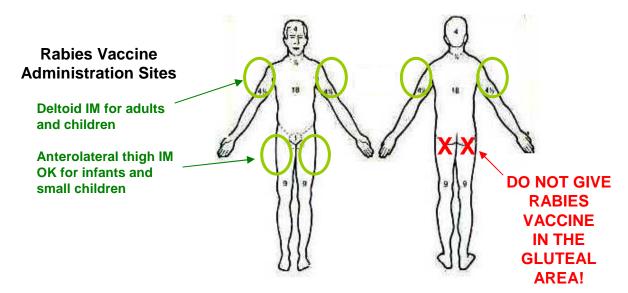
## Human Rabies Immune Globulin and Rabies Vaccine Administration



## Human Rabies Immune Globulin (HRIG)

**Schedule:** HRIG is administered only once, at the beginning of anti-rabies prophylaxis, to previously unvaccinated persons to provide immediate antibodies until they respond to the vaccine by actively producing antibodies of their own.

If HRIG is not administered when vaccination has begun, it can be administered up to seven days after the administration of the first dose of vaccine. Beyond the seventh day, HRIG is not recommended since an antibody response is likely to have occurred.

<u>Dosage:</u> The recommended dose of HRIG is 20 IU/kg body weight for ALL ages. Because HRIG can partially suppress active production of antibody, no more than the recommended dose should be administered.

**Route and Sites of Administration:** If anatomically feasible, the full dose of HRIG should be thoroughly infiltrated in the area around and into the wounds. Any remaining volume should be injected **intramuscularly** (IM) at a site distant from vaccine administration *The gluteal muscle is an acceptable site for HRIG, <u>but NOT for rabies vaccine.</u>* 

HRIG should never be administered in the same syringe or in the same anatomical site as the first vaccine dose. However, subsequent doses of vaccine in the four-dose series can be administered in the same anatomic location where the HRIG dose was administered.

## **Rabies Vaccine**

Suspected human rabies exposures to King County residents must be immediately reported to Public Health at 206-296-4774. Low risk bites need not be reported. If giving rabies post-exposure prophylaxis (PEP), consult with Public Health, ideally before initiating PEP. All PEP should begin with immediate thorough cleansing of wounds that were potentially contaminated with an infected mammal's saliva or neural tissue. For a summary of healthcare provider guidelines for human rabies prevention, go to www.kingcounty.gov/health/cd, and click on "R" then "Rabies."

**Schedule and Dosage:** The date the first dose of the vaccine series is given is considered day 0. For previously unvaccinated persons, additional doses should be administered on days 3, 7, and 14; immune compromised individuals need an additional dose on day 28. Previously vaccinated persons should receive two IM doses, one immediately and one three days later. The dosage is 1.0 ml IM per dose for all ages.

**<u>Route and Sites of Administration</u>**: Rabies vaccine should be administered **intramuscularly in the deltoid** for adults and children. Use the anterolateral thigh for infants.

The gluteal area should never be used for rabies vaccine injections because administration in this area can result in lower antibody titers. Doses of rabies vaccine administered in the gluteal site should not be counted as valid doses and should be repeated.





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