

Guidelines for the Management of Pediculosis (Head Lice)

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Head lice are parasitic insects that live on the human scalp and lay their eggs on the human hair shaft. Lice do not hop or fly; they crawl. Head lice are not known to transmit infectious agents from person-to-person and are not a sign of poor hygiene. Lice infestations are not a medical problem or a disease. Lice are a burden and a nuisance because their presence may cause itching, redness, sores, or scratch marks on the head and/or loss of sleep from symptoms of itching.

The Corvallis School District will use best practices in the management of head lice.

1. A student who is found with an active head lice infestation and/or nits will remain in school and in class until the end of the day but be discouraged from close, direct head-to-head contact with others. On occasion, a student may be sent home immediately when the problem is identified. The age and development of the student will be a determinant, if the student cannot refrain from direct contact with others (as in the preschool and early elementary years), as well as the extent of the infestation and symptoms.
2. The parent or guardian will be notified, either by telephone or by a letter sent home the same day lice are found, that their student has lice and that prompt, effective treatment is necessary before returning to school.
3. To prevent embarrassment or social stigma, the student's infestation will be kept confidential.
4. The parent or guardian will be given written information on head lice and recommended treatments. If they have questions or concerns regarding treatment, they will be encouraged to contact their healthcare provider for treatment advice.
5. The student will be allowed to return to school after being treated and the student has no live lice found on inspection. The district nurse, or in the absence of the district nurse, a trained school staff member will check the student before re-entering the classroom. If live lice are found, the student will be sent home. If no live lice are found, the student may return to school. Students who have nits but no live lice may remain in school. Persistent or recurrent cases of lice may be referred to the district nurse for consultation with the family.
6. If there are three or more individual cases in the same classroom within a consecutive two week period, a notification letter may be sent home to parents or guardians of students in that classroom. Parents and guardians will be encouraged to check their student for lice at home for the next two weeks and treat appropriately before returning to school.

7. The school will provide resources containing information on current practices for treatment of lice, how to identify lice and nits, home interventions for the family, and ways to prevent head lice.
8. Students with repeated infestations may require the district nurse to offer extra assistance to the family or referral to their primary healthcare provider or to the health department for additional support to manage the problem.
9. The district nurse may direct the staff in the school on interventions in a classroom with three or more infested students; vacuuming, washing of blankets and pillows; and bagging up items in plastic bags that cannot be washed (stuffed animals, costumes or hats) for up to two weeks.
10. Head lice screenings will not occur on a regular basis because screening programs have not been proven to have a significant effect on the incidence rate of head lice in the school setting. However, if a student is symptomatic for head lice, a private and confidential lice screening will be performed by the district nurse, if available, or a trained school staff member.
11. A student with head lice will be confidentially managed on an individual case basis with the goal being for the student's attendance to be unaffected due to a diagnosis of head lice.
12. Family responsibilities shall include:
 - a. Promptly treating their student with an effective treatment prior to student returning to school.
 - b. Checking family members for lice and treat if found.
 - c. Rechecking student daily for nits and remove those that are within $\frac{1}{4}$ inch from the scalp for two weeks or until nits have been removed.
 - d. Re-treating as recommended by your primary healthcare provider if over-the-counter treatment is ineffective.
 - e. Follow recommendations for Prevention and Control in the home.

Prevention and Control

Pesticide application to the school or home environment is not recommended. The risk of getting infested by a louse from sharing clothing, from the carpet, or furniture is very small. Head lice survive less than 48 hours if they fall off the person and nits cannot hatch and usually die within a week if they are not kept at the same temperature as the human scalp.

To help prevent and control a head lice outbreak in a school, community, or camp, students may be taught to avoid activities that may spread head lice.

Steps that can be taken once a student is found to be infested with head lice:

1. Avoid head-to-head (hair-to-hair) contact during play and other activities at home, school, and elsewhere (sports activities, playground, slumber parties, and camp).
2. Do not share clothing such as hats, scarves, coats, sports uniforms, hair ribbons, or barrettes.

3. Do not share combs, brushes, or towels. Disinfect combs and brushes used by an infested person by soaking them in hot water (at least 130°F) for 5-10 minutes.
4. Do not lie on beds, couches, pillows, carpets, or stuffed animals that recently have been in contact with an infested person.
5. Machine wash and dry clothing, bed linens, and other items that an infested person wore or used during the two days before treatment using the hot water (130°F) laundry cycle and the high heat drying cycle. Clothing and items that are not washable can be dry-cleaned OR sealed in a plastic bag and stored for two weeks.
6. Vacuum the floor and furniture, particularly where the infested person sat or lay. However, spending much time and money on housecleaning activities are not necessary to avoid re-infestation by lice or nits that may have fallen off the head or crawled onto furniture or clothing.
7. Do not use fumigant sprays or fogs; they are not necessary to control head lice and can be toxic if inhaled or absorbed through the skin.

Resources

1. American Academy of Pediatrics: <http://pediatrics.aappublications.org/cgi/reprint/126/2/392>
2. Centers for Disease Control and Prevention: <http://www.cdc.gov/parasites/lice/index.html>
3. National Association of School Nurses:
http://www.nasn.org/portals/0/resources/scratch_fact_parent.pdf