

## **Protocol for Pediculosis**

### **What are head lice?**

Head lice are tiny parasites that live on the human scalp and feed on human blood. They are approximately the size of a sesame seed. They do not have wings and, therefore, cannot fly. They also do not jump. They do, however, move quickly. The eggs of the louse, which are called "nits", are teardrop shaped and approximately half the size of the adult louse. The nits are attached to the hair shaft with a waterproof, cement-like substance from the adult female. Nits cannot be simply washed or brushed out of the hair.

They are simply a nuisance. Head lice do NOT carry disease and are not a sign of poor hygiene. They are spread by close head to head contact. The human head is the only place that head lice can live and survive.

### **How are head lice spread?**

Head lice are usually transmitted through close personal contact with another infested individual or through use of common combs, brushes, and other grooming aids; through sharing hats, caps, coats.

### **How do you eliminate head Lice?**

Treatment is directed at the affected individual and his personal articles (e.g., caps, combs, brushes, towels, and bedding). Fumigation or use of insecticides in the home, school, or school buses is not recommended.

Individual treatment usually requires using an over-the-counter (OTC) or prescription medication and a nit (head lice egg) comb.

**WARNING:** Do not use a creme rinse or combination shampoo/conditioner before using lice medicine. Do not re-wash hair for 1-2 days after treatment.

Follow these treatment steps:

1. Before application of the OTC or prescription treatment, remove all clothing from the waist up.
2. Apply the lice medicine according to label instructions. If your child has hair longer than shoulder length, you may need to use two bottles. It is important to pay special attention to instructions on the bottle regarding how long the medication should be left on and whether rinsing the hair is recommended after treatment.
3. After treatment, have the affected person put on clean clothing.
4. Nit combs, often found in lice medicine packages, should be used to comb nits and lice from the hair shaft.
5. After treatment, check the hair every 2-3 days, and comb with a nit comb to remove nits and lice as necessary. Continue to check for 2-3 weeks until you are sure all lice and nits are gone.
6. If an OTC medicine was used, retreat in 7-10 days. If the prescription drug Malathion was used, retreat in 7-10 days ONLY if crawling bugs are found.

## **B. Decontamination of Personal Articles and Environment:**

Treat the household: If head lice fall off of a person and cannot feed, they will not survive very long. It is not necessary to spend a lot of time or money on housecleaning activities. You can help avoid re-infestation by lice that may have recently fallen off the hair or crawled onto clothing or furniture by following these steps.

1. To kill lice and nits, all washable clothing and bed linens that the infested person wore or used during the 2 days before treatment should be machine washed in hot water (130°F). After the hot wash, the laundry should be dried at high heat for at least 20 minutes.
2. For clothing that is not washable, have it dry cleaned. (e.g., coats, hats, scarves).
3. All clothing, stuffed animals, comforters, etc. that cannot be washed or dry cleaned can be stored for 2 weeks in a plastic bag that is sealed with tape.
4. Combs and brushes can be soaked for 1 hour in rubbing alcohol, Lysol\*, or wash with soap and hot (130°F) water.
5. Vacuum the floor and furniture. There is a small risk of getting re-infested from a louse that has fallen onto the carpet or onto a sofa. Vacuum the places where the infested person usually sits or lays, spending a lot of time on this is not necessary. Do not use fumigant sprays; they can be toxic if inhaled or absorbed through the skin.

## **C. Prevent Re-occurrence:**

The most common way to spread lice is through direct head-to-head contact. It is less likely for lice to spread by crawling onto clothing or belongings. To control head lice outbreaks in a community, school or camp setting, children can be taught to avoid activities that are likely to spread lice.

1. Avoid head-to-head contact during play at school and at home (on a playground, a sleep over party, at camp, and on sport outings).
2. Do not share any items that may have had contact with someone else's head (e.g., hats, scarves, hair ribbons, coats, sport uniforms).
3. Do not share combs, brushes, or towels.
4. If you are aware that someone has a lice infestation, do not lie on the beds, couches, pillows, carpets, or stuffed animals that the infested person may have had contact with.

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.

Remember 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.

Both the American Academy of Pediatrics (AAP) and the National Association of School Nurses (NASN) advocate that "no-nit" policies should be discontinued. "No-nit" policies that require a child to be free of nits before they can return to schools should be discontinued for the following reasons:

Many nits are more than ¼ inch from the scalp. Such nits are usually not viable and very unlikely to hatch to become crawling lice, or may in fact be empty shells, also known as 'casings'.

Nits are cemented to hair shafts and are very unlikely to be transferred successfully to other people.

The burden of unnecessary absenteeism to the students, families and communities far outweighs the risks associated with head lice.

### **Protocol**

1. A disposable applicator may be used to assess the student.
2. If live lice or nits 1 cm from the scalp are found siblings will be checked.
3. Parents/guardians will be notified for student with live lice or nits 1 cm from the scalp. The student may remain in the classroom until the end of the day.
4. The school nurse will provide guidance on treatment to the parent/guardian. The school nurse will provide the parent with easy reference guide.
5. The school nurse will re-check the student the following school day. If found to have live lice, the student will be sent home.
6. Parents/guardians may be asked to supply the school nurse with proof of treatment for repetitive cases of pediculosis.
7. The school nurse will re-check the affected student again in 7-10 days.
8. Letters are no longer sent home.
9. Annually information on lice will be sent home to all parents/guardians.

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<https://www.cdc.gov/parasites/lice/head/schools.html>

<http://www.portal.ct.gov/DPH/Infectious-Diseases/ID-Home/Head-Lice---Fact-Sheet>

<https://www.cga.ct.gov/2016/rpt/pdf/2016-R-0329.pdf>

[AAP Updates and Treatments for Head Lice](#)

<http://pediatrics.aappublications.org/content/pediatrics/135/5/e1355.full.pdf>

[Head Lice Parent Handout](#)

[Lice Lessons Parent Handout](#)