Head Lice

According to the Illinois Department of Public Health, head lice do not transmit communicable disease. Persons from all socioeconomic levels without regard to age, race, sex, or standard of personal hygienic, can become infested with head lice. The psychological, social and economical impact of head lice infestations can create a problem in the home, school, and community. Head lice as a social problem far outweighs its significance as a health concern in most situations. It becomes a social concern because of the emotional reaction to its presence. Due to the continued concern and frustration in dealing with head lice in the school, the latest national recommendations for school guidelines have been reviewed and Pawnee School District will seek to achieve a consistent approach to head lice management within the school. The following information was obtained from the American Academy of Pediatrics, Center for Disease Control, Center for Health and Health Care in Schools, and the National Association of School Nurses.

* Head lice is not a serious medical condition, but rather a nuisance.
* Adult lice are 1-2 cm in length. Head lice crawl; they do not jump or fly and they are dependent on their host for nourishment (human blood). Lice that fall off a head are either injured or dying and incapable of causing an infestation on another person. Lice are very fragile and cannot live off of their human host for more than 24 hours. Transmission occurs by direct head to head contact. Indirect spread through contact with personal belongings (combs, hats, coats) is very unlikely due to the biology of the louse.
* Nits (eggs) are tiny white/yellowish oval shaped eggs that are attached to the hair shaft at an angle. Nits found more than 1 cm from the scalp along the hair shaft are considered non-viable. These are empty egg cases from the current infestation or a past infestation.
* Routine head checks of healthy students are not recommended. Entire classrooms should only be checked when head lice is present in 2 or more students.
* Head checks should be done on symptomatic students (i.e.: itching of the scalp).
* Parents have the primary responsibility for the detection and treatment of head lice and schools should work in a cooperative a collaborative manner to assist all families.