

Dear Parents:

There has been recent evidence of head lice at Monhegan School. Lice are highly communicable and difficult to prevent, but if every parent will take the responsibility to check the entire family immediately and often, these parasites can be controlled. This is not always a simple problem to deal with, but the following information should help you to identify and treat head lice safely and thoroughly. Monhegan School's policy on Pediculosis is also enclosed.

### **HOW DO YOU GET LICE?**

Many people associate lice with unclean people or homes. This is **not true** in the case of head lice. Frequent bathing or shampooing will not prevent lice nor eliminate them once they are established. Lice cannot jump or fly and are usually transmitted by contact with infested persons or by wearing infested clothing or using an infested comb or brush. Children should, therefore, be warned against sharing hats, clothing, or grooming aids with others. Household pets do not transmit lice.

### **WHAT TO LOOK FOR:**

Lice are small insects about the size of a sesame seed. They are usually light brown but can vary in color. They move quickly and shy away from light, making them difficult to see. Diagnosis is more often made on the basis of finding nits (eggs). Nits are tiny, yellowish-white oval specks attached to hair shafts. As she deposits her eggs (3-4 per day), the female louse cements them to the hairs and unlike lint or dandruff, they will not wash off or blow away. Nits may be found throughout the hair, but are most often located at the nape of the neck, behind the ears, and frequently on the crown. It helps to use a magnifying glass and natural light when looking for them.

### **SYMPTOMS OF INFESTATION:**

The itching that occurs when lice bite and suck blood from the scalp is a primary symptom of infestation, although not everyone will experience the itching. Children seen scratching their head frequently should be examined at once. Often red bite marks or scratch marks can be seen on the scalp and neck. In severe infestations, a child may develop swollen glands in the neck or under the arms.

### **TREATMENT OF THE INDIVIDUAL:**

1. Contact your child's doctor. He/She will advise you of the treatment necessary for your household.

2. In some cases, the over-the-counter products fail to eliminate live lice. Your child's physician may then order a prescription for treatment of head lice. As with any treatment product, follow the directions carefully. Ask your physician, the school nurse, or the pharmacist if you don't fully understand the directions.
3. You may use one of several louse remedies available at your pharmacy.
4. Although it can take time and sometimes be difficult, **remove all nits** to insure complete treatment. Louse shampoos and lotions rarely kill all the nits, and survivors will hatch into crawling lice within 7-10 days, generating a cycle of self-reinfestation. Even dead nits will cling to the hair and cause uncertainty about reinfestation. Nit removal can be accomplished with a special combing tool manufactured for this purpose (available in drug stores-metal combs work best), or by picking them out with the fingernails. Note: Some so-called lice combs are actually cradle cap combs and are ineffective against nits. Nit combing is best accomplished with hair which is dry or slightly damp.
5. Following nit removal, have a child put on clean clothing.
6. A **daily nit check** is advisable for a least 10 days following a treatment. You may have to retreat in 7-10 days if there is evidence of new nits or newly-hatched lice. (Remember, regardless of precautions taken at home, re-infestation from others can still take place).
7. **Comb hair with the metal lice comb daily for at least 2-3 weeks.** Combing thoroughly, daily, with damp hair and wiping comb clean between combs is the only effective way to get rid of lice following treatment. Occasionally, you have to pick out nits that are not caught in the comb.

#### **TREATMENT OF PERSONAL ARTICLES AND ENVIRONMENT:**

1. Machine wash all washable clothing and bed linens which have been in contact with the infested person during the last three days. Articles should be washed in **hot** water and dried in a **hot** dryer. Non-washables can be put in a hot dryer only for 20 minutes if heat will not harm the item. Things which cannot be washed or dried can be sealed in a plastic bag for 14 days, or dry cleaned.
2. Combs, brushes, etc. can be soaked in louse shampoo for one hour, or in 150° water for 5-10 minutes. (Caution: heat may damage some of these items.)
3. Rugs, upholstered furniture, and mattresses should be carefully vacuumed to pick up any living lice or nits attached to fallen hairs. **THE USE OF INSECTICIDE**

**SPRAYS IN NOT RECOMMENDED AND STRONGLY DISCOURAGED AS  
IT MAY BE HARMFUL TO FAMILY MEMBERS AND PETS.**

**REPORTING CASES:**

Don't be embarrassed to notify the school if your child contracts lice, so other parents can be alerted to a possible outbreak. Also notify your child's playmate's parents. Parental cooperation will help protect all children including your own.

Cross Reference: JHCE- Pediculosis (Lice)

Adopted 02/25/15 by J. Stevens, M. Chioffi, & J. Weber