in die geval van 'n opleidingskool wat goedgekeur is om aan leerlinge onderrig in die toediening van stikstofsuboksied- en lug-pynstilling te geel sal voltooi het;
 - (ii) dat sy teen die datum van die skriftelike gedeelte van die betrokke eksamen aan die bepalings van regulasies 5 en 6 sal voldoen het;
 - (iii) wat al die verlof en siekteleverlof wat gedurende die opleidingstydperk aan haar toegestaan is, uiteensit.

(2) 'n Kandidaat wat nie tot 'n eksamen toegelaat kan word nie bloot omrede siekteleverlof wat ingewerk moet word, kan by aansoek deur die persoon in beheer van die opleidingskool tot die eksamen toegelaat word en die siekteleverlof kan na die eksamen ingewerk word; met dien verstande dat die tydperk siekteleverlof wat na die eksamen ingewerk moet word, nie ses (6) weke te bove gaan nie.

(3) 'n Kandidaat wat haarself nie binne 'n tydperk van een (1) jaar na die datum van voltooiing van opleiding vir die eindeksamen aanmeld nie, kan versoek word om sodanige verdere opleiding te deurloop as wat die raad mag besluit voordat sy tot die eksamen toegelaat word.

- (c) hygiene;
(d) nutrition.

(2) The final examination shall be set on the syllabus prescribed in Annexure B and shall consist of three (3) portions being—

- (a) a written portion of two (2) papers of two (2) hours duration each and which shall be marked out of two hundred (200) marks;
- (b) an oral portion which shall be marked out of one hundred (100) marks;
- (c) a practical portion which shall be marked out of one hundred (100) marks.

ADMISSION TO THE PRELIMINARY EXAMINATION.

(Attention is directed to regulations 3, 4 and 13.)

9. A candidate shall—

- (1) lodge an application for admission in terms of regulation 13;
- (2) lodge with the application for admission a certificate by the person in charge of the training school—
 - (a) that she will complete at least nine (9) months of the prescribed period of training by the end of the month in which the examination concerned takes place; and
 - (b) that by the date of the examination concerned she will have attended a complete course of lectures and practical classes in the subjects anatomy and physiology, bacteriology, hygiene and nutrition, as prescribed in the syllabus in Annexure B.

ADMISSION TO THE FINAL EXAMINATION.

(Attention is directed to regulations 3, 4 and 13.)

10. (1) A candidate shall—

- (a) have passed in the preliminary examination or have been exempted therefrom;
- (b) by the end of the month in which the examination concerned is held, have undergone at least twelve (12) months of training from the first day of the month in which the preliminary examination in which she passed, was held;
- (c) lodge an application for admission in terms of regulation 13;
- (d) lodge with the application for admission a certificate by the person in charge of the training school—
 - (i) that she will complete the prescribed period of training [including any period of training which has to be made up and any extension in training, but excluding the period of fourteen (14) days in the case of a training school approved of to instruct students in the administration of nitrous oxide and air anaesthesia] by the end of the month in which the examination concerned takes place;
 - (ii) that she will comply with the provisions of regulations 5 and 6 by the date of the written portion of the examination concerned;
 - (iii) setting out all the leave and sick leave granted to her during the period of training.

(2) A candidate who is debarred from admission to an examination only because of sick leave which has to be made up may, on the application of the person in charge of the training school, be admitted to the examination and the sick leave made up after the examination; provided that the period of sick leave to be made up after the examination shall not exceed six (6) weeks.

(3) A candidate who does not present herself for the final examination within a period of one (1) year from the date of completion of training, may be called upon to undergo such further training as the Council may decide upon before being admitted to the examination.

HERTOELATING TOT DIE VOORLOPIGE EN EINDEKSAMENS.

(Die aandag word gevvestig op regulasie 13.)

(1) 'n Leerling wat in 'n voorlopige eksamen of in 'n eindeksamen druip en minder as veertig (40) persent van die gemiddelde puntetal vir die betrokke eksamen behaal, word nie tot die eksamen wat onmiddellik volg op die een waarin sy gedruip het, toegelaat nie.

(2) Van 'n leerling wat by haar eerste poging tot die eindeksamen nie aan enige van die vereistes van paragraaf (3) van regulasie 12 voldoen nie, word vereis om haarself aan te meld vir 'n hereksamenslegs in die deel of dele van die eksamen waarin sy minder as sestig (60) persent van die toekendepte punte behaal het.

(3) 'n Leerling van wie vereis word om slegs 'n deel of gedeeltes van die eindeksamen ooreenkomsdig paragraaf (2) te doen, moet voldoen aan paragraaf (3) van regulasie 12. In hierdie geval word die gemiddelde puntetelling vir die hele eksamen bereken op die punte wat in hierdie gedeelte of hierdie gedeeltes van die eksamen behaal is, en die punte wat behaal is in die gedeelte of gedeeltes van die eksamen waarvoor sy by haar eerste poging tot die eksamen krediet gekry het.

(4) 'n Leerling wat nie in die eindeksamen as 'n geheel by die tweede of daaropvolgende poging slaag nie, word beskou as dat sy die eksamen in die geheel gedruip het.

(5) Van 'n leerling wat in die voorlopige eksamen, of in die eindeksamen by 'n tweede of daaropvolgende poging tot so 'n eksamen druip, word elke keer vereis om vir drie (3) maande verdere ononderbroke opleiding aan 'n opleidingskool te deurloop voordat sy weer tot die betrokke eksamen toegelaat word. Gedurende elk sodanige tydperk van drie (3) maande, moet die leerling minstens vier-en-twintig (24) lesings en demonstrasies oor die onderwerpe voorgeskryf vir die betrokke eksamen bywoon. 'n Leerling moet aan hierdie vereiste voldoen en haarself binne een (1) jaar na die datum van bekendmaking van die uitslae van die laaste eksamen waarin sy onsuksesvol was, weer vir eksamen aanmeld, by gebreke waarvan daar van haar vereis sal word om sodanige verdere opleiding te deurloop as waarop die raad mag besluit. 'n Leerling wat in hierdie kategorie val, moet saam met die aansoek om hertoelating tot 'n eksamen 'n sertifikaat van die persoon in beheer van die opleidingskool dat sy aan hierdie vereistes voldoen het, of dat sy teen die datum van die betrokke eksamen daaraan sal voldoen het, indien.

(6) 'n Leerling wat by die eerste poging nie in die eindeksamen as 'n geheel slaag nie, moet haarself binne 'n tydperk van een (1) jaar na die datum van publikasie van die uitslae van sodanige eksamen weer vir eksamen aanmeld, by gebreke waarvan sy sodanige verdere opleiding moet deurloop as wat die Raad mag besluit voordat sy weer tot die eksamen toegelaat word.

EKSAMENPUNTE.

(1) Suksesvolle kandidate word aangedui as „geslaag” of „geslaag met lof”.

(2) Om in die voorlopige eksamen te slaag moet 'n kandidaat minstens vyftig (50) persent gemiddeld betaal. Om met lof te slaag moet 'n kandidaat minstens vyf-en-sewentig (75) persent gemiddeld betaal.

(3) Om in die eindeksamen te slaag, moet 'n kandidaat minstens vyftig (50) persent gemiddeld in elke gedeelte van die eksamen behaal; met dien verstande dat 'n kandidaat wat minder as vyftig (50) persent, maar nie minder as vyf-en-veertig (45) persent gemiddeld nie in een of meer gedeeltes van die eksamen behaal, minstens vyf-en-vyftig (55) persent gemiddeld in die hele eksamen moet behaal. Om met lof te slaag, moet 'n kandidaat minstens vyf-en-sewentig (75) persent gemiddeld in elke gedeelte van die eksamen behaal.

(4) Kandidate word nie in volgorde van verdienste geplaas nie en geen inligting aangaande punte of plekke van kandidate word verstrek nie, behalwe in verband met 'n prys of toekenning deur die Raad goedgekeur.

RE-ADMISSION TO THE PRELIMINARY AND FINAL EXAMINATIONS.

(Attention is directed to regulation 13.)

(1) A student who fails in a preliminary examination (40) per cent of the aggregate marks for the examination or in a final examination and obtains less than forty concerned, shall not be admitted to the examination immediately following the one in which she failed.

(2) A student who at her first attempt at the final examination fails to satisfy any of the requirements of paragraph (3) of regulation 12, shall be required to present herself for re-examination only in the portion or portions of the examination in which she obtained less than sixty (60) per cent of the allocated marks.

(3) A student who is required to take only a portion or portions of the final examination in terms of paragraph (2), shall comply with paragraph (3) of regulation 12. In this instance the aggregate mark for the examination as a whole shall be calculated on the marks obtained in this portion or in these portions of the examination and the marks obtained in the portion or portions of the examination for which she was granted credit at the first attempt at the examination.

(4) A student who does not pass in the final examination as a whole at the second or at a subsequent attempt shall be deemed to have failed in the examination as a whole.

(5) A student who fails in the preliminary examination or in the final examination at the second or at a subsequent attempt at such examination shall each time be required to undergo three (3) months further continuous training at a training school before being re-admitted to the examination concerned. During each such period of three (3) months the student shall attend at least twenty-four (24) lectures and demonstrations in the subjects prescribed for the examination concerned. A student shall comply with this requirement and present herself for re-examination within one (1) year of the date of the publication of the results of the last examination in which she was unsuccessful; failing which she shall be required to undergo such further training as the Council may decide upon. A student falling in this category shall lodge with the application for re-admission to an examination a certificate from the person in charge of the training school that she has complied with these requirements, or that she will comply with them by the date of the examination concerned.

(6) A student who, at the first attempt, does not pass in the final examination as a whole, shall present herself for re-examination within a period of one (1) year of the date of the publication of the results of such examination, failing which she shall undergo such further training as the Council may decide upon, before being re-admitted to the examination.

EXAMINATION MARKS.

(1) Successful candidates shall be shown as having „passed” or „past with honours”.

(2) To pass in the preliminary examination a candidate shall obtain at least fifty (50) per cent in the aggregate. To pass with honours, a candidate shall obtain at least seventy-five (75) per cent in the aggregate.

(3) To pass in the final examination a candidate shall obtain at least fifty (50) per cent in the aggregate for each portion of the examination; provided that a candidate who obtains less than fifty (50) per cent but not less than forty-five (45) per cent of the aggregate in one or more portions of the examination, shall obtain at least fifty-five (55) per cent in the aggregate for the whole examination. To pass with honours a candidate shall obtain at least seventy-five (75) per cent in the aggregate in each portion of the examination.

(4) Candidates will not be placed in order of merit and no information in regard to the marks or places of candidates shall be given, except in connection with a prize or award approved of by the Council.

DATUMS VAN EKSAMENS, AANSOEK OM TOELATING EN
HERTOELATING EN EKSAMENGELDE.

13. (1) Die persoon in beheer van die opleidingskool moet die Raad onmiddellik in kennis stel en redes verstrek indien 'n kandidaat nie meer na indiening van 'n aansoek ooreenkomsdig hierdie regulasie tot 'n eksamen toegelaat of hertoegelaat kan word nie.

(2) Die voorlopige eksamen word drie (3) keer per jaar gedurende die maande Februarie, Junie en Oktober gehou, en aansoeke om toelating en hertoelating moet op of voor 7 Januarie, 7 Mei en 7 September, onderskeidelik, by die Raad ingedien word.

(3) Die eindeksamen word drie (3) keer per jaar gedurende die maande Februarie, Junie en Oktober gehou, en aansoeke om toelating en hertoelating moet op of voor 7 Desember, 7 April en 7 Augustus, onderskeidelik, by die Raad ingedien word.

(4) Die volgende gelde moet aan die Raad betaal word:—

- (a) By aansoek om toelating of hertoelating tot die voorlopige eksamen, 'n bedrag van een pond (£1);
- (b) by aansoek om toelating tot die eindeksamen, 'n bedrag van driepond (£3). By aansoek om hertoelating, 'n bedrag van tweepond (£2), afgesien van die aantal gedeeltes waarin die kandidaat haarself vir hereksamen moet aanmeld.

Indien en wanneer 'n kandidaat kwalificeer vir registrasie, word sy sonder die betaling van 'n fooi in die register ingeskryf.

(5) 'n Aansoek nie langer as sewe (7) dae na die voorgeskrewe datum vir indiening van aansoeke om toelating en hertoelating tot 'n eksamen ingedien nie, word slegs by betaling van 'n bykomstige bedrag van een ghienie (£1. 1s.) aangeneem.

(6) 'n Aansoek ingedien langer as sewe (7) dae na die voorgeskrewe datum vir indiening van aansoeke om toelating en hertoelating tot 'n eksamen, word nie aangeneem nie.

(7) 'n Aansoek om toelating of hertoelating tot 'n eksamen word nie as „ingedien“ beskou ooreenkomsdig hierdie regulasie nie, tensy 'n aansoekvorm, behoorlik voltooi, saam met sodanige sertifikate as wat van toepassing mag wees, die eksamengeld en, waar van toepassing, die bykomstige bedrag waarna in paragraaf (5) verwys word, die Raad bereik het.

(8) Behalwe waar anders deur die Raad besluit, word eksamengelde aan die Raad ingeboet indien 'n kandidaat haar inskrywing kanselleer of van 'n eksamen afwesig is. Hierdie paragraaf is ook op die bedrag waarna in paragraaf (5) verwys word, van toepassing.

EKSAMENSENTRUMS.

14. Die eksamens word op sodanige plekke as wat die Raad mag besluit, gehou.

EKSAMINATORE EN MODERATORE.

15. Eksaminator word deur die Raad aangestel. Die Raad kan moderatore vir die skriftelike eksamens aanstel.

HERNASIEN VAN EKSAMINSKRIFTE.

16. (1) 'n Kandidaat wat in 'n skriftelike eksamen gedruip het, kan hy betaling van 'n bedrag van twee ghienies (£2. 2s.) aansoek doen om haar antwoorde te laat hernasiën.

(2) 'n Aansoek om hernasiëning moet binne veertien (14) dae na die datum van publikasie van die uitslae van die betrokke eksamen by die Raad ingedien word.

(3) Die hernasiëning van antwoorde word deur die moderator wat vir die eksamen aangestel is, of deur sodanige ander persoon of persone as wat deur die Raad aangestel mag word, gedoen.

(4) Die punte wat by hernasiëning aan 'n kandidaat toegeken word, is finaal en bindend.

(5) Die bedrag wat ten opsigte van 'n aansoek om hernasiëning betaal word, word nie aan die kandidaat terugbetaal nie, wat die uitslag van die hernasiëning ookal mag wees.

DATES OF EXAMINATIONS, APPLICATIONS FOR ADMISSION AND RE-ADMISSION AND EXAMINATION FEES.

13. (1) The person in charge of a training school shall notify the Council forthwith, giving reasons, if a student becomes ineligible for admission or re-admission to an examination subsequent to the lodging of an application in terms of this regulation.

(2) The preliminary examination shall be held three (3) times a year during the months February, June and October and applications for admission and re-admission shall be lodged with the Council on or before the 7th January, the 7th May and the 7th September respectively.

(3) The final examination shall be held three (3) times a year during the months February, June and October and applications for admission and re-admission shall be lodged with the Council on or before the 7th December, the 7th April and the 7th August respectively.

(4) The following fees shall be paid to the Council:—

- (a) On application for admission or re-admission to the preliminary examination, a fee of one pound (£1);
- (b) on application for admission to the final examination, a fee of three pounds (£3). On application for re-admission, a fee of two pounds (£2), irrespective of the number of portions in which the candidate has to present herself for re-examination.

If and when a candidate qualifies for registration she shall be admitted to the register without the payment of a fee.

(5) An application lodged not more than seven (7) days after the prescribed date for the lodging of applications for admission and re-admission to an examination, shall be accepted only on payment of an additional fee of one guinea (£1. 1s.).

(6) An application lodged more than seven (7) days after the prescribed date for the lodging of applications for admission and re-admission to an examination, shall not be accepted.

(7) An application for admission or re-admission to an examination shall not be deemed to have been "lodged" in terms of this regulation, unless an application form, duly completed, together with such certificates as may be applicable, the examination fee and, where applicable, the additional fee referred to in paragraph (5), shall have reached the Council.

(8) Except as may be otherwise decided by the Council, examination fees shall be forfeited to the Council if a candidate cancels her entry or is absent from an examination. This paragraph shall apply also to the fee referred to in paragraph (5).

EXAMINATION CENTRES.

14. The examinations shall be held at such places as the Council may determine.

EXAMINERS AND MODERATORS.

15. Examiners shall be appointed by the Council. The Council may appoint moderators for the written examinations.

RE-ASSESSMENT OF EXAMINATION ANSWERS.

16. (1) A candidate who has failed in a written examination may upon payment of a fee of two guineas (£2. 2s.) apply to have her answers re-assessed.

(2) An application for re-assessment shall be lodged with the Council within fourteen (14) days of the date of the publication of the results of the examination concerned.

(3) The re-assessment of answers shall be done by the moderator appointed for the examination, or by such other person or persons as may be appointed by the Council.

(4) The marks allocated to a candidate upon re-assessment shall be final and binding.

(5) The fee paid in respect of an application for re-assessment shall not be refunded to the candidate, whatever the result of the re-assessment may be.

TOEPASSING OP DIE GEBIED SUIDWES-AFRIKA.

17. Hierdie regulasies is in die gebied van toepassing.

DATUM VAN INWERKINGTREDING.

18. Hierdie regulasies tree ses (6) maande na die datum van uitvaardiging in werking en is van toepassing op alle leerlinge wat op of na daardie datum opleiding begin of hervat.

BYLAE A.

VEREISTES EN VOORWAARDES VIR DIE GOEDKEURING VAN OPLEIDINGSKOLE.

1. 'n Hospitaal kan as 'n opleidingskool goedgekeur word indien dit aan die volgende vereistes voldoen:—

- (1) Leerlingvroedvroue moet as leerlinge beskou word en hulle opleiding moet normaalweg voorkeur geniet bo enige ander pligte wat van hulle vereis mag word.
- (2) 'n Persoon wat as 'n vroedvrou sowel as 'n algemene verpleegster geregistreer is, moet by die Raad aangedui staan as die persoon in beheer van die opleidingskool. Die aangeduide persoon is aan die Raad verantwoordelik en moet die Raad tevrede stel dat elke leerling behoorlike onderrig in die teoretiese en praktiese aspekte van die leerplan, soos by hierdie regulasies bepaal, ontvang.
- (3) Voorsiening moet gemaak wees vir bevredigende akkommodasie vir lesings en demonstrasies en die nodige toerusting, modelle en biblioteekfasilitate vir behoorlike onderrig van leerlinge moet beskikbaar wees.
- (4) Bewys moet tot tevredenheid van die Raad gelewer word dat—
 - (a) die aantal en klas pasiënte wat in die hospitaal behandel word, toereikend is vir die opleiding van leerlinge;
 - (b) fasilitete beskikbaar is vir die behoorlike opleiding van leerlinge in al die onderwerpe voorgeskryf in die leerplan.
- (5) Die persone wat deelneem aan die opleiding van leerlinge moet geregistreerde geneeshere, geregistreerde vroedvroue en persone wees wat sodanige kwalifikasies besit as wat die Raad mag goedkeur.
- (6) Leerlinge moet vir minstens 44 uur per week opleiding ontvang.
- (7) Van leerlinge moet nie vereis word om vir langer as drie (3) maande per opleidingsjaar opleiding op nagdiens te deurloop nie.
- (8) Leerlinge moet minstens een (1) dag per week vry gegee word wanneer opleiding op dagdiens deurloop word, en minstens een (1) nag per week wanneer opleiding op nagdiens deurloop word.
- (9) Leerlinge moet geneeskundig ondersoek word by toelating tot opleiding.
- (10) Nie meer as drie (3) leerlinge moet vir elke geregistreerde vroedvrou wat normaalweg op die personeel van die hospitaal is, toegelaat word nie.
- (11) Die Raad het te alle tye die reg om van 'n opleidingskool sodanige inligting te vra as wat hy nodig mag ag en om op enige saak waar sy vereistes blykbaar nie behoorlik nagekom word nie, of op enige saak wat na sy mening die opleiding van leerlinge benadeel, te wys, en om in enige geval wat onbevredigend bly, sy goedkeuring te weerhou, op te hef of in te trek.
- (12) Die Raad of enige persoon daar toe afgevaardig deur die Raad, het die reg om te eniger tyd 'n opleidingskool te inspekteer en om sodanige inligting te vra as wat nodig geag mag word.

2. Neteenstaande die bepalings hierin vervat, kan die Raad, na goedgunke, 'n hospitaal as 'n opleidingskool goedkeur indien nie aan een of meer van die voorwaardes of vereistes voldoen kan word nie. Sodanige goedkeuring kan vir sodanige tydperk en op sodanige voorwaardes as wat die Raad mag besluit, verleen word.

3. Enige goedkeuring deur die Raad verleen, kan na sy goedgunke, verander of gewysig word.

APPLICATION TO THE TERRITORY OF SOUTH WEST AFRICA.

17. These regulations shall apply in the territory.

DATE OF ENFORCEMENT.

18. These regulations shall come into operation six (6) months after the date of promulgation and shall be applicable to all students who commence or resume training on or after that date.

ANNEXURE A.

REQUIREMENTS AND CONDITIONS FOR THE APPROVAL OF TRAINING SCHOOLS.

1. A hospital may be approved of as a training school if it complies with the following requirements:—

- (1) Student midwives shall be treated as students and their training shall normally receive precedence over any other duties that may be required to be performed by them.
- (2) A person who is registered both as a midwife and as a general nurse shall be designated to the Council as the person in charge of the training school. The person designated shall be responsible to and shall satisfy the Council that every student receives adequate instruction in the theoretical and practical aspects of the syllabus, as prescribed by these regulations.
- (3) Provision shall be made for satisfactory accommodation for lectures and demonstrations and the necessary equipment, models and library facilities for the proper instruction of students shall be available.
- (4) Proof shall be furnished to the satisfaction of the Council that—
 - (a) the number and class of patients dealt with in the hospital are adequate for the training of students;
 - (b) facilities are available for the adequate training of students in all the subjects prescribed in the syllabus.
- (5) The persons who take part in the training of students shall be registered medical practitioners, registered midwives and persons holding such qualifications as the Council may approve of.
- (6) Students shall be in training for at least 44 hours per week.
- (7) Students shall not be required to do more than three (3) months training on night duty per year of training.
- (8) Students shall be allowed at least one (1) day off duty per week when in training on day duty and at least one (1) night off duty per week when in training on night duty.
- (9) Students shall be medically examined upon admission to training.
- (10) Not more than three (3) students shall be admitted for each registered midwife normally employed on the staff of the hospital.
- (11) The Council shall at all times have the right to call for such information from a training school as it may deem fit and to point out any matter in which its requirements appear to be insufficiently met, or any matter which in its opinion adversely affects the training of students, and to withhold, suspend or withdraw approval in any case which remains unsatisfactory.
- (12) The Council or any person deputed thereto by the Council shall have the right to inspect a training school at any time and to call for such information as may be deemed necessary.

2. Notwithstanding the provisions contained herein, the Council may, in its discretion, approve of a hospital as a training school if one or more of the conditions or requirements cannot be complied with. Any such approval may be granted for such period and upon such conditions as the Council may determine.

3. Any approval given by the Council may, at its discretion, be varied or amended.

BYLAE B.

LEERPLAN.

(1) Kort geskiedenis van verloskunde en verpleging.

(2) *Etiel en beheer van verplegingspraktyk.*—Die betekenis van etiek. Die invloed van verplegingsgeskiedenis en tradisie op professionele beheerstandarde. Die fundamentele beginsels waarop alle goeie verpleging rus. Praktiese toepassing van hierdie beginsels op die verpleegster se werk en haar professie. Die verskillende wetlike verpligte wat op die verpleegster rus. Die Handelinge of Versume wat deur die Suid-Afrikaanse Verpleegstersraad voorgeskryf is. Die „Nightingale Pledge of Service”; die Etiese Kode van die „International Council of Nurses”.

(3) *Natuurkunde.*—’n Elementêre inleiding tot die volgende:—

- (a) Gasse, vloeistowwe en vaste stowwe. Oplossings en suspensies, filtrasie, presipitasie, kristallisatie, diffusie en osmose.
- (b) Sure, basisse en soute. Neutralisasie.
- (c) Water, permanente en tydelike hardheid.
- (d) Die atmosfeer en atmosferiese druk. Die Barometer.
- (e) Digtheid.
- (f) Hitte en temperatuur. Fahrenheit- en Celsius-skale.
- (g) Gebruik en gevare van: suurstof, koolsuurgas, stikstofoksied.
- (h) Mate en gewigte: berekening en verdunning.

(4) *Anatomie en fisiologie.*—Die doel van die kursus is om aan kandidate ’n elementêre kennis te gee van die nageboortelike ontwikkeling, struktuur, posisie en funksies van die verskillende dele van die menslike liggaam, insluitende:—

- (a) *Inleiding.*
- (b) *Essensieel.*—Selle en weefsels, die rangskikking en elementêre geheel-struktuur van organe en hulle funksies; die liggaam as ’n geheel; die vernaamste holtes en hulle inhoud.
- (c) *Die geraamte.*—Name en posisies van groter bene; name en posisies van groep kleiner beentjies (bv. pols-, voet-, werwel-); die skedel; die bekken; gewrigte—soorte, geheel-struktuur en funksie.
- (d) *Die spierstelsel.*—Soorte spiere—willekeurige, on-willekeurige, hartspiere; manier van werking, naam en ligging van die volgende:—
Trapezius, sternokleidomastoïd, deltoïd, biceps, triceps, diafragma, en as groep: latissimus dorsi, psoas, die borsspier, buikwand; sacrospinialis, glutei, quadriceps femoris, die skenkelenings as ’n groep, gastrocnemius, soleus, kuitspier, tussenribspiere en spiere van die bekkenbodem.
- (e) *Bloedsomloopstelsel.*—Die hart en sy funksie, sy holtes, hartsak, groot bloedvate, posisie en rigting van die vernaamste bloedvate van die liggaam; slagare, haartate en are. Groot bloedsomloop en die poortaarsstelsel. Bloed, die bestanddele en funksies daarvan. Bloedvormende organe, beenmurg, milt, limfatische kliere; pols, bloeddruk, bloeding en fisiologiese reaksie daarop. Limfstelsel. Kort verwysing na limfatische dreinering, limfkliere en hulle doel.
- (f) *Spysverteringsstelsel.*—Eenvoudige anatomie en funksie van die spysverteringskanaal, mond, fariks, esofagus, maag, kleinderm, lever, pankreas, grootderm, borslimfbuis—all in hooftrekke. Verteringsproses—mechanies en chemies; absorpsie, assimilasie, ontlasting, die fekalië. (Ensiemwerking in besonderhede nie verlang nie.)
- (g) *Asemhalingstelsel.*—Eenvoudige anatomie van die lugweë—neus, neuskeelholte; larinks; lugpyp en bronchi; longe; borsvlies; diafragma. Meganismes en stelsels van asemhaling—in hooftrekke.

ANNEXURE B.

SYLLABUS.

(1) Short history of midwifery and nursing.

(2) *Ethics and Conduct of Nursing Practice.*—The meaning of ethics. The influence of nursing history and tradition on professional standards of conduct. The fundamental principles which underlie all good nursing. Practical application of these principles to the nurse’s work and her profession. The various legal obligations placed upon the nurse. The Acts and Omissions prescribed by the South African Nursing Council. The Nightingale Pledge of Service; the Code of Ethics of the International Council of Nurses.

(3) *Physical Science.*—An elementary introduction of the following:—

- (a) Gases, liquids and solids. Solutions and suspensions, filtration, precipitation, crystallisation, diffusion, osmosis.
- (b) Acids, bases and salts. Neutralisation.
- (c) Water, permanent and temporary hardness.
- (d) The atmosphere and atmospheric pressure. The Barometer.
- (e) Density.
- (f) Heat and temperature. Fahrenheit and Centigrade scales.
- (g) Uses and dangers of: oxygen, carbon dioxide, nitrous oxide.
- (h) Weights and measures; calculation and dilution.

(4) *Anatomy and Physiology.*—The object of the course shall be to provide candidates with an elementary knowledge of the post-natal development, structure, position and functions of the various parts of the human body, including:—

- (a) *Introduction.*
- (b) *Essentials.*—Cells and tissues, the arrangement and elementary gross structure of organs and their functions; the body as a whole; chief cavities and their contents.
- (c) *Skeletal System.*—Names and positions of the larger bones; names and positions of groups of smaller bones (e.g. carpal, tarsal, vertebrae); the skull; the pelvis; joints—types, gross structure and function.
- (d) *Muscular System.*—Types of muscles—voluntary, involuntary, cardiac; mode of action, name and situation of the following:—
trapezius, sternocleidomastoid, deltoid, biceps, triceps, diaphragm, and as groups: latissimus dorsi, psoas, the pectoral, abdominal wall; sacrospinialis, glutei, quadriceps femoris, hamstrings as a group, gastronemius, soleus, peroneal, intercostal and pelvic floor muscles.
- (e) *Circulatory System.*—The heart and its function, its cavities, pericardial sac, great vessels, position and course of principal blood vessels of the body; arteries, capillaries and veins. Systemic, pulmonary and portal circulation. Blood, its constituents and functions. Blood-forming organs, bone marrow, spleen, lymphatic glands; pulse, blood-pressure, haemorrhage and physiological reaction thereto. Lymphatic system. Brief reference to lymphatic drainage, lymph glands and their purpose.
- (f) *Alimentary System.*—Simple anatomy and function of the alimentary tract, mouth, pharynx, oesophagus, stomach, small intestine, liver, pancreas, large intestine, thoracic duct—all in outline. Process of digestion—mechanical and chemical; absorption, assimilation, excretion, faeces. (Detailed enzyme action not required.)
- (g) *Respiratory System.*—Simple anatomy of the respiratory tract—nose, nasopharynx; larynx; trachea and bronchi; lungs; pleura; diaphragm. Mechanisms and processes of respiration—in outline.

- (h) *Urinestelsel.*—Eenvoudige struktuur en funksie van die niere, ureters, blaas en uretra. Urine—normale bestanddele, soortlike gewig, reaksie en volume.
- (i) *Huidstelsel.*—Kort verwysing na die vel en sy funksies; hare en naels.
- (j) *Senustelsel.*—Oorsig van die skedel en die ruggaat: Oorsig van inhoud; cerebrum, cerebellum, murg, rugstring, harsing- en rugmurgvließe en cerebro-spinal vloeistof; hulle verwantskap en hooffunksies (besonderhede van struktuur nie verlang nie). Kort verwysing na spesiale gevoelsorgane; motoriese, sensoriese en outonomiese senuwees; posisie van die bo-armsenuwees en heiligbeenvleg, heupsenuwee, gesigs- en radiussenuwee; die funksies en 'n elementêre oorsig van die struktuur van die oog en die oor.
- (k) *Voortplantingstelsel.*
Manlik.—Kort oorsig van die struktuur en funksies.
Vroulik.—Indeling, eenvoudige struktuur en funksies van die inwendige en uitwendige organe en borste.
- (l) *Buislose stelsel.*—Kort oorsig van die posisie en funksies van die buislose kliere.

(5) *Noodhulp.*—Bloeding; uit slagare, are en haarfate; metodes om bloeding te stuit; vingerdruk-, aarpers- en ander metodes.

Noodbehandeling van wonde; asepsis, antisepsis.

Breuke, ontwrigtings en verstuitings; hulle tekens, symptome; soorte en behandeling.

Noodbehandeling vir skok, instorting en bewusteloosheid.

Besering aan die brein; instorting as gevolg van sterk drank; floute; hysterie; hitteslag en uitputting as gevolg van hitte.

Noodhulp in gevalle van brand- en skroeiwonde; bevriesing; wonde; byte van diere; steke van insekte; slangbyt.

Noodgevalle.—Wat om te doen in gevalle van nood-kindergeboorte, ophang, verstikking, verwurging, keelafsnny, verdrinking, vergiftiging, giftige gasse, brand.

Metodes van kunsmatige asemhaling. Algemene vergifte en teëggifte daarvoor.

Vreemde voorwerpe in die lugweë, slukderm, oor, oog, neus.

Noodmetodes van spalke aanwend, oplig en dra van beseerde.

Voorbereiding vir ontvangs van ongelukgevalle; bedopmaak; uittrek van klere.

Aanwend van verbande.—Aanwend van driehoekverband en hangverbande; aanwend van roloverbande.

(6) *Higiëne:*

- (a) *Bakterieë.*—Toestande gunstig vir groei; verspreiding van infeksie; metodes van beheer.
- (b) *Persoonlike higiëne.*—Die betekenis van gesondheid; fisiese aspekte—die waarde van voedsel, varsslug, sonlig, oefening, ontspanning, houding, rus, sindelikheid; die uitskeiding van afvalprodukte; klere, die versorging van hande, voete, tandé, hare, oë; geestelike aspek—die aanpassing by die omgewing en die maatskappy (veral medewerkers); onderlinge afhanklikheid van fisiese en geestelike gesondheid.
- (c) *Higiëne in die huis.*—Sindelikheid; beheer oor plae en parasiëte; ventilasie; beligting; verwarming. Die versorging van voedsel, veral melk en water; verwysing na siektes deur voedsel versprei. Verwydering van huishoudelike afvalstowwe (op huishoudelike skaal).
- (d) *Volksgesondheid* (slegs in breë trekke).—Die behoefte aan georganiseerde dienste in die gemeenskap—goeie watervoorsiening; beligting; verwydering van afvalstowwe; melkerye; slagpale; die voorkoming van infeksie; die daarstelling van klinieke, koorschospitale (insluitende tuberkulose en geslagsiektes) en disinfestasiestasies; die beheer van plae; die verskaffing van ontspanningsgronde; die onderrig van die publiek in gesonde leefwyse.

- (h) *Urinary System*—Simple structure and function of kidneys, ureters, bladder and urethra. Urine—normal constituents, specific gravity, reaction and volume.
- (i) *Integumentary System.*—Brief reference to the skin and its functions; hair and nails.
- (j) *Nervous System.*—Outline of cranium and vertebral column; Outline of the contents: cerebrum, cerebellum, medulla, spinal cord, meninges and cerebrospinal fluid; their relationship and main functions (details of structure not required). Brief reference to organs of special sense; motor, sensory and autonomic nerves; position of brachial plexus and sacral plexus, sciatic nerve, facial and radial nerve; the functions of and an elementary outline of the structure of the eye and the ear.
- (k) *Reproductive System.*
Male.—Brief outline of structure and functions.
Female.—Arrangement, simple structure and functions of the internal and external organs and breasts.
- (l) *Endocrine System.*—Brief outline of the position and functions of the endocrine glands.
- (5) *First Aid.*—Haemorrhage; arterial, venous and capillary; methods of arresting haemorrhage; digital pressure, tourniquet and other means.
- Emergency treatment of wounds; asepsis, antisepsis. Fractures, dislocations and sprains; their signs, symptoms; varieties and treatment.
- Emergency treatment of shock, collapse and unconsciousness.
- Injury to the brain; alcoholic collapse; fainting; hysteria; heat stroke and heat exhaustion.
- First aid in cases of burns and scalds; frost bite; wounds; bites of animals; stings of insects; snake bite.
- Emergencies.*—What to do in cases of emergency child birth, hanging, choking, strangulation, cut throat, drowning, poisoning, poisonous gases, fire.
- Methods of artificial respiration. Common poisons and their antidotes.
- Foreign bodies in the air-passage, oesophagus, ear, eye, nose.
- Improvised methods of splinting, lifting and carrying the injured.
- Preparation for reception of accident cases; bedmaking; removal of clothes.
- Bandaging.*—Application of triangular bandage and slings; application of roller bandages.
- (6) *Hygiene:*
- (a) *Bacteria.*—Conditions favourable to growth; spread of infection; methods of control.
- (b) *Personal Hygiene.*—The meaning of health; physical aspects—the value of food, fresh air, sunlight, exercise, relaxation, posture, rest, cleanliness; the excretion of waste products; clothing, the care of hands, feet, teeth, hair, eyes; mental aspect—the adjustment to surroundings and society (particularly fellow workers); interdependence of physical and mental health.
- (c) *Hygiene in the Home.*—Cleanliness; the control of pests and parasites; ventilation; lighting; heating. The care of food, especially milk and water; mention of food-borne diseases. Disposal of household refuse (on domestic scale).
- (d) *Public Hygiene* (in outline only).—The need for organised services in the community—good water supply; lighting; disposal of refuse; dairies; abattoirs; the prevention of infection; the provision of clinics, fever hospitals (including tuberculosis and venereal diseases) and disinfecting stations; the control of pests; the provision of recreation grounds; the education of the public in healthy living.

(7) *Voedingsleer*.—Voedselvereistes van die liggaam; proteïne; koolhidrate; sellulose; vette en water; mineraal soute en vitamines; kaloriewaardes; die samestelling van diëte; die voorbereiding van daaglikse spyskaarte; eenvoudige kookmetodes en die uitwerking van kook; dieetbeplanning in verhouding tot verskillende gemeenskappe; die invloed van maatskaplike en kulturele gewoontes; afhanklikheid van alle voeding van grondbewaring.

(8) *Teorie en praktyk van elementêre verpleging*:

(a) *Menslike verhoudings*.—Die grondslag van geestesgesondheid; moeder en kind; verhouding tot vader en familie; die skoolkind; puberteit en adolescensie; die jong volwassene; die middeljarige; ouderdom. (Moet op elementêre vlak geleer word.)

(b) *Die Pasiënt*.

- (i) *Toelating en observasie van pasiënt*.—Voorbereiding vir ontyvangs; toelating; bewaring van besittings; waarneming van liggaamlike abnormaliteite. Temperatuur; pols; asemhaling; urine; stoelgange; vaginale uitskeidings; braaksel; sputum; hoes; slaap; eetlus; vel; kleur; mond; posisie; geestestoestand en bewussyn.
- (ii) *Algemene versorging van pasiënt (suigelinge inbegrepe)*.—Bad—bed, badkamer, afspons, bad van babas. Versorging van—mond, neus, oë, ore, hare, naels, drukplekke en drukserre. Opmaak van beddens en die gebruik van alle bykomstighede. Gebruik van warmwatersakke en ander maniere om 'n bed te verwarm en die gevare daaraan verbonde. Pasiënte in posisie plaas, diëte voorskryf. Opdis van maaltye, voer van die hulpeloze pasiënt, voer van babas. Om die pasiënt te laat opstaan. Ontslag van pasiënt. Uitlê van dooies.
- (iii) *Spesiale behandelings en prosedures*.—Lawemente; insit van flatusbusijs; afdep van die vulva; uitspoelings; bespoelings; suurstofterapie; warm omslae; warm pappe; plaasklike aanwendings; versorging van wonde, brandwonde en skroeiwonde; behandeling van skok en bloeding. Neem van bloeddruk; kateterisasie; aanwend van verbande; verwijdering van proppe en buise; kunsmatige voeding.
- (iv) *Verplegingstegnieke ten opsigte van*—bloed-oortappings en binneaarse terapie; suiging en dreinering; lendepeknsies.
- (v) *Versorging voor en na 'n operasie*.
- (vi) *Voorbereiding vir ondersoek van pasiënt*.—Algemeen; vaginaal; rektaal.
- (vii) *Versamel van monsters vir ondersoek*.—Dappers en bloedsmere; bloed; sputum; urine; maaginhoud; die fekalië.
- (viii) *Urinetoetse*.
- (ix) *Medisyne en gewoontevormende middels*.—Reëls betreffende die hou en gee van gewoontevormende middels en vergifte. Reëls betreffende die hou en gee van medisyne. Metodes van toediening—per mond, per rektum, inspuitings, infusies, instillasies, insmerings, inasemings, steekpille. Berekening van geneesmiddels en bereiding van oplossings. Waarneming van verkeerde uitwerking van geneesmiddels in algemene gebruik; spesiale verplegingsversorging van pasiënte aan wie geneesmiddels met 'n spesifieke uitwerking toegedien is; vergifte en teëmmiddels.

(c) *Algemeen*.

- (i) *Sterilisasie*.—Beginsels en metodes, met besondere aandag aan die steriliseer van instrumente, spuite en trommels. Asepsie, insluitende die versorging en dra van gummihandskoene; antiseptiese middels; ontsmettingsmiddels.
- (ii) *Verslae uitskryf en verslag doen*.
- (iii) *Hou van saal- en pasiëntrekords*.

(7) *Nutrition*.—Food requirements of the body; proteins; carbohydrates; cellulose; fats and water; mineral salts and vitamins; calory values; the composition of diets; the preparation of daily menus; simple cooking methods and the effect of cooking; diet planning in relation to various communities; the effect of social and cultural customs; dependence of all nutrition on the preservation of the soil.

(8) *Theory and Practice of Elementary Nursing*:

(a) *Human Relations*.—The basis of mental health; mother and child; relationship with father and family; the school child; puberty and adolescence; the young adult; middle age; old age. (To be taught on an elementary level.)

(b) *The Patient*.

- (i) *Admission and Observation of Patient*.—Preparation for reception; admission; care of effects; observation of physical abnormalities. Temperature; pulse; respiration; urine; stools; vaginal discharges; vomitus; sputum; cough; sleep; appetite; skin; colour; mouth; position; state of mind and consciousness.
- (ii) *General Care of Patient (including Infants)*.—Bathing—bed, bathroom, sponging, bathing of infants. Care of—mouth, nose, eyes, ears, hair, nails, pressure parts and pressure sores. Bedmaking and use of all accessories. Use of hot water bottles and other means of warming a bed and their dangers. Positioning of patients. Ordering of diets. Serving of meals, feeding the helpless patient, feeding of infants. Getting patient up. Discharge of patient. Laying out the dead.
- (iii) *Special Treatments and Procedures*.—Enemas; passing of flatus tube; vulval swabbing; douching; irrigation; oxygen therapy; fomentations; poultices; local applications; care of wounds, burns and scalds; treatment of shock and haemorrhage. Taking of blood pressure; catheterisation; bandaging; removal of plugs and tubes; artificial feeding.
- (iv) *Nursing Techniques in respect of blood transfusion and intravenous therapy; suction and drainage; lumbar punctures*.
- (v) *Pre- and Post-operative Care*.
- (vi) *Preparation for Examination of Patient*.—general; vaginal; rectal.
- (vii) *Collection of Specimens for Examination*.—Swabs and smears; blood; sputum; urine; gastric contents; faeces.
- (viii) *Urine Testing*.
- (ix) *Medicines and Habit-forming Drugs*.—Rules regarding keeping and giving of habit-forming drugs and poisons. Rules regarding keeping and giving of medicines. Methods of administration—oral, rectal, injections, infusions, instillations, inunctions, inhalations, suppositories. Calculation of drugs and preparation of solutions. Observation of untoward effects of drugs in common use; special nursing care of patients to whom drugs with specific action have been administered; poisons and antidotes.

(c) *General*.

- (i) *Sterilisation*.—Principles and methods, with special attention to the sterilisation of instruments, syringes and drums. Asepsis, including the care of, and wearing of rubber gloves; antiseptics; disinfectants.
- (ii) *Writing and Giving Reports*.
- (iii) *Keeping of Ward and Patients' Records*.

(iv) *Neem, aanteken en uitvoer van geneeshere se bevels.*

(v) *Saalbestuur.*—Skoonmaak van saal en meubels. Toesig oor bediendes. Bestel van toerusting, metode van aanvulling, apteek. Die doeltreffende gebruik van tyd en materiaal. Die versorging van—gewone instrumente, linne, beddegoed, meubels, gummi-, glas- en politeenartikels en -toerusting, elektriese toerusting. Gevare verbonde aan die gebruik van elektriese toerusting, hitte en suurstof en brandgevare.

(9) *Bakteriologie.*—Kort geskiedenis; soorte en manier van voortplanting van bakterieë; bakteriese toksiene; hoe hulle toegang tot die liggaam verkry en uitgeskei word; skadelike en onskadelike bakterieë; werk van nuttige bakterieë; toestande wat groei beïnvloed; hoë en lae temperature, klam en droë hitte, lig en chemikalieë; erobe en anerobe; uitwerking van chemikalieë op bakterieë; weerstand van liggaam teen bakterieë.

(10) Die geskiedenis en etiek van verloskunde; die rol van die vroedvrou as 'n leermeesteres; die regulasies betreffende die handelings of versuime deur geregistreerde verpleegsters en geregistreerde vroedvroue waarvan die Raad kennis mag neem.

(11) Die betekenis van moedersterfte, sieklikheid van die moeder, sterfte van die pasgeborene, suigelingsterfte, doodgeboorte, aborsie; registrasie van geboortes, doodgeboortes en sterfgevalle ingevolge die Wet op die Registrasie van Geboortes, Huwelike en Sterfgevalle; kennisgewing van geboortes en doodgeboortes ooreenkomsdig die Volksgesondheidswet, 1919, soos gewysig.

(12) Die belangrikheid daarvan om behoorlike rekords ten opsigte van sowel die moeder as die kind te hou.

(13) Anatomië en fisiologie in verhouding tot verloskunde—die vroulike bekken; die voortplantingstelsel; die urienstelsel.

(14) *Die fetus.*—Die ontwikkeling van die fetus; die fetale sirkulasie; die fetale skedel; die skapula.

(15) Die fisiologie, diagnose en beheer van normale swangerskap. Hoe om die pasiënt te ondervra; die belangrikheid van die verhouding tussen die vroedvrou en die pasiënt; die vroedvrou as die moederfiguur; die behoefte aan 'n simpatieke benadering, die erkenning van die pasiënt as 'n individu en dat aan haar die geleentheid gebied word om probleme te bespreek. Onderrig van die verwagende moeder om die vrees van die onbekende te verminder, insluitende 'n eenvoudige verduideliking van swangerskap en geboorte en eenvoudige onderrig in babaversorging. Die belangrikheid van die liefde en belangstelling van albei die ouers vir die welvaart van die kind; die nodigheid daarvan om die vader waar moontlik in te sluit. Die higiëne van swangerskap; ontspanning en eenvoudige voorgeboortelike oefeninge. Die versorging en ondersoek van die swanger vrou, insluitende die ondersoek van urine, die berekening van die bloeddruk en toename in gewig; die belangrikheid van bloedtoetse en die betekenis van die bevindings.

(16) Voedingsvereistes gedurende swangerskap en die soogtydperk.

(17) Die tekens en simptome van die siektes en komplikasies van swangerskap; die voorkoming, versorging en behandeling daarvan, insluitende die spesiale verplegingsversorging benodig vir pasiënte wat aan diabetes, hartkwale, tuberkulose en nefritis ly.

(18) Die oorsake van infeksie en die voorkoming daarvan; asepsie; antiseptiese middels in verloskunde en die bereiding en gebruik daarvan; ontsmetting van die persoon, klerasie en instrumente.

(19) Die fisiologie, mechanisme en behartiging van normale swangerskap; die belangrikheid van die moeder se moraal; die belangrikheid van die verhouding tussen die vroedvrou en die pasiënt en die nodigheid van gedurige gerusstelling en aanmoediging, met spesiale verwysing na die ongehude moeder; die nodigheid daarvan dat iemand gedurende die bevalling by die pasiënt moet wees en dat aan haar verduidelik moet word dat die bevalling bevredigende vordering maak en hoekom die procedures nodig is; die emosionele toestand van 'n vrou in kraam—hipersensitief, pas alles wat gesê word op haarself toe en

(iv) *Taking, Recording and Carrying Out of Doctors' Orders.*

(v) *Ward Management.*—Cleaning of ward and furniture. Supervision of domestic staff. Ordering of equipment, method of renewal, dispensary. The efficient use of time and materials. The care of—common instruments, linen, bedding, furniture, rubber, glass and polythene articles and equipment, electrical equipment. Dangers attached to the use of electrical equipment, heat and oxygen and fire hazards.

(9) *Bacteriology.*—Brief history; classes and mode of reproduction of bacteria; bacterial toxins; mode of entry and discharge from body; pathogenic and non-pathogenic; work of useful bacteria; conditions affecting growth; high and low temperatures, moist and dry heat, light and chemicals; aerobes and anaerobes; effects of chemical agents on bacteria; defence of body against bacteria.

(10) The history and ethics of midwifery; the role of the midwife as an educator; the regulations regarding the acts and omissions by registered nurses and registered midwives of which the Council may take cognisance.

(11) The meaning of maternal mortality, maternal morbidity, neo-natal mortality, infant mortality, still-birth, abortion; registration of births, still-births and deaths under the Births, Marriages and Deaths Registration Act; notification of births and still-births in terms of the Public Health Act, 1919, as amended.

(12) The importance of keeping proper records in relation to both mother and child.

(13) Anatomy and physiology in relation to midwifery—the female pelvis; the reproductive system; the urinary system.

(14) The foetus: The foetal development; the foetal circulation; the foetal skull; the scapula.

(15) The physiology, diagnosis and management of normal pregnancy. How to interview the patient; the importance of the relationship between the midwife and the patient; the midwife as the mother figure; the need for a sympathetic approach, the recognition of the patient as an individual and for her to be given the opportunity of discussing problems. Education of the expectant mother to allay the fear of the unknown, including a simple explanation of pregnancy and labour and the simple instruction in baby care. The importance of the love and interest of both parents to the well-being of the child; the need to include the father wherever possible. The hygiene of pregnancy; relaxation and simple ante-natal exercises. The care and examination of the pregnant woman, including the examination of urine, the estimation of the blood pressure and increase in weight, the importance of blood tests and the significance of the findings.

(16) Nutritional requirements during pregnancy and lactation.

(17) The signs and symptoms of the diseases and complications of pregnancy; their prevention, care and treatment, including the special nursing care required by the patients suffering from diabetes, cardiac diseases, tuberculosis and nephritis.

(18) The causes of infection and its prevention; asepsis; antiseptics in midwifery and their preparation and use; disinfection of the person, clothing and appliances.

(19) The physiology, mechanism and management of normal labour; the importance of the mother's morale; the importance of the relationship between the midwife and the patient and the need for constant reassurance and encouragement, with special reference to the unmarried mother; the need for somebody to be with the patient during labour and for explaining to her that labour is progressing satisfactorily and why procedures are necessary; the emotional state of a woman in labour—hypersensitive, applying everything said as relating to herself

is maklik 'n prooi vir vrees; hoe skuldgevoelens veroorzaak kan word, bv. aborsies, doodgeboortes, abnormaliteite by die kind, afkeur in die kind.

(20) Die versorging van die pasiënt voor, gedurende en na narkose; versorging voor en na die operasie.

(21) Vroeë uitkennings van komplikasies en behartiging van abnormale geboorte.

(22) Verloskundige noodgevalle—die behartiging daarvan deur die vroedvrou totdat die geneesheer opdaag en die behartiging daarvan deur die vroedvrou wanneer dit onmoontlik is om die dienste van 'n geneesheer te verkry.

(23) Die verskeidenheid en behandeling van bloeding wat swagerskap, geboorte en die puerperium bemoeilik.

(24) Die fisiologie en behartiging van die puerperium, insluitende die uitwerking van die veranderinge in die endokrienstelsel.

(25) Komplikasies van die puerperium—die aard, oorsake, uitkennings, voorkoming en behandeling daarvan, insluitende die verpleging van die pasiënt na 'n keisersnit.

(26) Nageboortelike versorging; nageboorteklinieke.

(27) Vermindering van die sterftesyfer van pasgeborenes en suigelinge as gevolg van die instelling van onderrig in kinderwelvaart en verbeterde verloskundedienste; volharding van relatief hoë sterftesyfers by geboorte—rol wat deur voortydigheid en infeksie gespeel word en die behoefte aan korrekte ventilasie en klamreiniging; die belangrikheid van waarneming, vroeë uitkennings van abnormaliteite en die onmiddellike ontbieding van geneeskundige hulp.

(28) Die ontwikkeling en behartiging van normale babas tot die ouderdom van vyf jaar:—

(a) Die normale baba by geboorte; onmiddellike versorging na geboorte, insluitende die gebruik en misbruik van slymuittrekkers; die fisiologie van die baba gedurende die eerste paar dae; versorging van die oë en nawelstring; vernix, algemene hantering—posisie, klere, warmte; voorkoming van besmetting vanaf die tyd van die geboorte; emosionele onstabilité van die moeder, insluitende moontlike oorbesorgdheid oor die toestand van die kind, en die nodigheid daarvan om hierdie emosionele onstabilité aan die vader te verduidelik; die lewensbelangrikheid van die moeder-kind-verhouding tot geestesgesondheid, en die nadelige uitwerking van die wegneem van die baba van die moeder af.

(b) Voeding van die suigeling.

Borsvoeding. Die voordele daarvan, insluitende die instelling en bevordering van 'n goeie moeder-kind-verhouding; die fisiologie van melkafseiding en faktore wat die hoeveelheid wat geproduseer word, beïnvloed; voorgeboortelike voorbereiding; tegniek en tyd van voeding; vaste skedule of „op versoek”; moeilikhede met borsvoeding en die behartiging daarvan; aanduidings om aan die baba water te gee.

Speen.

Kunsmatige voeding. Die belangrikheid daarvan dat die voeding deur die moeder self gegee moet word; vergelyking tussen moeders- en koeimelk; die verdunning van koeimelk vir babavoedsel; die tegniek van babavoeding, insluitende buisvoeding.

(29) Voortydige babas. Oorsake, voorkoming en omgang van voortydigheid.

Spesiale versorging.—Die instandhouding van asemhaling, suurstofterapie en die gevare daarvan; regulering van liggaamstemperatuur in hospitale en huis; beskerming teen besmetting; hantering; voeding.

(30) Abnormaliteite by geboorte en die behandeling daarvan; verstikkings—soorte, oorsake en behandeling; voorkoming van kouevat en besmetting; geboortebesering. Aangebore abnormaliteite—oorsake en behandeling—of die behandeling dringend is al dan nie, redes wat mag veroorsaak dat behandeling vertraag word en die moontlike eindresultaat; optrede teenoor die ouers—moontlike herhaling by toekomstige swangerskappe en die moontlike uitwerking van 'n abnormale kind op die huishouding.

and easy prey to fear; how guilt complexes may be caused, e.g. abortions, still-births, abnormalities of the child, the rejection of the child.

(20) The care of a patient before, during and after anaesthesia; preoperative and postoperative care.

(21) Early recognition of complications and management of abnormal labour.

(22) Obstetric emergencies—their management by the midwife until the arrival of the medical practitioner and their management by the midwife when it is impossible to procure the services of a medical practitioner.

(23) The varieties and treatment of haemorrhage complicating pregnancy, labour and the puerperium.

(24) The physiology and management of the puerperium including the effects of the changes in the endocrine system.

(25) Complications of the puerperium—their nature, causes, recognition, prevention and treatment, including nursing of the patient after caesarean section.

(26) Post-natal care; post-natal clinics.

(27) Fall in the neo-natal and infant mortality following the introduction of education in child welfare and improved obstetrical services; persistence of relatively high neo-natal death rate—part played by prematurity and infection and the need for correct ventilation and moist cleaning; the importance of observation, early recognition of abnormality and the prompt summoning of medical aid.

(28) The development and management of normal infants up to the age of five years:—

(a) The normal baby at birth; immediate care after birth, including the use and abuses of mucus extractors; the physiology of the baby in the first few days; care of the eyes and cord; vernix; general handling—position, clothing, warmth; prevention of infection from the time of birth; emotional instability of the mother, including possible over-anxiety over the condition of the child, and the need to explain this emotional instability to the father; the vital importance of the mother/child relationship to mental health and the ill effects of maternal deprivation.

(b) Infant feeding.

Breast feeding. Its advantages including the establishment and promotion of a good mother/child relationship; the physiology of milk secretion and factors that influence the amount produced; ante-natal preparation; technique and time of feeding, fixed schedule or "on demand"; difficulties with breast feeding and their management; indications for giving the baby water.

Weaning.

Artificial feeding. The importance of the feeds being given by the mother herself; comparison of human and cow's milk; the modification of cow's milk for infant feeding; the technique of infant feeding including tube feeds.

(29) Premature infants. Causes, prevention and incidence of prematurity.

Special care—the maintenance of respiration, oxygen therapy and its dangers; regulation of body temperature in hospitals and in home; protection against infection; handling; feeding.

(30) Abnormalities at birth and their treatment; asphyxia-types, causes and management; prevention of chilling and infection; birth injuries. Congenital abnormalities—causes and treatment—whether treatment is urgent or not, reasons why treatment may have to be delayed and possible ultimate result; handling of the parents—possibility of recurrence in future pregnancies and the possible effects of an abnormal child on the household.

(31) Abnormaliteite en siektes gedurende die neonatale tydperk—die oorsake, voorkoming en behandeling daarvan—sianose; bleekheid; hypertrofie van die borste; edem; hoofbloedgeswel; Rh of ander hemolitiese geel-sug, en geelsug uit ander oorsake; bloeding van die pasgeborene; rukkings en stuiptrekkings, braking en die betekenis daarvan, insluitende verwysings na afwykings van die spysverteringskanaal; diaree en „hardlywigheid”; ophthalmia neonatorum; veluitslag, insluitende pemphigus neonatorum en spru—asemhalingssinfeksies—die voorkoming en bespeuring daarvan; aangifbare siektes ingevolge die Volksgesondheidswet, 1919, soos gewysig; geneesmiddels—dosisse en toediening.

(32) Die geslagsiektes by swanger vroue en by suigelinge; uitkennings; gevare; die risiko's van besmetting; behandeling.

(33) Kanker aan die baarmoeder en die borste; die tekenen en simptome daarvan; die belangrikheid van vroegtydige geneeskundige behandeling.

(34) Verslae uitskryf, verslag doen en verslae ontvang.

(35) Die gebruik van geneesmiddels en oplossings nodig by die uitoefening van verloskunde; die toestande wat die gebruik daarvan nodig maak; die gebruiksmetode of toediening; moontlike nadelige gevolge en gevare; die versorging, aantekening en nagaan van geneesmiddels.

(36) Die voorwaardes waaronder 'n vroedvrou haar beroep mag uitoefen soos bepaal in die regulasies ingevolge die Wet op Verpleging en die Volksgesondheidswet gemaak.

(37) Die maatskaplike dienste en agentskappe vir hulpverlening (insluitende bystandsverlenings ooreenkomsdig die Werkloosheidsversekeringswet), met spesiale verwysing na die ongehude moeder. Die Kinderwet, vir soverre dit betrekking het op die uitoefening van verloskunde.

BYLAE C.

BEKWAAMHEIDSERTIFIKATE IN DIE TOEDIENING VAN STIKSTOFSUBOKSIED- EN LUG-PYNSTILLING.

1. 'n Erkende opleidingskool kan goedgekeur word met die doel om die spesiale onderrig in die toediening van stikstofsuboksied- en lug-pynstilling te verskaf, indien—

- (1) die opleidingskool 'n spesialiteit-narkotiseur of 'n spesialiteit-verloskundige daaraan verbonde het;
- (2) die geneesheer, waar 'n geneesheer verantwoordelik gaan wees vir toesig oor die praktiese opleiding in besonderhede, ondervinding het in die gebruik van die erkende stikstofsuboksied- en lug-pynstillingapparaat waarop die onderrig aan die opleidingskool gegronde sal word;
- (3) die vroedvrou, waar 'n vroedvrou verantwoordelik gaan wees vir toesig oor die praktiese opleiding in besonderhede, 'n addisionele kwalifikasie in die toediening van stikstofsuboksied- en lug-pynstilling teenoor haar naam geregistreer het;
- (4) die opleidingskool oor geskikte fasiliteite en toerusting vir behoorlike onderrig van leerlinge in die toediening van stikstofsuboksied- en lug-pynstilling beskik.

2. Die minimum onderrig wat deur 'n opleidingskool verskaf moet word, is soos volg:—

- (1) Aan elke leerling moet minstens ses (6) lesing-demonstrasies deur die spesialiteit-narkotiseur of deur die spesialiteit-verloskundige aan die goedgekeurde opleidingskool verbonde, gegee word; een van hierdie lesings moet gaan oor die noodoostende by narkose en die versorging van die bewusteloze pasiënt;
- (2) elke leerling moet stikstofsuboksied- en lug-pynstilling aan minstens vyftien (15) pasiënte in kraam deur middel van 'n erkende apparaat onder algemene toesig van die spesialiteit-narkotiseur of die spesialiteit-verloskundige aan die goedgekeurde opleidingskool verbonde, en onder die besondere toesig van 'n vroedvrou teenoor wie se naam 'n addisionele kwalifikasie in die toediening van stikstofsuboksied- en lug-pynstilling geregistreer is, of van 'n geneesheer wat ondervinding het in die gebruik van die apparaat, toedien.

(31) Abnormalities and illnesses in the neo-natal period—their causes, prevention and treatment—cyanosis; pallor; hypertrophy of the breasts; oedema; cephalhaematoma; Rh. or other haemolytic jaundice, and jaundice from other causes; haemorrhage of the new born; twitching and convulsions; vomiting and its significance, including reference to anomalies of the alimentary tract; diarrhoea and "constipation"; ophthalmia neonatorum; skin rashes including pemphigus neonatorum and thrush; respiratory infections—their prevention and detection; notifiable diseases in terms of the Public Health Act, 1919, as amended; drugs—doses and administration.

(32) The venereal diseases in pregnant women and in infants; recognition; dangers; the risks of infection; treatment.

(33) Cancer of the uterus and the breasts; its signs and symptoms; the importance of early medical treatment.

(34) The writing, giving and receiving of reports.

(35) The use of such drugs and solutions as may be required in the practice of midwifery; the conditions which call for their use; the mode of use or administration; possible adverse effects and dangers; the care, recording and checking of drugs.

(36) The conditions under which a midwife may carry on her calling as laid down in the regulations made under the Nursing Act and the Public Health Act.

(37) The social services and agencies for obtaining assistance (including benefits in terms of the Unemployment Insurance Act), with special reference to the unmarried mother. The Children's Act, in so far as it affects the practice of midwifery.

ANNEXURE C.

CERTIFICATES OF PROFICIENCY IN THE ADMINISTRATION OF NITROUS OXIDE AND AIR ANALGESIA.

1. A recognised training school may be approved of for the purpose of providing the special instruction in the administration of nitrous oxide and air analgesia if—

- (1) the training school has a specialist anaesthetist or a specialist obstetrician attached to it;
- (2) the medical practitioner, if a medical practitioner will be responsible for the detailed supervision of the practical training, is experienced in the use of the recognised nitrous oxide and air analgesia apparatus on which the instruction at the training school will be based;
- (3) the midwife, if a midwife will be responsible for the detailed supervision of the practical training, has an additional qualification in the administration of nitrous oxide and air analgesia registered against her name;
- (4) the training school has suitable facilities and equipment for the proper instruction of students in the administration of nitrous oxide and air analgesia.

2. The minimum instruction which shall be provided by a training school shall be as follows:—

- (1) Every student shall be given at least six (6) lecture-demonstrations by the specialist anaesthetist or by the specialist obstetrician attached to the approved training school, one of these lectures to deal with the emergencies of anaesthesia and the care of the unconscious patient;
- (2) every student shall administer nitrous oxide and air analgesia to at least fifteen (15) patients in labour by means of a recognised apparatus under the general supervision of the specialist anaesthetist or the specialist obstetrician attached to the approved training school and under the detailed supervision of a midwife against whose name an additional qualification in the administration of nitrous oxide and air analgesia is registered or of a medical practitioner who is experienced in the use of the apparatus.

3. Die benaming „erkende apparaat” beteken ‘n apparaat wat deur die Raad erken is as ‘n apparaat wat deur vroedvroue gebruik mag word ooreenkomsdig die Raad se regulasies (sien die regulasies waaronder geregistreerde vroedvroue hulle beroep mag uitvoer—Goewermentskennisgewing No. 2297 van 29 Oktober 1948, soos gewysig).*

4. Die volgende leerplan word voorgeskryf:—

- (1) Kort geskiedenis van die gebruik van pynstilling by die geboorte, vanaf Simpson (1847) tot by hedendaagse metodes.
- (2) Definisie van analgesie, amnesia, narkose.
- (3) Verskil tussen kalmerende en pynstillende geneesmiddels.
- (4) Geneesmiddels wat in die eerste stadium gebruik word, asook die manier van toediening, tydreeëling en dosis; bv. per mond—kalimbromied, stroop van chloraal, barbituraatgeneesmiddels; onderhuids—morphien, hiossien, pethidien; rektaal—paraldehyde.
- (5) Geneesmiddels en narkosemiddels wat by die einde van die eerste stadium, die tweede stadium en die derde stadium gebruik word, bv. chloroform, trilien, eter, gas-suurstof, gas-lug.
- (6) Beginsel van gas-lug-masjiene en hoe om een daarvan te gebruik—met instruksies wat aan die pasiënte gegee word.
- (7) Die uitwerking en gevare van vlugtige narkosemiddels—veral chloroform—en voorsorgsmaatreëls wat getref moet word by toediening daarvan.
- (8) Metodes in algemene gebruik—bv. oop masker.
- (9) Voordele daarvan om ‘n nie-toksiese narkose soos stikstofsuboksied vir sowel die moeder as die kind te gebruik.
- (10) Voordele verbonde aan die „pyngestilde” toestand in teenstelling met die genarkotiseerde toestand.
- (11) Die vloeい of stikstofsuboksied uit die gassilinder na die pasiënt deur een van die gas-lug-masjiene in besonderhede.
- (12) Uitwerking op die moeder en die kind in gevalle waar stikstofsuboksied nie geskik mag wees nie, met redes.
- (13) Ineenstorting van pasiënt onder enige narkose en metodes van herlewing.
- (14) Die belangrikheid daarvan om daarop voorbereid te wees om in enige so ‘n noodgeval op te tree, nl. om ‘n mondklem, tongpinset, hipodermiese stel en hartstimulant gereed te hê.
- (15) Die Verpleegstersraad se regulasies betreffende die toediening van gas- en lugpynstilling deur vroedvroue (Goewermentskennisgewing No. 2297 van 29 Oktober 1948, soos gewysig).
- (16) Verskillende gas-lug-masjiene, bv., vir hospitaalgebruik, distriksgebruik.
- (17) Herhalingsdemonstrasie van die vloeい van gas deur die masjiene—foutie as gevolg van lekkasie, hoe om silinders om te ruil en wasters te vervang, ens.
- (18) „Moeilike” pasiënt en hoe om die beste resultate uit die metode te verkry.
- (19) Voordele verbonde aan ‘n mate van vooraf-onderrig vir verlossing in die voorgeboorte-afdelings, bv. deur die leer van oefeninge en „ontspanning” en moontlik ook deur die masjiene in die voorgeboorte-afdeling te vertoon. (L.W.—Goeie gas-lug-films moet vertoon word, indien beskikbaar.)
- (20) Die belangrikheid van die algemene behartiging van die bevalling, bv. genoegsame voedsel, warm baddens—kalmeermiddels wanneer nodig. Die gebruik hiervan om die effek van gas-lug-pynstilling te verhoog.
- (21) Gebruik van die apparaat in die derde stadium vir herstel van die perineum, indien nodig.

* Die volgende word so erken:

Minnit Gas-Lug-pynstillingapparaat.
Walton-Minnit Gas-Lugapparaat.
„Amwell” Gas-Lug-pynstillingapparaat.
„Jecta” Gas-Lug-pynstillingapparaat.

3. The term “recognised apparatus” means an apparatus which has been recognised by the Council as one which may be used by midwives in accordance with the Council’s regulations (see regulations under which registered midwives may carry on their calling—Government Notice No. 2297 of the 29th October, 1948, as amended).*

4. The following syllabus is prescribed:—

- (1) Short history of use of analgesia in labour from Simpson (1847) up to present day methods.
- (2) Definition of analgesia, amnesia, anaesthesia.
- (3) Difference between sedative and analgesic drugs.
- (4) Drugs used in first stage with manner of administration, timing and dosage; e.g. orally—Pot. Brom., Syrup Chloral, Barbiturate drugs; hypodermically—Morphia, Hyoscine, Pethidine; rectally—Paraldehyde.
- (5) Drugs and anaesthetics used for the end of first stage, second stage and third stage, e.g. Chloroform, Trilene, Ether, Gas-Oxygen, Gas-Air.
- (6) Principle of gas-air machines and how to use one of them—with directions given to the patients.
- (7) The effects and dangers of volatile anaesthetics—especially chloroform—and precautions to be taken when administering them.
- (8) Methods in common use—e.g. open mask.
- (9) Advantage of using a non-toxic anaesthetic such as nitrous-oxide for both mother and child.
- (10) Advantages of “analgesic” as compared with anaesthetic state.
- (11) The passage of nitrous oxide from gas-cylinder to patient through one of the gas-air machines in detail.
- (12) Effect on mother and child in cases where nitrous oxide might be unsuitable, with reasons.
- (13) Collapse of patient under any anaesthetic and methods of resuscitation.
- (14) Importance of being prepared beforehand to deal with any such emergency, i.e. have ready mouth gag, tongue forceps, hypodermic set and cardiac stimulant.
- (15) The Nursing Council’s regulations relating to the administration of gas and air analgesia by midwives (Government Notice No. 2297 of the 29th October, 1948, as amended).
- (16) Different gas-air machines, e.g. for hospital use, district use.
- (17) Repeat demonstration of flow of gas through machine—faults through leakage, how to change cylinders and replace washers, etc.
- (18) “Difficult” patient and how to get best results from the method.
- (19) Advantages of some preliminary education for delivery in the ante-natal departments, e.g. by teaching of exercises and “relaxation”, and possibly also by showing the machine in the ante-natal department. (N.B.—Good gas-air films should be shown if available.)
- (20) Importance of general management of labour, e.g. sufficient nourishment, hot baths—sedatives when necessary. Use of these to enhance the effect of gas-air analgesia.
- (21) Use of the apparatus in the third stage for the repair of perineum if necessary.

* The following are so recognised:

Minnit Gas-Air Analgesia Apparatus.
Walton-Minnit Gas-Air Apparatus.
“Amwell” Gas-Air Analgesia Apparatus.
“Jecta” Gas-Air Analgesia Apparatus.

5. (1) By voltooiing van die voorgeskrewe kursus word 'n leerling getoets om haar standaard van bekwaamheid in die gebruik van die erkende apparaat te bepaal. Die toets word afgeneem deur—

- (a) die spesialiteit-narkotiseur of die spesialiteit-verloskundige wat die lesings gegee het;
- (b) 'n lid van die verloskundepersoneel van die goedgekeurde opleidingskool;
- (c) die persoon in beheer van die opleidingskool of die vroedvrou wat die toesig oor die praktiese werk in besonderhede waargeneem het.

(2) Aan 'n suksesvolle leerling word 'n bekwaamheidsertifikaat deur die goedgekeurde opleidingskool uitgereik; met dien verstaande dat 'n bekwaamheidsertifikaat onder geen omstandighede aan 'n leerling uitgereik word nie alvorens 'n registrasiesertifikaat as 'n vroedvrou deur die Raad aan haar uitgereik is.

5. (1) A student, on completing the prescribed course, shall be tested to ascertain her standard of proficiency in the use of the recognised apparatus. The tests shall be conducted by—

- (a) the specialist anaesthetist or the specialist obstetrician who has given the lectures;
- (b) a member of the obstetric staff of the approved training school;
- (c) the person in charge of the training school or the midwife who has undertaken the detailed supervision of the practical work.

(2) A successful student shall be issued with a certificate of proficiency by the approved training school; provided that under no circumstances shall a certificate of proficiency be issued to a student until a certificate of registration as a midwife has been issued to her by the Council.

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CONTENTS.

No.	PAGE
Department of Health.	
GOVERNMENT NOTICE.	
R. 966. The South African Nursing Council: Regulations for the Training and Examination of Midwives	1

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