Scabies Management Protocol

This protocol will facilitate a consistent approach for individuals, families, and care providers when someone has been diagnosed with or exposed to scabies. The purpose is to minimize the spreading of scabies through timely identification, reporting and treatment.

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Definitions

The following definitions are for the purpose of the Scabies Management Protocol:

1. **Suspicous rash** – Any rash
2. **Confirmed scabies** – A physician has prescribed treatment for scabies
3. **Exposure to scabies** – Individuals with out evidence of scabies, but are treated because they have had prolonged direct exposure to someone with confirmed scabies (i.e. housemate)
4. **Suspected scabies** – A rash that appears after exposure to a confirmed case of scabies

What to do for Suspected Scabies

1. Staff identifies a suspicious rash
   - Staff notifies their supervisor
   - Optional Skin Rash Observation Tool may be filled out for Physician appointment (attached)
   - Physician Encounter Form is filled out to include reason for appointment and plan of treatment for doctor to complete including doctor’s orders and note stating date cleared to return to day program (optional form attached)
   - Appointment with primary care physician is made. This is not an emergency and does not require an ER visit. Appointment can be made during the next business day.

2. If the rash is discovered during day services, the residence / family is notified to have individual picked up and reminded that a doctor’s clearance note is required to return to program / work. Scabies Management Protocol will be sent home with the individual.

3. The person MUST remain at home to minimize exposure to others until medical clearance is obtained. This includes day program / work, as well as any community outings.
Diagnosis of Scabies

A physician must diagnose and prescribe treatment for scabies. The diagnosis is commonly made by looking at the burrows or rash. A skin scraping may be done to look for mites or eggs under the microscope to confirm the diagnosis. However, a negative scraping does not necessarily mean there is no scabies as typically there are fewer than 10 mites on the entire body of an infested person.

What to do when scabies is diagnosed

♦ Whom to Notify
  1. When scabies has been confirmed by a physician and prescription for treatment has been obtained, the following are notified by the residential program director:
     - Area office nurse
     - Day services
     - Primary care physicians of all others living in the same household – to obtain prescriptions for treatment
     - Family / guardian
     - Transportation
  2. Day service program director will send home a Notification of Exposure to Scabies letter for all applicable individuals (those who participate in the same program or travel in the same vehicle) (sample letter attached).

* For individuals living with family, the family is requested to notify day services of the diagnosis. Day services director will then notify the area office nurse.

♦ Who gets treated
  1. Besides the individual with confirmed scabies, anyone who has prolonged direct exposure will need to be treated as well. This includes:
     ▪ All people living in the household where there has been a confirmed case of scabies; even if they don’t have symptoms. (symptoms may take up to 6 weeks to develop)
     ▪ All residential staff
     ▪ Exposed day program individuals and staff do not necessarily need to be treated but will be monitored for rashes during the incubation period. Protocol will be followed should a rash develop.

The individual who has been diagnosed with scabies will need to stay home as determined by the MD’s order. This includes day service programs as well as community outings.

*REMINDER: return to work doctors notes are required by day programs. (Sample Physician Encounter Form attached – please have doctor sign and include specific date accordingly).
Environmental Management

Since the scabies mite can live up to 4 days without human body contact, it is required that the environment be treated to destroy any live scabies mites at the same time as the prescription treatment. This includes:

- home environment (bedding, towels, clothing, furniture, carpets, mattress, pillows, cloth toys)
- day environment
- vehicles used to transport individual (transportation co., home, day)

*Please see attached training worksheet for specific instructions on environmental management*

Returning to Day Services

♦ Exposed individuals may return to day services 24 hours after treatment is done.
♦ Individuals who have been diagnosed with scabies must have proper documentation of medical clearance on the 1st day they return to day services.

*If proper documentation is not provided, the individual will not be permitted to return to day services, and will be sent home.*
Optional Forms to be used when there is a suspected and/or confirmed case of Scabies

- Skin Rash Observation Tool
- Physician Encounter Form for Suspicious Rash
- Agency Sample letter to be sent home with individuals in a day program following a confirmed case of scabies
- Training materials on environmental management
**Skin Rash Observation Tool**

**NAME:**

**ADDRESS:**

<table>
<thead>
<tr>
<th>MALE □</th>
<th>FEMALE □</th>
<th>DOB: <em><strong><strong>/</strong></strong></em>/_____</th>
</tr>
</thead>
</table>

**PHONE:** (   ) _____ - _______

Group Home: □ Agency: ___________________ Contact: ________________
Family Home: □
Lives Alone: □
Other: □ specify: ____________________________
Number of others living in the home: _____
**DDS Area Office**
- Metro North □
- Merrimack Valley □
- North Shore □
- Lowell □
- Central Middlesex □

**ADDRESS:**

**PHONE:** (     )  _____- _______

**Group Home:**
- Agency: __________ Contact: ________________

**Family Home:**
- Live Alone: □

**Other:** □ specify: _______________________________________________

**DAY PROGRAM :** ____________________________________

**WORKSITE:** ________________________

Day program contact: __________________________ Phone: __________________________

**OBSERVATION**

**Date rash first identified:** _____/_____/______ **By:** __________________**Title:** ____________________

<table>
<thead>
<tr>
<th>RED □</th>
<th>MACULAR (flat) □</th>
<th>PRURITIS (itchy) □</th>
<th>DRY □</th>
<th>BLOTCHY □</th>
<th>PATCHY □</th>
<th>BRUISING □</th>
<th>SWELLING □</th>
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</thead>
<tbody>
<tr>
<td>PAPULAR (pimply) □</td>
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**Location of rash:**

**Exposure to scabies:** □ yes □ no

List any other symptoms:

Please indicate with affected areas on the diagram with an X and draw a small line to beyond the diagram with the date.

![Diagram of human body with X marks indicating affected areas]

**Comments:**

_______________________________________
_______________________________________
_______________________________________
_______________________________________
_______________________________________

**Rechecked on:**

**By:** __________________**Title:** __________________

**Rechecked on:**

**By:** __________________**Title:** __________________

**Rechecked on:**

**By:** __________________**Title:** __________________

**Copy of Observation Tool sent to DDS area office nurse on:** _____/_____/_____ by: ____________________

08/07/2009
PHYSICIAN ENCOUNTER FORM

NAME: ______________________       DATE: ___/___/_____

Seen by: Primary Care MD ☐ Name: ______________________________

Seen by: Dermatologist: ☐ Name: ________________________________

Seen by: Walk in clinic ☐ Name: _________________________________

ER Eval: ☐ Name of Hospital: _______________________________

[THE SHADED SECTION IS TO BE COMPLETED BY HEALTH CARE PRACTITIONER]

ASSESSMENT:

IMPRESSION:

TREATMENT: No treatment/ observe ☐
Medication ordered: No ☐ Yes ☐ if yes complete below:

<table>
<thead>
<tr>
<th>Medication</th>
<th>Dose</th>
<th>Frequency</th>
<th>Route</th>
<th>Reason Prescribed</th>
<th>Special instructions</th>
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<tbody>
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Follow up Instructions:

Is a second treatment required? No ☐ Yes ☐ in _____ days

Date individual able to return to day program _____/_____/_____

Physician’s Signature: ________________________    Date: _____________________

STAFF/FAMILY FOLLOW UP: If an individual has been diagnosed with or being treated for scabies the following section must be fill out completely by family or staff before returning to day program..

<table>
<thead>
<tr>
<th>Medication:</th>
<th>Date of 1st Treatment:</th>
<th>Date of 2nd Treatment:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was the home environment cleaned? Yes ☐ No ☐</td>
<td>Date of cleaning:</td>
<td></td>
</tr>
<tr>
<td>Were all applicable vehicles cleaned? Yes ☐ No ☐</td>
<td>Date of cleaning:</td>
<td></td>
</tr>
<tr>
<td>Were others in the home treated? Yes ☐ No ☐</td>
<td>If living in group home, were staff treated? Yes ☐ No ☐</td>
<td></td>
</tr>
<tr>
<td>Rash improved: Yes ☐ No ☐</td>
<td></td>
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<tr>
<td>Date individual is able to resume out of home activities:</td>
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Signature of family/ staff person completing above section: _________________________________

DAY PROGRAM FOLLOW UP:

Was the work environment cleaned? No ☐ Yes ☐ if yes, date: ________________

Rash resolved? No ☐ Yes ☐

Signature of Day program staff completing form: __________________________ date: __/__/____

08/07/2009
AGENCY LETTERHEAD (from Day Program)

To: Families, Guardians, Residential Providers, and Individuals

From: (Day Program administrator)

RE: Notification of Exposure to Scabies

Date:

This letter is to inform you of a confirmed case of Scabies at ________________.

We want to take steps to minimize exposure to others and promote containment of the scabies mite. We are asking that everyone be checked carefully for any suspicious rash and medical follow up be pursued if needed. (See attached optional Skin Rash Observation Tool and Physician Encounter Form for Suspicious Rash). Please remember that it could take 2 – 6 weeks following exposure for symptoms to appear, so monitoring for symptom development will need to continue during this time period.

This program and vans will be cleaned tonight.
The individual involved, and all others in their home will be treated.

If you have any questions, please feel free to call __________ at ________ or your DDS Service Coordinator or DDS Area Office Nurse at ________.

cc. area office nurse
In order to successfully treat scabies, all members of an affected household and the environment must be treated at the same time.

How to do Treatment

Instructions for using scabies medication:

• Read the insert that accompanies the medication for specifics
• Remove rings, bracelets, and watches. Wearing a new pair of gloves for each person treated; apply a thin layer over the entire body from the neck down. Pay particular attention to the hands (especially between the fingers), the belly button, under the breast, the entire genital area, the area between the buttocks, and the feet (between the toes and the bottom of the feet).
• Trim fingernails and toenails short. Apply medication thoroughly under the fingernails.
• Leave medication on as long as your health care professional recommends or check the medication insert for instructions. (usually 8 hours)
• If any body part needs to be washed, reapply medication to that area.
• After recommended time, wash medication off with lukewarm, soapy water and dry skin thoroughly.
• Place all worn clothes in a plastic bag to be washed.
• Put on freshly laundered clothes.

The treatment may cause some skin irritation- this is normal, you may have to apply a dry skin lotion after bathing for several weeks

DO NOT APPLY THE SCABIES MEDICATION MORE OFTEN THAN IS RECOMMENDED BY YOUR HEALTH CARE PROFESSIONAL
Training Materials/worksheet

Environmental Management

Cleaning the Home

Since the scabies mite can live up to 4 days without human body contact, it is important to treat the environment to destroy any live scabies mites as soon as prescription treatment begins. This includes the following:

- Bedding (sheets, pillows, comforters)
- Towels and facecloths
- Clothing
- Furniture
- Carpets
- Mattresses
- Throw pillows
- Cloth toys

Day of Treatment:

- Immediately after applying treatment for scabies, clean all bedding, towels and clothing worn in the past 4 days (remember to include jackets, gloves, hats). Wash all items in hot water and dry in hot dryer. Wear gloves when doing laundry and discard immediately after. If any clothing can not be washed in hot water, it can be placed in sealed plastic bag for 14 days.
- Any items that cannot be washed (like stuffed animals, some clothing etc.) must be placed in a sealed plastic bag for at least 14 days.
- All washable surfaces (tabletops, countertop, floors, and bathrooms) must be thoroughly washed with your usual cleanser the day of treatment.
- Vacuum all rugs, furniture and mattresses. Start with a fresh vacuum bag and discard in sealed plastic bag when done.

Done on: ____________________________  By: _______________________________

Cleaning the Day Environment

Upon notification of a confirmed case of scabies, the day services program will clean all affected areas that evening. Cleaning should include:

- Washing all washable items (spare clothing, lab coats, bedding)
- Place all non-washable or non-vacuumable items in a sealed plastic bag for 14 days
- Vacuuming of all rugs, furniture and mats
- Washing of all washable surfaces (table tops, bathrooms, floors)

Done on: ____________________________  By: _______________________________

Vehicle Cleaning

- All vehicles within the past four days that the confirmed individual has ridden in must be vacuumed thoroughly and surfaces washed before the next business day.

Done on: ____________________________  By: _______________________________
Fact Sheet

Scabies
(SKAY-bees)

What is scabies?
Scabies is an infestation of the skin with the microscopic mite *Sarcoptes scabei*. Infestation is common, found worldwide, and affects people of all races and social classes. Scabies spreads rapidly under crowded conditions where there is frequent skin-to-skin contact between people, such as in hospitals, institutions, child-care facilities, and nursing homes.

What are the signs and symptoms of scabies infestation?
- Pimple-like irritations, burrows or rash of the skin, especially the webbing between the fingers; the skin folds on the wrist, elbow, or knee; the penis, the breast, or shoulder blades.
- Intense itching, especially at night and over most of the body.
- Sores on the body caused by scratching. These sores can sometimes become infected with bacteria.

How did I get scabies?
By direct, prolonged, skin-to-skin contact with a person already infested with scabies. Contact must be prolonged (a quick handshake or hug will usually not spread infestation). Infestation is easily spread to sexual partners and household members. Infestation may also occur by sharing clothing, towels, and bedding.

Who is at risk for severe infestation?
People with weakened immune systems and the elderly are at risk for a more severe form of scabies, called Norwegian or crusted scabies.

How long will mites live?
Once away from the human body, mites do not survive more than 48-72 hours. When living on a person, an adult female mite can live up to a month.
Did my pet spread scabies to me?

No. Pets become infested with a different kind of scabies mite. If your pet is infested with scabies, (also called mange) and they have close contact with you, the mite can get under your skin and cause itching and skin irritation. However, the mite dies in a couple of days and does not reproduce. The mites may cause you to itch for several days, but you do not need to be treated with special medication to kill the mites. Until your pet is successfully treated, mites can continue to burrow into your skin and cause you to have symptoms.

How soon after infestation will symptoms begin?

For a person who has never been infested with scabies, symptoms may take 4-6 weeks to begin. For a person who has had scabies, symptoms appear within several days. You do not become immune to an infestation.

How is scabies infestation diagnosed?

Diagnosis is most commonly made by looking at the burrows or rash. A skin scraping may be taken to look for mites, eggs, or mite fecal matter to confirm the diagnosis. If a skin scraping or biopsy is taken and returns negative, it is possible that you may still be infested. Typically, there are fewer than 10 mites on the entire body of an infested person; this makes it easy for an infestation to be missed.

Can scabies be treated?

Yes. Several lotions are available to treat scabies. Always follow the directions provided by your physician or the directions on the package insert. Apply lotion to a clean body from the neck down to the toes and left overnight (8 hours). After 8 hours, take a bath or shower to wash off the lotion. Put on clean clothes. All clothes, bedding, and towels used by the infested person 2 days before treatment should be washed in hot water; dry in a hot dryer. A second treatment of the body with the same lotion may be necessary 7-10 days later. Pregnant women and children are often treated with milder scabies medications.

Who should be treated for scabies?

Anyone who is diagnosed with scabies, as well as his or her sexual partners and persons who have close, prolonged contact to the infested person should also be treated. If your health care provider has instructed family members to be treated, everyone should receive treatment at the same time to prevent reinfection.
How soon after treatment will I feel better?

Itching may continue for 2-3 weeks, and does not mean that you are still infested. Your health care provider may prescribe additional medication to relieve itching if it is severe. No new burrows or rashes should appear 24-48 hours after effective treatment.

This fact sheet is for information only and is not meant to be used for self-diagnosis or as a substitute for consultation with a health care provider. If you have any questions about the disease described above or think that you may have a parasitic infection, consult a health care provider.