

Parents' Confirmation

Hereby I confirm having examined

my childgroup/grade.....

for head lice and nits according to the direction mentioned above.

Neither lice nor nits were detected.

Lice and/or nits were detected and the first treatment according to the aforementioned instructions was carried out

I undertake to carry out the follow-up steps in treatment (day 5 to day 17).

Substance employed

Date

Parents' signature