



Post-Exposure Rabies Treatment

1) Treatment of Wounds

Immediate and thorough washing of all bite wounds with soap and water as well as virucidal agent irrigation are important measures for preventing rabies. Tetanus prophylaxis and measures to control bacterial infection should also be administered as indicated.

2) Immunization: Patient not previously vaccinated against rabies

a) Rabies Vaccine:

1 mL IM - [HDCV, PCEC]*
Days 0, 3, 7, 14 & 28

b) Rabies Immune Globulin:

20 IU/kg body weight
Day 0

	Day				
	0	3	7	14	28
RIG	Yes	No	No	No	No
Rabies Vaccine	Yes	Yes	Yes	Yes	Yes

If it is not given on day 0, RIG may be administered until the 7th day after rabies vaccine is first administered. If anatomically feasible, the full dose should be infiltrated around the wound(s). Any remaining volume should be administered IM at an anatomical site distant from a muscle used for rabies vaccine administration.

2) Immunization: Patient previously vaccinated against rabies**

a) Rabies Vaccine:

1 mL IM - [HDCV, PCEC]*
days 0 & 3 only

b) Rabies Immune Globulin:

not indicated

	Day				
	0	3	7	14	28
RIG	No	No	No	No	No
Rabies Vaccine	Yes	Yes	No	No	No

* **HDCV** = Human Diploid Cell Vaccine (Imovax);
PCEC = Purified Chick Embryo Cell Vaccine (RabAvert)

** **Previously vaccinated:** person with a history of a complete pre-vaccination with HDCV, RVA or PCEC; a person with a complete post-exposure vaccination with HDCV, RVA or PCEC; a person with prior vaccination with any other type of rabies vaccine and a **prior** documented history of antibody response to rabies vaccination

Source: Centers for Disease Control and Prevention. Human Rabies Prevention—United States, 1999. *Recommendations of the Advisory Committee on Immunization Practices (ACIP)*. MMWR 1999;48(RR-1).

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