

Pre-exposure (PrEP) and Post-exposure (PEP) Prophylaxis of rabies in humans

MEASURES BY THE...	PATIENT	PHYSICIAN	NURSE	PROGRAMME
Before the care of a bite	Clean the wound	Be trained for risk assesement	Management of rabies imunebiologicals stock	Inform epidemiological situation for healthcare professionals
During the care of a bite	Inform the physician about the circusntances of the bite	<ul style="list-style-type: none">• Provide care to the wound• Risk assesement• PEP, if recommended	<ul style="list-style-type: none">• Administration of PEP in Day 0• Report event	Registration of the healthcare
After the care of a bite	Show up at vaccination dates	Evaluate need to complete PEP in case of healthy dog/cat after 10 days	Complete PEP, in established doses and days. Find and locate patients that haven't show up to complete protocol	Follow up the health condition of the dog for 10 days

Risk Assesement Criteria for Exposure

- Severity of injury, extension of the wounds and location in the body affected: head, neck, hands.
 - Who was affected? Age, sex, occupation, immune status.
 - Type of contact: Bite, scratch, touch, lick.
 - Species and characteristics of the animal: How was the animal involved?
If it's a dog or cat, is it available for observation and what is its vaccination status?
- Animal vaccination status (dogs/cats).
 - Date of the attack and circumstances.
 - Local/regional/international rabies epidemiology.
 - Laboratory test results.

CATEGORY I

- Touching or feeding animals
- Licking intact skin
- Contact of intact skin with secretions or excretions from an animal or person with rabies

NOT considered as exposures

DO NOT REQUIERE PEP

CATEGORY II

- Small bite of uncovered skin
- Minor scratch or scrapes without bleeding

PEP
Without use of RIG

CATEGORY III

- One or multiple bites
- Transdermal scratches
- Linking in openings or injury
- Contact of the mucosal with saliva
- Exposure to bats or other wildlife animals

PEP
With the use of RIG

Is there any risk associated with the work if it is a health profesional?

YES

PrEP

NO

EDUCATE

Post-Exposure Prophylaxis

Clean the wound for 10 minutes with flowing water and soap.

Protocols for Post-Exposure Prophylaxis

Protocol and schedule	Day and doses to be applied				
	Day 0	Day 3	Day 7	Day 14	Day 21
IM in 2 weeks	1	1	1	1	0
IM in 3 weeks	2	0	1	0	1
ID in 1 week	1*	1*	1*	0	0

IM Intramuscular; ID Intradermal; * 1 dose equals to two 0.1mL applications/injections per visit.

Rabies immunoglobulin (RIG)

- Once at Day 0, or maximum at Day 7 from begging of PEP.
- Infiltrate the wound, and around it, just the necessary volume.
- If there is no wound/scar, administrate RIG intramuscular.
- Max. Dose: 40 UI/Kg for Equine IG; and 20 UI/Kg for Human IG.

Person vaccinated previously due to another exposure:

- **Up to 6 months:** do not requiere to repeat vaccination or booster shot.
- **More than 6 months:** Provide booster (2 doses, one at Day 0 and one at Day 3).

Person returning from a delay in receiving doses:

Complete the protocol regardless of the delay.

Protocols for Pre-Exposure

Protocol and schedule	Days and doses to apply	
	Day 0	Day 7
IM in 1 week	1	1
ID in 1 week	1*	1*

IM Intramuscular; ID Intradermal;
* 1 dose equals to two 0.1mL applications/injections per visit.