

MANAGING HEAD LICE IN THE SCHOOL AND CHILD CARE

While the school nurse acts as the resource for educational material and coordinates treatment plans, managing head lice in the school setting is a responsibility that should be shared by the school nurse, teachers, school administrators, and families. When schools react calmly with consistent evidence-based information, parents focus on treatment and avoid becoming unduly anxious.

General classroom screening is not recommended. Regular screening for live lice has not been proven to have a significant effect on the incidence of head lice in a school community over time .

Children will be screened at school if lice are suspected or as a result of a reported case (See Scott County Head Lice Plan 2013).

The screening activities will be at the discretion of the trained health professional in the school, preferably a school nurse.

Other students **will not** be notified if there is **one** case in a classroom.

Families will be notified if there are **multiple** cases of lice in a classroom.

HEAD LICE



Head lice are blood-sucking insects about the size of a sesame seed and are tan to grayish-white in color. The tiny, wingless insects attach themselves to the skin on the head and neck area and lay eggs (nits) on the base of hair shaft.

Head lice do not cause disease, but they can itch and irritate the scalp. Excessive scratching can cause bacterial infection.

Head lice are spread mainly by direct head-to-head contact with a person who already has head lice.

Lice don't fly or jump; they move by crawling. Because children play so closely, often with heads touching, they can easily travel from child to child.

Head lice are most common among children attending child care, elementary school, and household members of children who have lice.

WHAT TO LOOK FOR:

You can check for head lice or nits by parting the hair in several spots. Use a magnifying glass and a bright light to help spot them.

Lice can move fast so it may be easier to spot the nits. Nits look like dandruff, but you can identify them by picking up a strand of hair close to the scalp and pulling your fingernail across the area where you suspect a nit. Dandruff will come off easily, but nits will stay firmly attached to the hair.

You should examine the child's head, especially behind the ears and at the nape of the neck, for crawling lice and nits.

It may take 4-6 weeks for itching to appear the first time a person has head lice.

IN THE CLASSROOM

Children diagnosed with 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. Transmission of lice by environmental surfaces is less likely than transmission by head to head.

Classroom carpeting, overstuffed furniture, and pillows that come in contact with the head of someone with head lice should be vacuumed.

Pediculicide sprays should not be used. Sprays are expensive and have little effect on lice. They are hazardous to children with asthma and pets.

Non washable items can be sealed in plastic bags for 10-14 days.

Remind students to avoid sharing combs, brushes, and hats.

Maintain confidentiality of student.

TIPS TO SHARE WITH PARENTS:

Most importantly, keep calm. Remember, this is a very common condition among young school children. Head lice have nothing to do with the cleanliness of their home.

FDA-approved treatments for head lice include both over-the-counter and prescription drugs in the form of shampoos, creams and lotions. Many head lice products are not for use in children under the age of two, so they should read the label carefully before using a product to make sure it is safe to use on their child.

Apply the product only to the scalp and the hair attached to the scalp ---not to other body parts.

Use medication exactly as directed on the label and never more often than directed unless advised by their health care professional.

Use treatments on children only under the direct supervision of an adult.

After rinsing the product from the hair and scalp, use a fine-toothed comb or special “nit comb” to remove dead lice and nits.

Disinfect combs and brushes used by a person with head lice by soaking them in hot water (at least 130 degrees) for 5-10 minutes.

Machine wash and dry clothing, bedding and all items that have been in contact with the head of a person with lice in the 48 hours before treatment, using hot water and a high heat drying cycle.

Place stuffed animal, plush toys and other non-washable items in a trash bag. Seal and do not open for two weeks.

Vacuum the floor and furniture, especially where the person with lice sat or lay. Head lice survive less than one to two days if they fall off the scalp and do not have blood to feed on.

Removal of all nits after successful treatment is not necessary to prevent further spread but may be done to reduce diagnostic confusion and the chance of unnecessary treatment. Some experts recommend the manual removal of nits that are attached within ¼ inch of the base of the hair shaft.

After finishing treatment with lice medication, check everyone in the household for lice after one week.

If live lice are found, contact your health care professional. If crawling lice or nits are found, all household members should be examined for crawling lice every two-three days. Persons with live (crawling) lice or nits within ¼ inch or less of the scalp should be treated.



References

Centers for Disease Control and Prevention. (2010). *Head Lice Information for Parents*. <http://www.cdc.gov/parasites/lice/head/parents.html>

Centers for Disease Control and Prevention. (2010). *Resources for Health Professionals*. http://www.cdc.gov/parasites/lice/head/health_professionals/index.html.html

National Association of School Nurses (2011) Position Statement: *Pediculosis Management in the School Setting*. www.nasn.org

Scott County Area Schools and Community Head Lice Management Plan (2013) <http://www.scottcountyiowa.com/health/pub/clinical/lice>

Selekman, Janice. (2012). *School Nursing: A Comprehensive Text*. Philadelphia: F.A. Davis Company

U.S. Food and Drug Administration, FDA Consumer Health Information. (2009). *Treating Head Lice*. <http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm171730.htm>