

RABIES POST-EXPOSURE PROPHYLAXIS (PEP) – WHAT YOU NEED TO KNOW

Rabies is a disease of the nervous system caused by a virus that can occur in humans and animals. The virus is spread to people from the saliva of infected animals, usually through a bite. In rare cases, rabies can be spread when infected saliva gets into an open wound or the mucous membranes, such as the mouth or eyes. Any potential contact with a bat should be considered a risk of rabies exposure since bites or scratches from a bat can be too small to see or even feel.

In Utah, the most common positive rabid animals are bats. Raccoons, skunks, foxes, coyotes, dogs, cats and ferrets can also be infected, but this is uncommon.

Rabies in humans is deadly almost 100% of the time. Anyone who has exposure to a potentially rabid animal should call their healthcare provider and/or [Local Health Department](#) immediately. Contact [Animal Control](#) or the [Division of Wildlife Resources](#) for help in trapping wild animals for rabies testing, or help with quarantine (separation of animal) and observation of any biting domestic animal. If it is at all possible, testing or watching the animal for any symptoms is very important to determine whether post-exposure prophylaxis (PEP) is needed. If the animal tests positive for rabies or cannot be tested or quarantined, it is highly recommended to begin PEP as soon as possible to prevent rabies infection.

PEP consists of a single dose of Human Rabies Immune Globulin (HRIG) injected at the site of the bite, and four doses of rabies vaccine given on days 0, 3, 7 and 14. HRIG provides immediate protection until the body can respond to the vaccine by actively producing immunity. Rabies vaccines are given in your arm, similar to a flu shot. If a person has a weakened immune system, a 5th vaccine dose may be recommended.

HRIG and the first rabies vaccine should be given as soon as possible after the exposure. This first treatment (day 0) typically will be given in a hospital emergency room. Click on the link below for more information on where to go for PEP.

If given properly and soon after exposure, PEP is 100% effective in preventing rabies. Most health insurance covers rabies PEP, but you should check with your healthcare provider so that you are prepared. If you are underinsured or uninsured, we recommend that you reach out to the vaccine manufacturers for information on their [financial assistance programs](#).

Click [here](#) to find PEP providers in your area



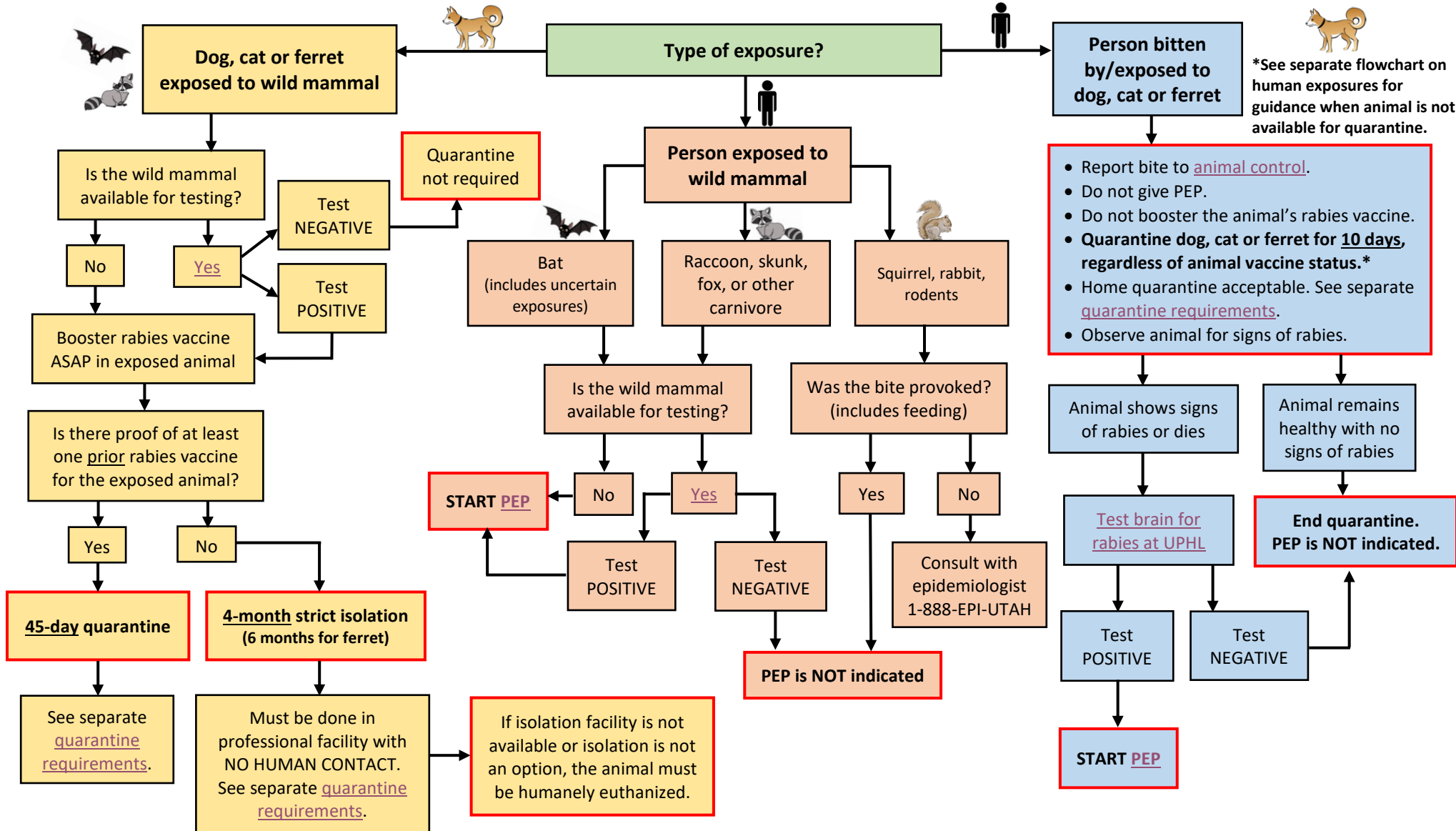
Rabies Post-Exposure Prophylaxis (PEP)

	Date	Hospital/Clinic where PEP dose was administered	Notes
Day 0: HRIG + 1 st Vaccine			
Day 3: 2 nd Vaccine			
Day 7: 3 rd Vaccine			
Day 14: 4 th Vaccine			
<i>Immunosuppressed patients ONLY –</i> Day 21: 5 th vaccine			

Rabies Prevention Guidelines

This flowchart can be used by rabies response partners or affected individuals to determine the best next steps in rabies prevention.

“Exposure” is defined as a bite, scratch, or any contact with saliva or brain/nervous tissue through open cuts in the skin, scratches, or mucous membranes. Any possibility of contact with a bat is also considered a risk of rabies exposure, since bites or scratches from a bat can be too small to see or feel. If there is uncertainty around exposure (i.e. bat found in a child’s bedroom), proceed as if an exposure did occur.



*See separate flowchart on human exposures for guidance when animal is not available for quarantine.

- Report bite to [animal control](#).
- Do not give PEP.
- Do not booster the animal’s rabies vaccine.
- **Quarantine dog, cat or ferret for 10 days, regardless of animal vaccine status.***
- Home quarantine acceptable. See separate [quarantine requirements](#).
- Observe animal for signs of rabies.