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HEAD LICE – Guidelines (Pediculosis)

In addition to the Infectious Disease Guidelines for School Nurses and Personnel compiled by the Colorado Department of Public Health and Environment, the following guidelines are provided, including a sample letter to parents of infected students. Additional teaching materials on head lice are available from Health Services.

The School's Role

According to the National Association of School Nurses, “The management of head lice should not disrupt the educational process. No disease is associated with lead lice, and in-school transmission is considered to be rare.” Therefore, if a student is found to have live head lice they should remain in class but be discouraged from direct head contact with others. Treat a head lice infestation as any other school health issue by protecting the privacy of the child and the family. If a school needs assistance in identifying head lice infestations they should contact the school nurse.

- * The most common symptom of a head lice infestation is itching, followed by a tickling sensation.
- * Lice and nits are most commonly found at the nape of the neck and behind the ears. Unhatched eggs will be within 1/4 inch of the scalp; nits attached to hairs further away from the scalp are usually just empty egg cases.
- * If there are three or more infested students in a classroom, consult your school nurse for guidance. Otherwise, only siblings and close contacts (history of same pajama party, sharing of a comb, etc.) should be checked for possible infestation. If siblings attend a different school, that school must be notified. Non-school members of student's households can be offered a free inspection of their hair at school.
- * Send the **Head Lice Letter to Parents** to any student found to have a live lice infestation. Also inform parents if their child was screened by NOT found to be infested.

Children may be excluded from school **at the end of the school day**. They should be readmitted to school after their first treatment (even if not all nits are combed out). For chronic cases, refer family to the school nurse for a specific treatment plan. Classroom lectures and discussions should be instituted to explain infestation and methods of prevention.

- * The school should give the following information to parents of infested children.
 - a. Give families the choice of obtaining a prescription pediculosis shampoo from their physician or purchasing one of several over-the-counter pediculosis shampoos. Please stress the importance of reading and following directions. The first treatment should be accompanied by an effort to remove all nits with a fine comb. There are also OTC products and combs to assist with nit removal available. Some prescription shampoos do not require nit removal; however, families may want to remove nits for aesthetic reasons. There is no scientific evidence that home remedies such as applying mayonnaise or oil, are effective.
 - b. If recommended, repeat treatment in 7-10 days. Obviously, the hair does not need to be shaved to eradicate lice.
 - c. Treat all contacts if evidence of active infestation is found. Concurrently disinfect all clothing and bed linens by washing in hot water and drying as hot as possible. Disinfect combs and brushes by soaking them in hot water. Thoroughly vacuum furniture and carpets, Fumigation of rooms is not recommended since it is costly. The safety and efficacy of fumigation have not been substantiated.

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