

**PINNACLE CLASSICAL ACADEMY  
LICE TREATMENT POLICY**

**Treatment Checklist:**

Use this checklist to document the steps of treatment as you perform them. After completing the checklist and providing your signature at the bottom, please return the entire checklist to the administrative assistant/secretary at the time that you accompany him/her to the school for reassessment and possible readmission. This will assist the principal or designated school staff in determining whether adequate treatment has occurred and whether your child is to be readmitted to school.

	Treatment Procedure	Date Performed
1	Treated child for head lice using approved treatment/shampoo and following correct instructions. Treatment used: _____	
2	Used nit comb to remove all nits.	
3	Other household members were treated in the same manner.	
4	Washed clothing, bedding, etc. and dried them in clothes dryer for at least 20 minutes on the hot cycle.	
5	Soaked combs, brushes, barrettes, etc. in hot soapy water for at least 5-10 minutes.	
6	Washed or sealed tightly in a plastic bag (to remain closed for 2 weeks outside the house) all hats, coats, book bags, etc.	
7	Vacuumed all floors, carpets, mattresses, etc. and sealed the dirty vacuum bag in a plastic bag and removed it from the home.	

By signing below, I am indicating that I have performed the above treatment measures to the best of my ability in order to eliminate my own child's infestation with head lice and to support the school's efforts to prevent the infestation of other students.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Teacher