



**DUVAL COUNTY PUBLIC SCHOOLS  
FLORIDA DEPARTMENT OF HEALTH – DUVAL COUNTY  
SCHOOL HEALTH SERVICES**



**Monthly Pediculosis Control Program Log**

SCHOOL \_\_\_\_\_ MONTH/YEAR \_\_\_\_\_

**Directions: List each student with head lice, complete each section  
\*Complete the 2<sup>nd</sup> screening no later than 10 days after the student returns to school\***

STUDENT	GRADE	DATE IDENTIFIED & EXCLUDED	DATE RETURNED & RE-SCREENED	*DATE OF 2 <sup>ND</sup> SCREENING
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

**Submit to: DOH-DUVAL SCHOOL HEALTH SERVICES OFFICE AT THE END OF EACH MONTH.  
All Schools please fax to 904-253-1896**