



Hastings and Prince Edward  
District School Board

## FORM 321-1

Adopted	November 2015
Last Revised	January 2017
Review Date	January 2022

Insert on school letterhead)

# NOTIFICATION OF SUSPECTED HEAD LICE

Date:

Dear Parent/Guardian:

Pediculosis (head lice) have been found in your child's hair. Please be assured that your child's right to privacy, dignity, and cultural sensitivity was respected during this process. Head lice do not cause a health problem but do need to be treated. A recommended treatment such as Nix, R&C Shampoo, Resultz etc. should be used, as soon as possible, before your child returns to school. Consult with your pharmacist or other medical practitioner about the best product to use. If you are unable to access the recommended treatments, please contact the school for further information on available resources.

To assist you, please find attached the following information:

- ✓ "Lice Giving You Trouble?" Healthful, Eastern Ontario Health Unit (May 2013)
- ✓ Fact Sheet: Head Lice, Hastings Prince Edward Public Health (July 2013)
- ✓ Website: Canadian Pediatric Society, Caring For Kids;  
[http://www.caringforkids.cps.ca/handouts/head\\_lice](http://www.caringforkids.cps.ca/handouts/head_lice)

*Please read and complete the Treatment Plan Checklist below to the best of your ability as of today. If you are unable to check 'yes' to any of the items, please contact the principal to discuss how the school can help to support you. Your child may attend school while treatment for head lice is underway. Please return the Treatment Plan Checklist on the day your child returns to school.*

Sincerely, School Administrator

### Treatment Plan Checklist

- |  |     |                          |
|--|-----|--------------------------|
| I have read the information provided.  | Yes | <input type="checkbox"/> |
| I have used a recommended lice treatment.  | Yes | <input type="checkbox"/> |
| I have checked all family members, including adults, and treated if necessary.       | Yes | <input type="checkbox"/> |
| I will be doing a daily head check for the next 10 days.                             | Yes | <input type="checkbox"/> |
| I have planned a repeat treatment after 7 – 10 days, to kill any newly hatched lice. | Yes | <input type="checkbox"/> |

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_