

## **Department of District Nursing**

---

### **Head Lice Management**

**St. Cloud Area School District 742 Head lice procedure is in accordance with current evidence-based practice and is based on recommendations from the Centers for Disease Control and Prevention (CDC), the American Academy of Pediatrics (AAP), and the National Association of School Nurses (NASN).**

**The CDC states “students diagnosed with live head lice do not need to be sent home early from school; they can go home at the end of the day, be treated, and return to class after appropriate treatment has begun. Nits may persist after treatment, but successful treatment should kill crawling lice. Head lice can be a nuisance but they have not been shown to spread disease. Personal hygiene or cleanliness in the home or school has nothing to do with getting head lice.”**

**The APP states “most cases of head lice are acquired outside of school.” The APP continues to recommend that a healthy child should not be restricted from attending school because of head lice or nits. Children can finish the school day, be treated, and return to school.**

**The NASN states “it is the position of the National Association of School Nurses that the management of pediculosis (infestation by head lice) should not disrupt the educational process. No disease is associated with head lice, and in-school transmission is considered rare. When transmission occurs, it is generally found among younger age children with increased head-to-head contact.” School transmission is actually very rare. Transmission is much more common among family members, overnight guests (sleepovers) and playmates that spend a large amount of time together.**

**The following pages contain protocol and procedure in accordance with current professional recommendations by the CDC, AAP and NASN, along with a resource from the Minnesota Department of Health regarding treatment options.**

## **Public and Non-Public Protocol for Screening and Treatment of Head Lice**

- When a case of head lice is suspected, the student will be evaluated by trained school staff.
- If the student has live lice, the parent/ guardian is notified by phone and information related to detection and elimination of head lice can be provided at that time or sent home with the student in a sealed envelope. (Minnesota Department of Health's "head lice" fact sheet). All live lice should be removed before returning to school.
- The student is allowed to stay in school until the end of the school day, unless the parent desires to pick up the student earlier. Confidentiality must be maintained.
- If nits are found, the parent is notified to keep combing them out with a lice comb at least daily for the next two weeks.
- Follow up checks may be done by trained school staff to confirm lice management efforts. A record of these head checks will be documented in Skyward as an office visit or in the student "pupil health record" in non-public sites.
- If live lice are found, the process of notification to parents/guardians begins again.
- A "working" lice log will be maintained, if needed, for tracking and rescreening purposes. This is a confidential document that should be shredded at the end of the school year.
- Entire classrooms will not be screened if a case of head lice is suspected or confirmed unless deemed necessary by the Licensed School Nurse. Siblings and students in close contact with students identified as having lice may be screened.

### **Notification Procedure**

- Elementary sites: A notification letter (NS08.04) will be sent home with each student if there are 2 or more cases of live head lice discovered in a classroom. Teachers and support staff must make every effort to maintain confidentiality as this can be very emotionally upsetting for the student.
- Secondary sites: A letter will not be sent home in the middle schools or high schools because these students change classes throughout the day and are much less likely to have head to head contact in school.

(There may be additional circumstances which may warrant sending a notification letter home or other media communication at the discretion of the Licensed School Nurse).

## DISTRICT NURSING SERVICES

### Notification of Head Lice

Dear Parents,

There has been an identified case of head lice in your child's classroom. It is not uncommon for lice to be found in school-aged children. Parents are the most important link in treating head lice. We urge parents to check your child's hair and scalp for evidence of head lice every 1 – 2 weeks. The sooner lice and their eggs are found, the easier to control. **Staff is not available to check entire classrooms.** Schools are not the only source of spread of head lice. According to the Centers for Disease Control, most transmissions occur in the home environment (friends, sleepovers, camp, etc.)

**Symptoms:** Itching of the head and neck. Look for: 1) crawling lice in the hair, usually there aren't very many; 2) eggs (nits) glued to the hair, often found behind the ears and at the back of the neck; and 3) scratch marks on the head or back of the neck at the hairline.

If your child is infested with lice it will take 7 to 10 days from when the eggs are laid until they hatch.

**Spread:** By head-to-head contact. Check your child for lice often.

Lice do not jump or fly; they crawl and can fall off the head. Head lice do not live longer than 48 hours off the head. They only lay their eggs while on the head. The eggs do not hatch if they fall off the head. Lice do not spread to or from pets.

**Incubation:** Until live lice are removed and eliminated by means of a lice killing product or effective  
**Period** alternative treatment.

**Exclusion:** None, but treatment is recommended before returning to school. A child with active infestation has likely already had an infestation for over one month. Risk of further transmission is low. Children with active head lice should be encouraged to avoid head to head contact with others

**Prevention:**

- Never share hair grooming items and hair accessories (barrettes, combs, brushes, etc.). Preventative leave-in sprays or shampoos containing mint or rosemary can be helpful (ex: Lady Bugs, Fairy Tales, Boo, etc.) These sprays may need to be re-applied every 8 hours to be effective.
- Do not share towels, bedding, clothing hats, and headgear.
- Check your child's head every month. If one person in the home has head lice, others should be checked too. Sleepovers are a common place for head lice to spread. Check your child's head after a sleepover and wash all bedding brought home from the sleepover.
- Vacuum carpets, upholstered furniture, mattresses, and seats in the car(s) thoroughly. **Insecticide sprays are NOT recommended** because this will expose household members to unnecessary pesticides.

Contact your licensed school nurse for additional questions.

District 742 Nursing Service

# Head Lice

## What are head lice?

The head louse is an insect that can infest people. These tiny insects (about 1/8" long) make their home in human hair and feed on blood. Head lice multiply rapidly, laying small greyish-colored, oval-shaped eggs (called nits) which they glue to the base of the hair, close to the scalp. Head lice are not known to spread disease.

## Who can get head lice?

Anyone can get head lice. They are not a sign of being dirty. Most people don't know they are infested until they see the nits or lice. They are found throughout the world, most commonly on children.

## How does a head lice infestation occur?

Head lice have no wings and do not fly or jump, but they can crawl or run through hair quickly. Most commonly, head lice are spread by direct head-to-head contact with an infested person. They may also be spread by sharing personal items such as combs, brushes, other hair-care items, towels, pillows, hats, and other head coverings. Dogs, cats, and other pets do not spread head lice.

## What are the signs of a head lice infestation?

Look closely for nits along the hairline at the back of the head and neck and behind the ears. Nits should not be confused with an accumulation of hair spray, hair gels, or dandruff, which can be easily flicked off the hair; nits cannot because they are firmly attached to individual hairs.

One telltale sign of head lice is a persistent itching of the scalp, which is sometimes accompanied by infected scratch marks or what appears to be a rash.

If you have questions about the diagnosis of head lice, call your doctor.

## How do you treat head lice?

The recommended treatment includes using either an over-the-counter (OTC) or prescription medicated (lice-killing) product. Effective head lice treatments include products such as:

- "Nix," a cream rinse product available OTC which contains permethrin, a synthetic insecticide
- Many brands of pyrethrin-based shampoo products ("Rid," "R&C," "Triple-X," etc.) which are also available OTC
- "Ovide," a prescription drug containing malathion.

With all of these products, the lice are often killed with one treatment; however, a second treatment seven to 10 days later is often necessary to ensure all of the nits are killed. Because of increasing numbers of reports of treatment failure with the OTC products, make sure to carefully follow all the instructions on the product label and talk to your health care provider if lice persist. Additional prescription alternatives are available.

## What are some examples of alternative treatments?

Many alternatives to OTC or prescription head lice control products have been suggested. Although there is little scientific information to support these methods, successful treatment

## HEAD LICE

has been reported using several alternative treatments when conventional treatments haven't worked, or when there is a concern about the toxicity of using head lice control products repeatedly. The Minnesota Department of Health cannot recommend these treatments without further evidence of their effectiveness. However, we feel it is important to mention some of the more commonly used methods.

The alternative treatments listed below are referred to as suffocants. When applied, the treatment may suffocate and/or create a habitat unfavorable to the head lice.

- Petroleum jelly (Vaseline®)
- Mayonnaise
- Oil (e.g. vegetable, olive, or mineral)

Manual removal of lice and nits by parents or professional services may be an effective supplement or alternative to OTC and prescription treatments.

### How should you clean up the environment?

Head lice cannot survive off the human body for more than two days. They do not reproduce off the body. They do not live on pets. Any nits that fall off the head will not hatch or reattach. While most head lice control should focus on treating infested people, some simple things can be done in the environment:

- Wash bedding in hot water (above 130° F) and dry in a hot dryer. Wash and dry recently worn clothing (including coats, caps, and scarves) in hot temperatures.
- Clean combs, brushes and similar items by heating in water of at least 130° F for 10 minutes.
- Clean floors, carpeting, and furniture by thorough vacuuming only. The use of insecticide sprays is not recommended.

Cleaning efforts should happen on the day of the first lice treatment and whenever live lice are found on the patient's head. Focus on cleaning areas and items the infested person had contact with 48 hours before treatment.

### How do you prevent a head lice infestation?

Parents are encouraged to check their children's heads for lice on a regular basis throughout the year. Families should not depend on someone else to check a child's head – this may delay treatment. Remember, if one person in a family, camp, or school has head lice, there's a chance others will too. Check everyone, and use the same treatment if necessary. Treating people without lice or nits is not recommended.

### How should schools control head lice?

Schools should encourage parents to check their children regularly for lice at home. Wide-spread head lice screening efforts by schools have not been shown to be effective.

When a case of head lice is suspected, parents should be advised at the end of the day to check their children for lice and treat them if an infestation is found. Children with head lice infestations can go to school.

Minnesota Department of Health  
Vectorborne Diseases Unit  
PO Box 64975  
St. Paul, MN 55164  
651-201-5414  
[www.health.state.mn.us](http://www.health.state.mn.us)

1/31/2018

*To obtain this information in a different format, call: 651-201-5414. Printed on recycled paper.*