LEXINGTON PUBLIC SCHOOLS
Lexington, Massachusetts
School Health Services

Protocol for the Management of the Student with Head Lice

The child's right to privacy and confidentiality is the foundation for head lice management in schools. The school nurse's role is to ensure confidentiality, support families, and educate the community.

LPS Health Services will periodically remind and educate parents via newsletters, student handbook, and brochures on the importance of checking for lice and informing their child's school nurse if the child has head lice.

Mass screenings are disruptive and not warranted. They increase the potential for lice phobia and unnecessary use of pediculicides. Symptomatic individuals should be referred discreetly to the school nurse.

Students who are discovered to have an **active case of head lice during school hours** will have the following actions taken:

The School Nurse Will:

- Examine the student's head using a magnifier lamp. If live (crawling) lice and/or nits are found the school nurse will contact the parent/guardian to set up a meeting before the end of the school day. The meeting will discuss identification; advice on control measures and an offer to inspect the parent's head. The student may return to class for dismissal with the regular school population. A parent may request an early dismissal to start treatment.

- Give the parent/guardian informational material on how to handle head lice. Encourage parent to notify other parents of student's direct contacts. The school nurse will not recommend a specific pediculicidal treatment, either prescription or non-prescription; but advise parents/guardians to consult with their primary care provider or pharmacist for advice on proper use of approved treatment. Parents will also be encouraged to review the CDC's website for head lice treatment.

- Document examination (Pediculosis Exam), recommendation for treatment/follow-up and subsequent actions taken in the electronic health record.

Upon Return To School the School Nurse Will:

- Re-examine the student with the parent/guardian present if possible and determine the initial success of the recommended treatment. Assist the parent/guardian in identification and removal if nits/lice are found. If nits are found, and they are less than the previous examination, the student may attend class.

- If the infestation is unchanged, the parent/guardian will be instructed again on nit removal with return demonstration required.

- Document re-examination in the electronic health record. Schedule a "Follow-up Visit" or "Reminder" to re-screen the student in seven to ten calendar days.

Protocol Review
Review and revision of this protocol by the School Physician and Nurse Leader or designee shall occur as needed, but at least every two years.

References

Center for Disease Control. Lice – General Guidelines. Retrieved from http://goo.gl/2obbks

National Association of School Nurses. (2011) Position Statement: Pediculosis Management in the School Setting. Retrieved from http://goo.gl/55DgEf

Pediatric Nursing, Volume 40, No. 5 September-October 2014, pgs. 227-235. "Demystifying Pediculosis: School Nurses Take the Lead." Pontius, Deborah J.

American Academy of Pediatrics, Clinical Report - Head Lice, July 2010. Downloaded from www.pediatrics.org. Frankowski, Barbara L.

American Academy of Pediatrics, School Health Policy and Practice, 6th edition (2004) pgs. 34-35; 43-44.

Selekman, Janice. School Nursing: A Comprehensive Text. (2013) pgs. 688-690.

Sheetz, A. H. & Goodman, I. F. (Eds.). (2007). *The Comprehensive School Health Manual.* Boston, MA: Massachusetts Department of Public Health.

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