Rabies Post-Exposure Guidance

Use this flow chart to determine whether rabies post-exposure prophylaxis (PEP) is indicated for an individual with an animal exposure.
***It is the responsibility of the provider to initiate rabies PEP upon initial visit if deemed necessary. ***
Use the box at bottom left for rabies PEP dosing information.

Has exposure to an animal occurred?*

*Animal exposures can be defined as the following:
1) Bite Exposure – a penetration of the skin by the teeth.
2) Non-Bite Exposure – contamination of broken skin or mucous membranes with animal's saliva such as **scratches with claws from high-risk animals such as cats, raccoons or bats.**
3) Unknown Exposure – a situation where the individual's exposure cannot be determined. i.e **bat exposures which can be difficult to see.**

NO → **Rabies PEP not indicated.**

YES → What is the nature of the exposure?

Exposed to a bat, raccoon, fox, coyote, bobcat, otter or skunk.

Is the animal available for testing?

YES → Initiation of PEP upon initial visit is not indicated. Instruct the victim to follow-up with Animal Services for testing immediately.

NO → **RABIES PEP INDICATED**

If the exposure is to the head or neck region rabies PEP should be initiated and then discontinued if the animal tests negative.

Exposed to a cat, dog, or ferret.
outdoor cats are high risk

Is the animal available for observation or quarantine?

NO → **RABIES PEP INDICATED**

YES → **Initiation of rabies PEP upon initial visit is generally not indicated except in certain circumstances (see below).**

1) **Was the exposure unprovoked?** An unprovoked exposure is one that takes place for no apparent reason. An exposure while feeding is considered provoked.
2) **Was the animal ill or rabid-acting?** If known, past behavior should be taken into consideration.
3) **Is the animal a stray or not maintained as a pet?** Animals housed or living outside have a higher potential for being infected.
4) **Is the animal unvaccinated or is the vaccination status of the animal unknown?**

If one or more of these factors applies, discuss with the victim the options of testing the animal OR initiation of PEP before the end of quarantine.

Exposed to livestock, any other mammal or primate.*

Indicated on a case-by-case basis.
*Bites from a primate may require additional treatment.
Contact DOH-St. Johns Epidemiology Program
904-506-6081

ADMINISTERING RABIES PEP

Treatment for unvaccinated individuals:

- Appropriate wound care (and tetanus booster, as indicated). Wound cleaning is a critical part of rabies prevention.
- One-time dose of Human Rabies Immune Globulin (HRIG) at 20 IU/kg body weight (9 IU/lb) on **day 0**. If anatomically feasible, the full dose of HRIG should be infiltrated in the area around and into the wound(s). Any remaining volume should be administered IM at an anatomical site distant from vaccine administration.

AND

- 1.0 mL rabies vaccine IM in the deltoid area on **days 0, 3, 7, and 14**.

PLEASE NOTE: Rabies vaccine should **never be administered in the gluteal area due to reduced production of antibody.** Pregnancy is not a contraindication for receiving rabies PEP.

- Immunosuppressed individuals should receive a fifth dose of vaccine on **day 28** and have follow-up testing for RFFIT rabies neutralizing antibody within one to two weeks after the fifth vaccination.

Treatment for previously vaccinated individuals:

- HRIG should not be administered to individuals previously vaccinated after 1980.
- 1.0 mL rabies vaccine IM in the deltoid area on **days 0 and 3**.

For any questions regarding the administration of HRIG or PEP please contact your local health department.

For questions regarding exposures, call the Epidemiology Program: 904-506-6081

ALL animal exposures must be reported by fax to: 904-823-2380

Visit stjohns.floridahealth.gov to download the paper bite report.

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