

#### Step 4: Post treatment follow-up

- Once treatment is complete, always follow up approximately 10 days later; then at three-week intervals for three months
- Provide reassurance and factual information to clients, families, and day care staff regarding bed bugs in order to maintain calm and respectful day care services and community environment. Reinforce confidentiality. Make sure that infestation is eliminated and well managed, and long-term questions and concerns are answered in a timely manner
- If needed, have an experienced, certified National Entomology Scent Detection Canine Association (NESDCA) canine team or equivalent trained team walk through the building. Dog and handler are trained together and should never be separated or the certification is made null and void. A well-trained dog can detect very low bed bug populations e.g., one or two insects, which humans may not find

#### Self Protection

- Be bed bug educated
- Bed bugs are nocturnal and normally dislike being on people
- For those who may be working in area (s) where bed bugs have been found, wear tight-fitting light-colored clothes, smooth-soled shoes, and have a change of clothes and trash bag on hand. Do not wear Tyvec suits, because this is visually alarming and unnecessary. If concerned about bringing bed bugs home, change out of work clothes, put into trash bag, seal for carrying, and wash and dry, or use a dryer at high temperature for 20 minutes
- Have on hand a small spray bottle of soapy water in case a bed bug is found. Spray insect and put into a Ziploc bag; dispose in trash. Hold onto insect if identification is needed

## Important Contact Information

#### Identification and help

Dr. Gale E. Ridge (203) 974-8600

Email photographs: [gale.ridge@ct.gov](mailto:gale.ridge@ct.gov)

**Bed bug website:** [www.ct.gov/caes](http://www.ct.gov/caes). Then click on "Bed Bug" web-page

#### Treatment, Enforcement, Certification

##### DEEP pesticide management program

Hartford CT (860) 424-3369

E-mail: [diane.jorsey@ct.gov](mailto:diane.jorsey@ct.gov) (please write bed bug) in the subject box)

##### Connecticut law pertaining to bed bugs

State of Connecticut Division of Criminal Justice  
Housing Session

New Haven, (203) 773-6755

Bridgeport, (203) 579-7237

Hartford, (860) 756-7810

New London, (860) 443-8444

E-mail: [judith.dicine@po.state.ct.us](mailto:judith.dicine@po.state.ct.us)  
(please write bed bug in the subject box)

##### Connecticut Department of Public Health, local health administration

Hartford, CT (860) 509-7660

[webmaster.dph@ct.gov](mailto:webmaster.dph@ct.gov) (please write bed bug in the subject box)

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Connecticut Coalition Against Bed Bugs

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## Bed Bug Guide For Connecticut Day Care Services

Gale E. Ridge PhD



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**WWW.CT.GOV/CAES**

# Bed Bug Information

There are two human feeding bed bugs, the Common bed bug *Cimex lectularius* L. and the Tropical bed bug *Cimex hemipterus* Fabr. In Connecticut, we have the Common bed bug and the Eastern bat bug *Cimex adjunctus* Barber. An expert, trained health department staff/sanitarian, or experienced pest management professional (PMP) are able to distinguish between the two species. Do not attempt to identify them yourself. Bat bugs can readily feed on people and be mistaken for the Common bed bug. Control for the bat bug is different from the Common bed bug. These two insects do **not** transmit human disease causing pathogens.

## Characters of the Common bed bugs

- Adults are lentil seed in size, nymphs and eggs are much smaller
- They are brown colored, flat, oval, with six legs and two antennae
- They walk. They do not fly, jump, or hop
- They do not bite. They feed on human and animal blood using piercing sucking mouthparts
- They feed at night, hide by day, and are shy; and
- They develop from egg to adult in 5 to 8 weeks

While a day care environment is not conducive to bed bugs and infestations in day care facilities are uncommon, day care facilities should have an integrated pest management (IPM) program and policies in place before bed bugs are discovered comprising education, expert identification, and monitoring.

## Step 1: Be bed bug proactive

- **Have a fault free policy**  
Learn identification, biology, and behavior of bed bugs
- Reduce anxiety and social stigma for staff and clients. Shame, embarrassment, horror, disgust, and denial are common reactions to bed bugs
- Teach proactive not reactive behavior
- Provide information about bed bugs and your day care policy during early contact with clients and maintain continued awareness using handouts, internet information, and posters etc.
- Clients/staff members should not be excluded from a day care facility if they have bed bugs
- Have an integrated pest management (IPM) plan of action **in place** with a bed bug experienced Connecticut State licensed PMP before discovery of bed bugs
- Assign a bed bug coordinator and/or team for the day care facility that may include a day care medical advisor, nurse/consultant, administrator, trained custodial staff, and other staff as deemed necessary
- Consider routine preemptive inspections

## Step 2: A suspicion of bed bugs

There are two early indicators of bed bug activity:

### I. Itchy unexplained spots on skin

Linear or clustered lesions may or may not indicate bed bugs. Consider other causes. Such as allergies, medicines etc. Each person can react differently to bed bug feeding from no signs or symptoms to severe welts; and

### II. A potential bed bug specimen

Several insects can look like bed bugs. Day care facilities should have their local health department, PMP, or other expert identify the specimen (s)

## Mistaken identification

Other arthropods and materials can be mistaken for bed bugs. These include:- lint/fluff, varied carpet beetle, spider beetle, tick, flea, lice, and other small arthropods. Never rely on hearsay. **Always get independent positive identification/confirmation before moving to step 3**

## Step 3: Suggestions for response if a bed bug is confirmed

1. Respond immediately; within 24 hours
2. Contact local health department for support
3. Maintain calm professionalism. Anxiety will be telegraphed to staff and clients
4. Have staff/clients visit director/owner/assigned nurse for initial assessment. Maintain confidentiality  
**Do not** stigmatize the person
5. Assess whether they were transferred onto the person or came from their residence. Identify possible source entry points, such as backpacks, lunchboxes, travel packs, sports bags, books, clothing, pocketbooks, other personal items, lockers, private or public transportation
6. Determine if residence where client/staff live, is being treated
7. Keep detailed records
8. Never self treat because of risks to health and wide spread pesticide resistance in bed bug populations. Seek professional treatment
9. Call a PMP with experience in bed bug management
10. Provide plastic bins or plastic bags for clients/staff to store backpacks, lunch boxes, personal items etc. and manage laundry at home (and day care facility when possible) as part of an IPM program
11. When possible, have a dryer on premises to heat treat articles (high temperature for 20 minutes)
12. Vacuum cracks and wipe down with soap and water where bed bugs were discovered
13. Provide a parent/client/staff advisory letter from the day care facility, about treatment, and management. Include the day care policy in this communication/advisory letter
14. Communication and cooperation are key to resolving bed bug issues

