

Stonington Public Schools

Guidelines for Nurse Management of Head Lice in School

- 1) If teacher or other school employee views the following, the student is to be referred to the school nurse or school health aide for a pediculosis screening:
 - a. Excessive scratching of the scalp
 - b. Observation of nits or lice in hair
- 2) If nits are observed greater than 1cm from the scalp, school nurse will notify parent/guardian immediately and will provide information on parent monitoring and methods of combing and elimination without the use of chemical treatments at this time.
- 3) If live lice on the scalp are observed, school nurse will notify the child's teacher and parent/guardian immediately. The nurse will require prompt treatment with over-the-counter product and encourage parents/guardians to consult with child's pediatrician. Parents will be instructed to check others living in close quarters and will be encouraged to talk to other parents of child's close playmates and to treat only if they have live lice as well. Teacher will be instructed not to allow children to use any shared headphones, helmets, hats, combs/brushes or clothing.
- 4) At the school nurse's discretion, siblings and other persons who are felt to be in close contact with a person with live lice, will be inspected for infestation and referred if needed
- 5) The school nurse will check classmates in preschool and kindergarten only. Other classrooms may be checked at the nurse's discretion if there is a lice problem in the school.
- 6) At the school nurse's discretion, a child may be excluded if there is an apparent lack of adequate follow-through by parents or guardian in treating live lice or viable nits.
- 7) If the child with live lice is unable to be picked up by the parent/guardian during school hours, these children may ride the bus at the end of the day. If child is unable to be dismissed early, the student will be allowed to return to class for the remainder of the day.
- 8) When returning to school after home treatment with pediculicide, student will be checked by school nurse or health aide and show proof of treatment before reporting to classroom.
- 9) Students found to have non-viable nits on recheck do not need to be referred for further treatment and will be monitored at the nurse's discretion. Student may remain in school; parent will be re-instructed on importance of removing all nits. If student has a head full of nits, student should be dismissed for combing and nit removal.
- 10) Parents who have been instructed to treat their child with a pediculicide will be instructed to repeat treatment in 7 to 10 days.
- 11) If there are three or more students in a classroom that have evidence of lice, the parents/guardians of the students in that classroom will receive written notification.
- 12) These guidelines are based on rationale from the American Academy of Pediatrics
 - Lice do not spread disease
 - * Over-the-counter treatments sometimes need to be repeated 2-3 times before the lice are eradicated.
 - * Lice are mutating to resist certain over-the-counter treatments

- * The presence of nits or eggs alone is not indicative of an active infestation, especially if located greater than 1 cm from the scalp; nits greater than 1 cm from the scalp are likely not viable
- * Nits are strongly attached to the hair shaft and therefore are not likely to be transferred to others
- * Lice crawl quickly; they do not hop, jump or fly
- * Primary mode of transmission is head to head contact
- * Child with lice infestation has likely had the condition for 1 month or more
- * Removing child from the classroom causes lost lesson time, increased absences, classroom disruption, confidentiality breach, and unnecessary stigma and stress to child, family and school community
- * Mass screenings are unnecessary as nits alone are not indicative that a child will develop an active infestation; in-school transmission of lice is rare
- * Policies based on presence of nits will be inconsistent and may unnecessarily exclude children from school

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Children are not excluded for the common cold, yet that is easily transmitted in schools

References

American Academy of Pediatrics (AAP)

<https://www.aap.org/en-us/about-the-aap/aap-press-room/Pages/AAP-Updates-Treatments-for-Head-Lice.aspx>

National Association of School Nurses (NASN)

https://higherlogicdownload.s3-external-1.amazonaws.com/NASN/LL_May_101_SN.pdf?AWSAccessKeyId=AKIAJH5D4I4FWRALBOUA&Expires=1547501238&Signature=3Xqlci7%2BEJleAqmQd%2FQI7Dfms9A%3D

Centers for Disease Control and Prevention (CDC)

<https://www.cdc.gov/parasites/lice/head/schools.html>


Medical Advisor Signature

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Date

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