

# Head Lice Guidelines

Seattle Schools Health Services

Head lice infestation is a common public health nuisance in the United States among children between the ages of 3-12 years. It is not considered a disease and for the most part does not cause illness.

**Head lice appear as an infestation on the head, eyebrows, or eyelids. Signs and symptoms of head lice infestation include:**

- Itching.
- A tickling feeling of something moving in the hair.
- Detection of live lice and/or nits.
- Sores or scratch marks on the head caused by scratching.

The school nurse will train school staff at each school to perform lice screening of suspected students.

## **School Staff Responsibility:**

Identify students with signs of head lice infestation. Notify parent/guardian of the suspected case. Provide parent/guardian a list of care options (see Head Lice Letter), including referral for secondary infection, if suspected. Avoid transmission of live lice by instructing students to never share headgear, combs or brushes, and to avoid head-to-head contact.

## **Procedure to be followed:**

1. A student who is found with lice may remain in school and in class until the end of the day. Discretion should be used regarding individual cases. Students should be discouraged from close head-to-head contact with others.
2. Notify parent/guardians of the infestation. Provide parent/guardian information on the care options for treatment. Notification letter with treatment options should be sent home with student.
3. Siblings and close contacts of a student with live lice should be examined.
4. Remember to keep the student's identity confidential as to avoid undue embarrassment.
5. The student may return to school when the parent/guardian reports having treated the student and the student has no live lice are found on inspection.

6. The student should be re-examined by school staff 8-10 days after returning to school to assure that there are no more live lice. The parent/guardian should be asked to continue to check at home and continue to remove nits.
7. Students with repeated infestations may require the school nurse to offer extra assistance to this family or referral to their primary care provider or public health for additional support to manage the problem.
8. In the elementary schools, when an untreated infested student is identified with live lice or nits, send the lice letter home to classmates in his/her room or grade level.
9. When there is evidence of an OUTBREAK in a classroom (such as three students with no close contact except at school, within a consecutive 2-week period) the whole class should be screened by trained staff.
10. In chronic infestations, the school staff may offer extra assistance to provide practices to prevent the spread of lice. This could be the fostering of good personal hygiene practices: possibly combing out nits at school if parent agrees and student is cooperative in order to ensure free and appropriate public education and reduce absences.

**The above guidelines are based on OSPI's Infectious Disease Control April 2004, p.61-65. Please see guidelines for additional information.**

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