

HEAD LICE TREATMENT CHECKLIST

Student Name: _____

Date: _____

***Please use this checklist when treating your child and home.
Return completed form to school the next school day.***

- _____ 1. **Treat all affected family member's heads** with a lice treatment shampoo. Note that there is no treatment that will kill all lice. Therefore, treatment **must** be repeated in approximately 7-10 days to kill any newly hatched lice. ALL family members' heads should be checked for lice and nits- regardless of length.
- _____ 2. **Physically remove all nits.** This is an on-going procedure that must become part of your daily routine for a minimum of 2 weeks. The only way to know whether or not nits are alive or dead is to examine them under a microscope. This is unrealistic! You need to pick them out with your fingernails or with an egg removal comb and discard them.
*****ALL NITS MUST BE REMOVED.**
- _____ 3. **Wash bedding.** This includes any bedding and pillow your child may have come into contact with. Wash and dry in the hottest temperatures possible to kill lice and nits.
- _____ 4. **Wash clothing.** This includes jackets, hats, mittens, scarves, art smocks and other clothing that your child has come into contact with during the past 2 weeks. Again, wash and dry in the hottest temperatures possible.
- _____ 5. **Seal in plastic bags those items that cannot be washed.** Items such as baseball caps, ponytail holders, barrettes, stuffed animals, dolls, etc., must be bagged for 2 weeks to kill any lice or nits that may be present. Freezing these items overnight is also acceptable.
- _____ 6. **Disinfect combs, brushes and similar items.** You may soak them in one of the lice treatment shampoos for 1 hour or soak them in a bleach water solution- 1 part Bleach to 10 parts water (like ¼ cup Bleach and 2 ½ cups water)
- _____ 7. **VACUUM.** This needs to include all carpet, furniture and the upholstery/car seats in your vehicles.
This needs to be done frequently for at least 2 weeks.
- _____ 8. **Notify others that may also be infected.** This could include grandparents, step-parents, and parents of your child's close friends. This will enable them to take appropriate action to prevent further spread, possibly back into your own home.

I have thoroughly treated my child, _____, any affected family members, and home for lice.

Parent/Guardian Signature: _____