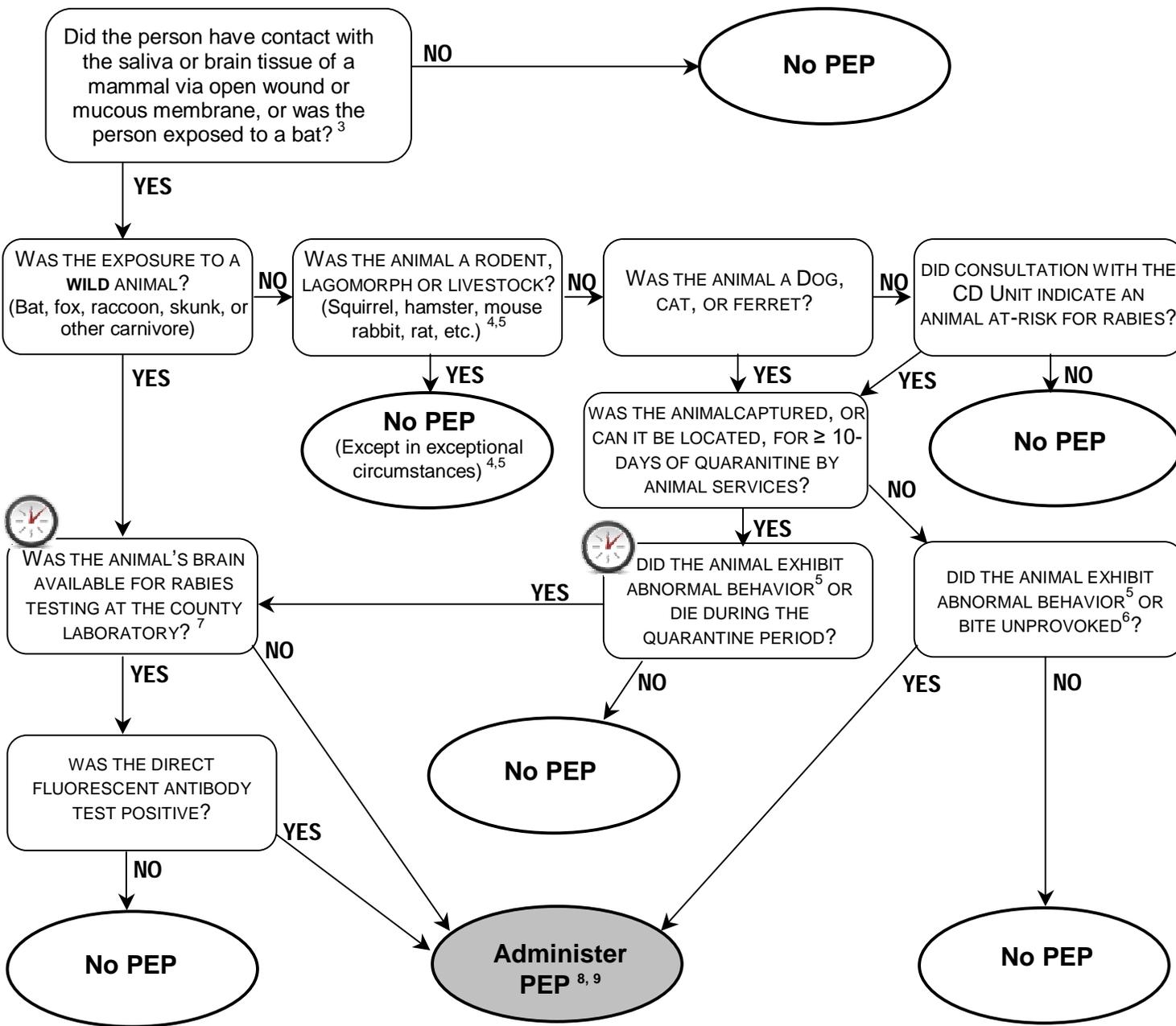


Human Rabies Post-Exposure Prophylaxis (PEP) Guide ^{1,2}



FOR MORE INFORMATION

Communicable Disease (CD) Unit

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Rabies PEP is a medical urgency, NOT an emergency. The decision to initiate rabies PEP can normally wait 48-72 hours to determine whether an animal is available for testing or observation, and for test results to become available.

NOTES

1. Rabies risk assessment requires balancing a number of criteria: the species of animal and the endemicity of rabies for the species where the bite occurred, the observed health and behavior of the animal, and the circumstances of the bite.
2. This algorithm only addresses rabies post-exposure prophylaxis. Other treatment such as wound care, antibiotics, and tetanus immunization may be indicated.
3. In addition to obvious bites or mucous membrane exposures, the CDC suggests that PEP be considered in cases where there is a reasonable probability that contact with a bat may have occurred (i.e. a sleeping person awakens to find a bat in the same room, an adult witnesses a bat in a room with a previously unattended child, mentally disabled person, or intoxicated individual) **and rabies cannot be ruled out by testing of the bat.** PEP would not be warranted for other household members. Consult the Health Department for questions regarding uncommon incidents.
4. Barring unusual circumstances, rodents and lagomorphs are not considered at-risk species. In questionable or unusual circumstances involving rodent, lagomorph, and livestock bites, consult the health department.
5. Symptoms of rabies may include any one or more of the following: excitability, vicious attacks, biting, agitation, restlessness, aggressiveness, lack of fear, excessive salivation, aversion to water, inability to swallow or drink, muscular dysfunction, coordination or gait irregularities, paralysis, convulsions, avoidance of contact with humans or other animals, lethargy, and loss of appetite.
6. Provoked exposures may include attempting to feed an animal, entering an animal's territory, petting or playing with an animal, handling an animal, attempting to break up a fight between animals, having contact with an injured animal, and walking, running, or riding a bicycle past an animal. Unprovoked exposures are rare and typically require an animal to cross neutral space and attack. The physician should attempt to get the patient to describe the scenario in order to establish the true nature or the circumstances surrounding the biting incident – DO NOT simply ask if the bite was provoked or unprovoked. Potentially exposed persons can normally afford to wait 48-72 hours for 1) an animal to be located for quarantine or testing, or 2) animal rabies testing results.
7. Rabies PEP is a medical urgency, NOT an emergency. The severity and location of a wound (severe wounds or obvious wounds near the head and neck should be given highest priority), and the expected interval between the time of the bite and receipt of rabies test results should be considered when making a decision to begin PEP while awaiting test results.
8. Unless the person previously received rabies immunoprophylaxis¹ or immunosuppressed², PEP consists of four (4) doses of vaccine (1.0 ml each administered IM in the deltoid region) on days 0, 3, 7, and 14, and one (1) dose of human rabies immune globulin (HRIG) administered on day 0 (<http://www.cdc.gov/mmwr/pdf/rr/tr5902.pdf>). HRIG (dosage 20 IU/kg) should be infiltrated into and around the bite wound as much as anatomically feasible, with the remainder administered IM at a site distant from vaccine administration. HRIG should not be administered in the same syringe or at the same site as vaccine. Consult the CD Unit at (831) 454-4114 if deviations from the PEP schedule occur.
 1. *Previously vaccinated person:* No HRIG, and only two (2) doses of vaccine on days 0 and 3.
 2. *Immunosuppressed patient:* HRIG and a five (5) dose series of vaccine (days 0, 3, 7, 14, 28). Serum should be tested for rabies neutralizing antibody 1-2 weeks following completion of series.
9. If the biting animal is captured and tests negative for rabies after PEP has begun, PEP may be discontinued.

Modified from: Michigan Department of Community Health. Zoonotic and Special Projects Section. Human Rabies Post-Exposure Prophylaxis (PEP) Protocol. August 2009. <http://www.michigan.gov/documents/Rabflowcht3people_7361_7.pdf>

Reference: Centers for Disease Control and Prevention. Human Rabies Prevention – United States, 2008: Recommendations of the Advisory Committee on Immunization Practices (ACIP). MMWR 2008; 57 (No. RR-3).

Centers for Disease Control and Prevention. Compendium of Animal Rabies Prevention and Control, 2008: National Association of State Public Health Veterinarians, Inc. MMWR 2008; 57 (No. RR-2).