

HEAD LICE PROTOCOL (Pediculosis Capitis)

PURPOSE: To define the steps taken by Natrona County School District (NCSD) in the event of a suspected case of head lice.

RATIONALE: The goal of NCSD Health Services is to keep students in the classroom. Head lice are not a risk for carrying communicable diseases, live 18-24 hours on a human host, and are primarily spread through direct head-to-head contact; therefore, the following steps will be completed:

1. Students suspected of having head lice will be sent to the school health office for evaluation by the nurse or trained designee.
2. A thorough inspection for live lice and nits will be completed.
3. If live (crawling) lice are noted, the school nurse may use manual methods of lice removal at his/her discretion. The parent/guardian will be notified as appropriate by phone and the Head Lice Notification Letter will be sent home with the affected student at the end of the school day.
4. The parent/guardian will be instructed to inspect other household members for live lice.
5. The parent/guardian will be provided with information on the biology of head lice.
6. The parent/guardian will be provided with information and instruction on methods for elimination of head lice focusing on inspection for LIVE (crawling) lice. Information provided will be current evidence based best practice.
7. The parent/guardian will be instructed to clean items that have been in direct contact with the head of the affected student within 48 hours prior to treatment. Information will be sent home, including instructions about laundering clothing, bedding, and other items that may have come in contact with the affected student's head.
8. The parent/guardian may be asked if the child has been treated.
9. The student will be periodically re-inspected for live lice by the school nurse or trained designee as needed.
10. Classroom checks and/or mass screenings will NOT be conducted, as these practices have not been proven to reduce the incidence of head lice in the school setting.
11. Students will NOT be excluded from school.
12. Always protecting confidentiality, a letter indicating that lice have been detected in the classroom **may** be sent home when the number of incidents in a classroom reaches or exceeds 20-25% of the class population. The letter will include facts, as well as detection and treatment information, including the admonition that no child should be treated for head lice unless there is confirmation that the child actually has an infestation. Distribution of a letter is at the discretion of the building nurse, in consultation with the building principal and/or the NCSD Coordinator of Nurses.

This position statement along with the materials developed and given to parents, staff and the community will be reviewed at least annually to ensure that current evidence based best practices are reflected. The most current materials will be maintained by the NCSD #1 Nursing Coordinator's Office.

References:

American Academy of Pediatrics:

<http://pediatrics.aappublications.org/content/126/2/392.full?sid=e0db2bd1C55fdC4e64Caf14C61cb3ba42684>

National Association of School Nurses:

<http://www.nasn.org/ToolsResources/HeadLicePediculosisCapitis/HeadfirstLiceLessons>

CDC Division of Parasitic Disease:

<http://www.cdc.gov/parasites/lice/head/>

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