

Dear Families of St. Michael's,

We are writing to share important information about head lice (pediculosis), including how to recognize it, how to treat it at home, and how our school addresses head lice in a way that supports student health, learning, and well-being. Our approach follows current recommendations from the Centers for Disease Control and Prevention (CDC), the American Academy of Pediatrics (AAP), the National Association of School Nurses (NASN), and the California Department of Public Health (CDPH).

What Are Head Lice?

Head lice are tiny insects that live on the scalp and feed on small amounts of blood. They are most commonly found behind the ears and at the nape of the neck. **Head lice do not transmit disease and are not related to personal hygiene or cleanliness. Anyone can get head lice.** In the majority of cases, head lice spread through direct head-to-head contact. Less commonly, they may be transferred through recently shared personal items such as hats, brushes, or combs.

Helpful Definitions

- **Head louse (singular) / lice (plural):** A small, wingless insect that lives on the human scalp and hair and feeds on blood.
 - **Pediculosis (pediculosis capitis):** The medical term for a head lice infestation.
 - **Active infestation:** The presence of live, crawling head lice. Viable nits close to the scalp may indicate a recent or current infestation but do not always mean live lice are present.
 - **Nit:** A lice egg attached to the hair shaft, usually close to the scalp.
 - **Viable nit:** A nit that is alive and capable of hatching, typically found within ¼ inch of the scalp.
 - **Non-viable nit:** A nit that is dead or empty and cannot hatch. These are often found farther from the scalp and may appear white or clear.
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Signs to Look For

Please check your child's hair regularly for:

- Small, crawling insects (live lice)
- Tiny, oval eggs (nits) tightly attached close to the scalp
- Itching or scalp irritation, **especially around the ears and neck**

Use good lighting and a fine-toothed comb to carefully part the hair when checking.

What to Do at Home

If your child is found to have **live head lice**:

- Begin treatment using an over-the-counter or prescription lice treatment. Follow the product directions or the advice of your healthcare provider or pharmacist.
 - Use a fine-toothed nit comb every 2–3 days for 2–3 weeks, or until no live lice are found. Removing nits can help reduce confusion about whether treatment has been successful, but complete nit removal is not required.
 - If recommended for the product you are using, repeat treatment according to the package directions (many products require a second treatment 7–10 days after the first).
 - Wash clothing, bedding, towels, hats, and other washable items used during the 2 days before treatment in hot water and dry them on high heat. Items that cannot be washed may be dry cleaned or sealed in a plastic bag for 2 weeks.
 - Soak combs and brushes in hot water (at least 130°F) for 5–10 minutes.
 - Vacuum floors and upholstered furniture where the person with lice sat or rested. Extensive cleaning is not necessary, and fumigant sprays or fogs should not be used.
 - Check household members and other close contacts for live lice. Treat only those who have live lice or who share a bed with the infested person. Preventive treatment is not recommended for people without evidence of lice.
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Prevention Tips

- Avoid head-to-head contact during play.
- Do not share personal items such as hats, hairbrushes, helmets, or headphones.
- Regular combing, particularly with a specialized fine-toothed metal nit comb, can assist in early detection and removal of lice.
- During periods when head lice are circulating in the community or school, check your child's hair **every 2–3 days** for early detection.

School Attendance and Student Well-Being

Current guidance from the CDC, AAP, NASN, and CDPH does not support "no-nit" policies or routine exclusion from school for students with head lice. Students with head lice are otherwise healthy and, in most cases, may remain in school for the rest of the day and return after appropriate treatment has begun. **These recommendations help minimize unnecessary absences while reducing stigma and supporting student well-being.**

Research shows that excluding students from school because of head lice:

- Does not reduce the spread of head lice.
- Has not been shown to decrease transmission in schools.
- Results in unnecessary absences and lost instructional time.
- May negatively affect academic progress.
- Can contribute to stigma, embarrassment, anxiety, and social distress.

Children are more likely to acquire head lice during sleepovers, play dates, and family gatherings than in the classroom.

How Our School Responds

To support student health while minimizing unnecessary disruption to learning, our school follows evidence-based recommendations for managing head lice.

- If a student is found to have **live head lice** at school, the parent or guardian will be notified. In most cases, the student may remain in school until the end of the day. At the parent or guardian's discretion, the student may be picked up early to begin treatment.
- Students may return to school after appropriate treatment has begun. Students are **not** excluded because of nits alone.
- If live lice continue to be observed after treatment has been initiated, the parent or guardian may be contacted to discuss follow-up treatment recommendations.
- Routine classroom or school-wide head lice screenings are **not** recommended by public health authorities because they have not been shown to reduce transmission, may miss early infestations, can create false reassurance, require significant staff time, and are less effective than routine home checks by parents or guardians. For these reasons, the school does not conduct routine mass screenings.

- However, in consultation with the school nurse, the school may conduct limited head checks when there are multiple confirmed cases or other circumstances that warrant additional monitoring.
- Because head lice management is primarily the responsibility of the parents/guardians, the school does not routinely send class-wide notifications for individual cases. Families may be notified when there is a severe or ongoing outbreak or when broader communication is determined to be necessary based on direct reported cases.

Exceptional Circumstances:

The school reserves the right to temporarily exclude a student when there is evidence of an untreated or persistent untreated infestation that is not being appropriately addressed, or when the infestation is so extensive that it interferes with the student's comfort, participation, or well-being at school.

School Head Lice Information

Attached here are links for how to examine for head lice: [Nit Combing Guide - CDPH](#), [How to Examine for Head Lice - CDC](#)

Attached here are links for different local treatments, as well as over-the-counter treatments: [California Lice Clinic](#), [Hair Fairies](#), [Super Lice Lady](#), [Over the Counter and Prescription Treatments](#)

Attached here is a link to magnifying glasses that can be helpful when examining for head lice: [Magnifying Glasses](#)

Thank you for your partnership in supporting student health, attendance, and learning.

Sincerely,

Kim Garst, PhD, BSN, RN

References

American Academy of Pediatrics. (2021). *Head lice*. In D. W. Kimberlin, M. T. Brady, M. A. Jackson, & S. S. Long (Eds.), *Red book: 2021–2024 report of the Committee on Infectious Diseases* (32nd ed.). American Academy of Pediatrics.

California Department of Public Health, Division of Communicable Disease Control. (2024). *Guidance on head lice prevention and control for K–12 schools and child care facilities*. <https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/SchoolGuidanceonHeadLice.pdf>

California School Nurses Organization. (2022). *Pediculosis management in schools (position statement)*. <https://csno.memberclicks.net/position-statements>

Centers for Disease Control and Prevention. (n.d.). *Head lice*. <https://www.cdc.gov/lice/about/head-lice.html>

Centers for Disease Control and Prevention. (n.d.). *Head lice: Prevention and control*. <https://www.cdc.gov/lice/prevention/index.html>

Centers for Disease Control and Prevention. (n.d.). *Head lice: Treatment*. <https://www.cdc.gov/lice/treatment/index.html>

National Association of School Nurses. (2022). *Pediculosis management in the school setting (position statement)*. <https://www.nasn.org/nasn-resources/professional-practice-documents/position-statements>

HealthyChildren.org (American Academy of Pediatrics). (n.d.). *Head lice: Signs, symptoms, and treatment*. <https://www.healthychildren.org/English/health-issues/conditions/from-insects-animals/Pages/Signs-of-Lice.aspx>