

Rabies



Postexposure Prophylaxis

Administer Postexposure Prophylaxis (PEP) if a patient was bitten or otherwise exposed* to

1. A rabies-positive animal
2. A rabies vector species** that is unavailable for testing

Raccoons and bats are the most commonly reported rabid animals in New York City. Other animals that have tested positive include skunks, cats and opossums. For the most recent rabies statistics, visit nyc.gov/health/rabies.

Report bites to the Animal Bite Unit at 646-632-6074.

Once the bite is reported, the Health Department will contact the animal owner and the potentially exposed victim and provide guidance.

Do not start PEP if the patient was bitten by a dog or cat that is healthy and can be observed for 10 days. If the animal remains healthy during the observation period, the bite victim does not need PEP. If the dog or cat is unavailable for observation or testing, the need for PEP should be assessed on a case-by-case basis.

Patient's Status:	Never Vaccinated Patient has never received a complete regimen of either rabies pre-exposure or rabies PEP	Previously Vaccinated Patient has received a complete regimen of either rabies PEP for a previous exposure or rabies pre-exposure vaccination
1. Clean the Wound(s) Thoroughly irrigate with water or a dilute water povidone-iodine solution.	Always	Always
2. Administer Human Rabies Immune Globulin (HRIG) 20 IU/kg Thoroughly infiltrate the area in and around the wound(s) with a full dose of HRIG if possible. Otherwise, inject remaining volume IM in a site distant from the vaccine.	Always	Never
3. Vaccinate - IM Deltoid The lateral thigh can be used for children.	Always on days 0, 3, 7 and 14 Immunocompromised patients should receive an additional dose on day 28.	Always on days 0 and 3 only

DON'T

- ✗ Start PEP if the patient was bitten by a dog or cat that is healthy and can be observed for 10 days.
- ✗ Inject HRIG and vaccine at the same site.
- ✗ Inject vaccine or HRIG in the gluteus.
- ✗ Give HRIG to patients who have already received a complete regimen of PEP or rabies preexposure prophylaxis.

DO

- ✓ Infiltrate all wounds with HRIG, unless patient was previously vaccinated.
- ✓ Inject rabies vaccine in deltoid. In children, the thigh may also be used.
- ✓ Give tetanus booster, if appropriate.

Call the Health Department's Provider Access Line at 866-692-3641 if:

- HRIG was administered, but NOT at the bite site.
- HRIG was indicated, but not administered on day 0. If given more than 7 days after the first rabies vaccine, HRIG can interfere with the immune response.
- There are significant deviations in the vaccination schedule. Rabies PEP should be given on days 0, 3, 7 and 14. Deviations of a few days are not a great concern and the patient should resume the series. Maintain the recommended spacing between doses.
- PEP was initiated overseas.
- You are not sure if PEP is indicated.

* Rabies virus is most commonly and most efficiently transmitted through the bite of a rabid animal. While rare, the virus may also be transmitted through exposure of infectious saliva or neural tissue to a mucous membrane or an open wound. Always consider the possibility of an unrecognized exposure if a bat was found near someone who may have been unaware or unable to communicate if an exposure occurred.

** Rabies vector species in the United States include raccoons, bats, skunks, foxes, coyotes and mongooses (in Puerto Rico).