

# Managing Animal Bites, Rabies Exposures & Rabies Postexposure Prophylaxis (PEP)

## 1. Wound Care

- Bite wounds and animal scratches should have been cleaned thoroughly with running water and soap immediately after the incident
- Provide wound care and consider antibiotics

## 2. Tetanus Prophylaxis

- Administer tetanus toxoid promptly if patient has not received a tetanus vaccine (Tdap/Td) in the last five years
- If patient has not completed the tetanus vaccination regimen previously, administer a dose of tetanus toxoid promptly and consider passive immunization with human tetanus immune globulin (TIG)

## 3. Rabies Risk Assessment

- Perform **Human Rabies Risk Assessments** to determine if Rabies (PEP) is indicated.
- Refer to the North Carolina Algorithm Handout: **Evaluating Human Rabies Risk from Animal Bites: for Domestic Dogs, Cats and Ferrets** and **Evaluating Human Rabies Risk from Animal Bites: Bats & Wild Animals**

## 4. Rabies Biologics and PEP Administration (refer to package insert)

- **Human Rabies Immune Globulin (HRIG)** – Administer once to previously unvaccinated patients, bite or non-bite exposure. Infiltrate full dose (20 IU/kg) of HRIG, if anatomically feasible, into and around wound areas. Inject remaining volume IM at a site distant from vaccine administration. HRIG should never be administered in the same syringe or in the same anatomical site as the first rabies vaccine. If non-bite exposure (i.e., bat in bedroom) inject HRIG into deltoid or anterolateral thigh muscle at a site distant to vaccine administration.
- **Rabies Vaccine** – Inject in deltoid muscle or anterolateral thigh muscle (for infants and small children).
- Never inject vaccine or HRIG into gluteal area due to potential for lower antibody titers (adipose depot).

### PEP for Patient *Not Previously Vaccinated*

Day	0	3	7	14
HRIG*	yes	-	-	-
Rabies** Vaccine	1.0 mL	1.0 mL	1.0 mL	1.0 mL

\*HRIG can be administered up to and including the seventh day (Day 7) after the first dose (Day 0) of rabies vaccine

\*\*Administer Day 28 only if patient is immunocompromised

OR

### PEP for Patient *Previously Vaccinated* (Patient has previously completed Pre-EP, PEP or has evidence of an adequate serological titer (RFFIT))

Day	0	3
Rabies Vaccine	1.0 mL	1.0 mL

### Administration Sites for Human Rabies Immune Globulin and Rabies Vaccine

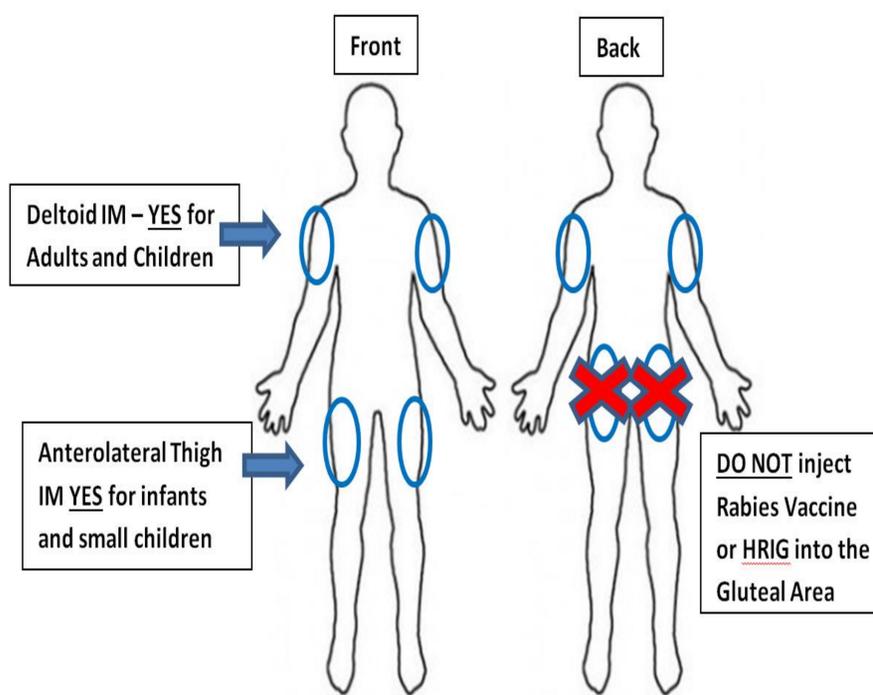


Figure adapted from Maricopa Co. DPH  
<https://www.maricopa.gov/publichealth/Programs/rabies/images/vaccineadmin.jpg>

### Contact Information

**North Carolina Communicable Disease Branch**  
 919-733-3419 (24/7)  
<http://epi.publichealth.nc.gov/cd/>



- CDC: <http://www.cdc.gov/rabies/> and <http://www.cdc.gov/tetanus/about/prevention.html>
- *Control of Communicable Diseases Manual*, 20<sup>th</sup> edition. American Public Health Association, 2015.
- Human Rabies Prevention---United States, 2008. Recommendations of the ACIP. <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr57e507a1.htm>
- Use of a Reduced (4-Dose) Vaccine Schedule for Postexposure Prophylaxis to Prevent Human Rabies: Recommendations of the Advisory Committee on Immunization Practices. <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5902a1.htm>

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