



## Public Health Services

7 Mellor Avenue, Unit #5

Dartmouth, NS B3B 0E8

Phone: (902) 481-5800

Fax: (902) 481-5889

Website: [www.nshealth.ca](http://www.nshealth.ca)

### Rabies Post-Exposure Prophylaxis Administration

Date \_\_\_\_\_

Dear \_\_\_\_\_:

Re: \_\_\_\_\_ DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (yy/mm/dd)

*The following outlines the protocol for rabies post-exposure prophylaxis (RPEP). RPEP consists of a series of rabies vaccine and one dose of rabies immune globulin. Additional information can be found in the package inserts for these products or in the Canadian Immunization Guide.*

**Please note that these products must remain refrigerated (between 2-8° C) at all times and should only be handled and stored where this can assured. If this temperature has not been maintained, please contact me immediately.**

#### **RABIES VACCINE (HDCV or PCECV):**

##### Series:

- ☐ **For immunocompetent persons previously not immunized:** The first dose of rabies vaccine is given as soon as possible after exposure (**day 0**). Subsequent doses are given on days **3, 7 and 14 days** after the first dose on day 0.
- ☐ **For immunocompromised persons and those taking chloroquine and other antimalarials previously not immunized:** The first dose of rabies vaccine is given as soon as possible after exposure (**day 0**). Subsequent doses are given on days **3, 7, 14 and 28 days** after the first dose on day 0.

##### Dose:

Each dose is 1 ml intramuscularly (IM)

##### Site:

Vaccine should be administered into the deltoid muscle in children and adults (**never in the gluteal region**) or into the anterolateral upper thigh in infants under 1 year of age.

##### Administration:

Reconstitute vaccine with needle and syringe provided. Administer vaccine using a new syringe and appropriate needle (25 gauge and appropriate length for IM injection - usually 1 or 1.5 inch)

Day 0 (First Dose)	Date due:
Day 3 (Second Dose)	Date due:
Day 7 (Third Dose)	Date due:
Day 14 (Fourth Dose)	Date due:
Day 28 (Fifth Dose) (only for immunocompromised and for those taking chloroquine and other antimalarials)	Date due:

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**RABIES IMMUNE GLOBULIN (RIG):**

**Seris:** A single dose of RIG is given as soon as possible after exposure (**day 0**).

**Dose:** The dose of rabies immune globulin is calculated based on weight in kilograms. The volume calculated based on weight should not be exceeded because of the possible interference with active antibody production.

**The dose of RIG in mLs is calculated as:  $[20 \text{ IU/kg} \times \text{Weight (kg)}] / 150 \text{ (IU/mL)}$**

We have calculated the RIG dose for this client to be \_\_\_\_\_ mLs using \_\_\_\_\_ kg as the weight.

You will be shipped \_\_\_\_\_ vials of RIG (each vial contains 2mLs). **The client's weight should be confirmed prior to RIG administration.**

**Site:** **Infiltrate as much RIG as possible around the wound site in order to neutralize the virus.**

When more than one wound site exists, each should be locally infiltrated with a portion of the RIG.

Because of the large volume to be injected, the remainder of the RIG should be given IM in the gluteal area, deltoid or the anterolateral thigh muscle. If there is no wound site, all of the rabies immune globulin should be given IM.

**Administration:** Due to the thickness of RIG, draw up and administer RIG using a 21 gauge needle(s) and appropriate length(s) for wound infiltration and IM injection. **Under no circumstances should rabies vaccine be administered in the same syringe or the same site as rabies immune globulin.**

**TETANUS:**

Tetanus prophylaxis is also an important consideration and the opportunity to update tetanus immunization should not be missed if indicated.

If you have any questions or concerns please contact:

Yours truly,

\_\_\_\_\_  
Signature

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Phone

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