

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
 DEPARTMENT OF HEALTH



*Safe and Healthy Lives in Safe and Healthy Communities*

**HEAD LICE - PRINCIPLES THAT SHOULD GUIDE SCHOOL POLICIES**

USEFUL INFORMATION	BASED ON CURRENT MEDICAL KNOWLEDGE, THE FOLLOWING STEPS ARE SAFE AND EFFECTIVE PROTOCOLS
<ul style="list-style-type: none"> <li>▪ One of the worst problems of head lice is adult attitudes.</li> </ul>	1. A single round of mass screening (lice checks) is recommended in Sept-Oct to detect children entering school with infestation,
<ul style="list-style-type: none"> <li>▪ Having head lice is not a serious medical condition.</li> </ul>	2. These children should be sent home at the end of the day with an educational pamphlet on lice and nits for the parent, and detailed instructions for two-step (optionally day 0 and day 7 to 10) home treatment and nit removal..
<ul style="list-style-type: none"> <li>▪ Over treatment with lice treatment shampoos is more serious than head lice.</li> </ul>	3. These children may return to school as soon as the first treatment is completed.
<ul style="list-style-type: none"> <li>▪ Irrational reactions to head lice can lead to fumigating classrooms, school, buses, etc.. This is expensive and unnecessary</li> </ul>	4. Do not check for nits (dead or alive) or enforce a no-nit policy for those who have been treated. It is not productive.
<ul style="list-style-type: none"> <li>▪ Much information about head lice is based on old, unproven information generated more than 80 years ago, some of it propagated by the companies who profit from the sale of lice shampoos and sprays</li> </ul>	5. Repeated rounds of mass screening are not recommended.
<ul style="list-style-type: none"> <li>▪ Direct physical head to head contact is the usual method of transmission.</li> </ul>	6. During the course of the school year, children will be brought to the notice of the school nurse as suspected cases of head lice from a variety of sources (teachers, students, other parents and affected children themselves). Repeat steps 2, 3, and 4 with these children.
<ul style="list-style-type: none"> <li>▪ Transmission via clothing, hats, furniture, carpets, school bus seats and other objects is not likely because of the biology of head lice.</li> </ul>	7. If a child does have live lice on his/her head, the possibility of transmission ot others has already been present for at least a month before any symptoms or detection was possible. To <b>IMMEDIATELY EXCLUDE</b> that child, especially if the child will just be sitting somewhere else in the school,, <b>CANNOT BE JUSTIFIED</b> from either a medical, nursing or social perspective, and sends a negative message to the child.
<ul style="list-style-type: none"> <li>▪ Lice are fragile, and the chances of being passed on hats and combs are low.</li> </ul>	8. In the rare event of a major uncontrolled transmission situation, implement a protocol for aggressive control. Components of such a protocol should include notification of parents of all children in the school to educate them about lice and to watch their children for infestation. Implement environmental measures such as separating headgear and jackets. Ensure treatment is completed prior to having children return to school for diagnosed cases of infestation.

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<ul style="list-style-type: none"> <li>▪ Carpets, furniture and pets are not sources of infestation</li> </ul>	<p>9. Never tell a parent to treat “just in case”. The shampoos can be toxic and may cause real health problems.</p>
<ul style="list-style-type: none"> <li>▪ There is no significant relationship between hair length or personal cleanliness and transmission.</li> </ul>	<p>10. Parents may have misconceptions and prejudices, which places pressure on school staff. As with any health condition, educating and supporting the child and parent with factual, non-judgmental information is better than having policies and practices driven by misinformation.</p>
<ul style="list-style-type: none"> <li>▪ It is unlikely that a nit on a stray hair shaft will hatch because the only optimal conditions exist on the human head.</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Stray lice that fall off a head are either injured or dying and incapable of causing a new infestation.</li> </ul>	
<ul style="list-style-type: none"> <li>▪ In time, inbreeding of lice on a person’s head causes them to die spontaneously, that’s why kids do not become covered with them. It is a self-limiting condition.</li> </ul>	
<ul style="list-style-type: none"> <li>▪ It is possible to tell whether treatment has been successful by the appearance of the eggs.</li> </ul>	
<ul style="list-style-type: none"> <li>▪ <b>CONSIDERING THE AVERAGE CASE OF HEAD LICE IS 3-4 MONTHS OLD BEFORE IT IS DETECTABLE, A STRICT NO-NIT POLICY IS NOT NECESSARY OR EFFETIVE AND ONLY DEPRIVES CHILDREN OF EDUCATIONAL TIME.</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ Although schools, day care centers, etc. are often blamed for head lice outbreaks, it is the family unit that maintains cases leading to outbreaks in schools.</li> </ul>	
<ul style="list-style-type: none"> <li>▪ African Americans rarely get hair lice.</li> </ul>	

JORGE ELORZA  
*Mayor*

CHRISTOPHER N. MAHER  
*Superintendent*



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## HEAD LICE-PRINCIPLES TO GUIDE SCHOOL POLICIES

### USEFUL INFORMATION

- \* One of the worst “problems” of head lice is adult attitudes; having head lice is not a serious medical condition.
- \* “Irrational” reactions to head lice, e.g., fumigating classrooms, school buses, etc., are expensive and unnecessary.
- \* Much “information” about head lice is based on old, unproven information generated more than 80 years ago, some of it propagated by the companies which sell lice shampoos and sprays.
- \* It is possible but difficult to obtain head lice from casual head to head contact.
- \* Transmission via clothing, hats, furniture, carpets, is also possible.
- \* Lice are fragile, but can be passed on by hats and combs in some cases.
- \* There is no significant relationship between hair length or personal cleanliness and transmission.
- \* It is unlikely that a nit on a stray hair shaft will hatch because the optimal conditions for hatching exist only on the human head.
- \* Stray lice that fall off a head are injured or dying and incapable of causing a new infestation.
- \* In time, inbreeding of lice on a person’s head causes them to die spontaneously; that’s why kids do not become covered with them. It is a self-limiting condition.
- \* It is possible to tell whether treatment has been successful by the appearance of the eggs.
- \* **CONSIDERING THE AVERAGE CASE OF HEAD LICE IS 3-4 MONTHS OLD BEFORE IT IS DETECTABLE, A STRICT NO NIT POLICY IS NOT NECESSARY AND ONLY DEPRIVES CHILDREN OF EDUCATIONAL TIME.**
- \* Although schools, day care centers, etc. are often blamed for head lice outbreaks, it is the family unit that maintains cases leading to outbreaks in schools.

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Estimado Padre: Escuela \_\_\_\_\_

Se ha descubierto un caso de pediculosis (piojos) en el aula de su hijo/a. Las liendres aparecen al inicio del cabello y son del tamaño de una cabeza de alfiler. Si al revisar el cabello de su hijo(a) usted encuentra liendres, por favor, comuníquese con su médico para obtener una receta o visite su farmacia y compre un medicamento para combatir piojos que no requiere receta.

1. Después de comprar el medicamento y un peine fino, úselos siguiendo las indicaciones cuidadosamente (el cabello largo requerirá casi toda una botella). Luego de aplicar el medicamento, úntele aceite mineral o para bebés, tibio, al cabello para aflojar los huevos muertos y remover las liendres.
2. También puede usar vaselina para remover las liendres.
3. Peine a su hijo/a con el peine fino hasta que todas las liendres hayan sido removidas.
4. Use seguidamente un shampoo regular.
5. Continúe usando el peine fino por varios días.
6. Cepille los suéteres y cuellos de los abrigos; lave gorras y ropa de cama; hierva peines y cepillos. Aspire muebles y alfombras. Todo esto es trabajo duro, pero la salud de su niño/a lo vale.
7. Pida a la enfermera escolar que revise a su hijo/a antes de su retorno al aula.
8. Revise el cabello de su hijo/a semanalmente. Desafortunadamente, el problema de los piojos tiene el hábito de retornar.

Le quiero asegurar que, constantemente, estamos tratando de eliminar este problema en la escuela, pero dependemos de usted para evitar que recurra. Por favor, haga revisiones constantes en su casa.

La enfermera escolar revisará cualquier caso cuando se le solicite. Infórmele a la escuela si, en cualquier momento, usted ha tenido que brindarle tratamiento a su hijo/a por causa de piojos.

Muchas gracias.

Enfermera Escolar

07-16