

TOWN OF FAIRFIELD HEALTH DEPARTMENT

Manual: School Health Program **Approved by:** Board of Health; School Medical Advisor

Section: Communicable Disease **Date:** August 11, 1997; February 14, 2000;
February 11, 2002; February 11, 2008,
June 9, 2014

Policy/Procedure: Pediculosis Capitis **Pages:** 2
(Head Lice)

Procedures for Pediculosis Prevention and Management

At the beginning of each school year information regarding head lice (prevalence, how to identify and how to treat), will be posted on the school web site along with links to additional resource information.

- If head lice are suspected, the student should be sent to the school nurse for identification
- When a child is identified with pediculosis capitis (head lice) during the school day, parent will be contacted. The child will be allowed to finish the school day. The parent will be given the option of picking up the child before the end of the school day if they wish
- The school nurse will give parent the “Head Lice Fact Sheet” and instructions, “Treating Head Lice Infestation”. The parent will also be given the “Verification of Head Lice Treatment” form to be returned to the school nurse. Provide any additional information needed (e.g., demonstration of how to check for nits)
- Upon return to school after treatment child will be re-checked by the school nurse. This check should take place at least 12 hours after the completion of treatment. If live lice are found parent will be advised to consult the child’s physician for alternate treatment measures.
- The student will be re-checked by the nurse in seven to ten days from the time of first treatment for signs of re-infestation.
- If there are close contacts (e.g., siblings in another class, close friends, locker mates), the close contacts will be checked. If the close contact is identified as having pediculosis proceed as above.
- If siblings attend another Fairfield school, notify the school nurse so that those students can be checked.
- When a child has been treated for head lice and re-infestation occurs, advise parent to consult the child’s physician for treatment options.
- School nurses will assess individual students for active infestation of head lice when deemed appropriate by the school nurse (e.g., student complains to nurse of an itchy scalp)

- Mass screening of students will be conducted only under special circumstances deemed appropriate by the school nurse in consultation with the nursing supervisor. For example, screening of an entire classroom in grades PreK-K may be deemed appropriate if several students in this young age group are identified with an active infestation.
- Parent Notification – When a new case of head lice occurs in an elementary school, the nurse will notify parents of all children in the classroom where the case was identified. Parent notification, once made, need not be repeated more often than every thirty days.
- School Nurse will emphasize to parents that they should:
 - **Notify parents/guardians of children with whom the infested child may have recently had close contact or shared personal items.**
 - Treat appropriately. Follow instruction of the OTC lice treatment based on pediatrician/health care provider recommendation.
 - Examine all individuals residing in the same household for signs/symptoms of infestation.
 - *Not* treat other family members if an active case of lice is not found.
 - Inspect, comb and "nit-pick" hair to remove live lice and nits on a daily basis. Do this until the student is clear of both live lice and nits. Combing when the hair is wet after shampooing or with hair conditioner may slow down live lice, making it easier to find them.
 - Bring their child for a follow up check to the school nurse the morning after treatment to make sure the child no longer has an active case of head lice.
 - Inspect their child's scalp/hair regularly, at least weekly during the school year and always after summer camp and sleepovers.
 - Notify the school nurse if your child becomes infested again or if you have questions.