



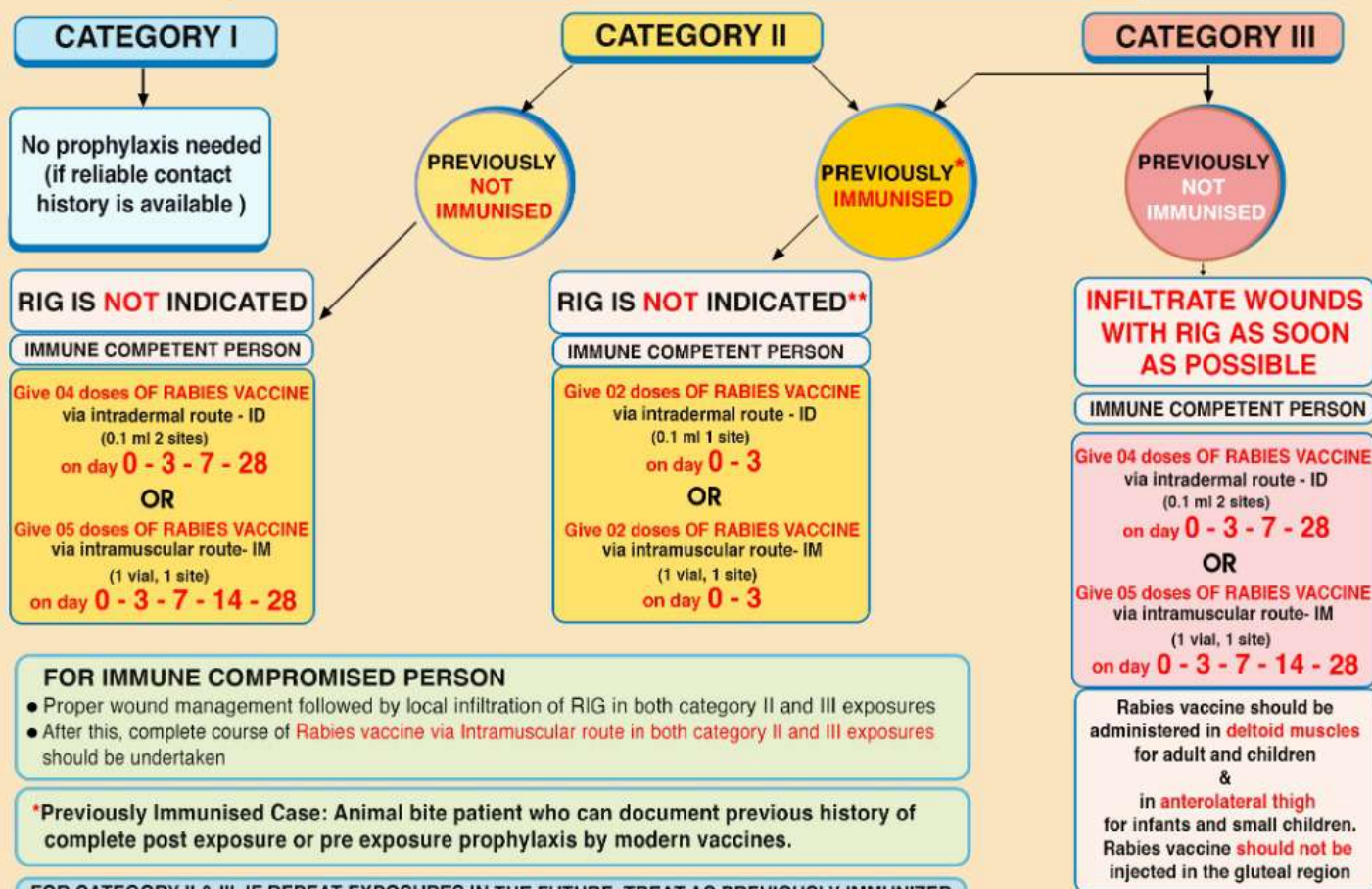
# PROTOCOL FOR RABIES POST EXPOSURE PROPHYLAXIS AFTER ANIMAL BITE

## DECISION TO TREAT

	<b>CATEGORY I</b> • Touching or feeding of animals • Licks on intact skin		Gently wash all scratches or wounds with mild soap and running water for atleast <b>"15 minutes"</b> irrespective of exposure category to decrease viral load	No prophylaxis needed (if reliable contact history is available)
	<b>CATEGORY II</b> • Nibbling of uncovered skin • Minor scratches or abrasions without bleeding			ONLY RABIES VACCINATION
	<b>CATEGORY III</b> • Single or multiple transdermal bites or scratches. • Licks on broken skin. • Contamination of mucous membrane with saliva.			RABIES VACCINATION + RIG INFILTRATION

\*All categories of bite should be reported in NRCP monthly report.

## POST EXPOSURE PROPHYLAXIS PROTOCOL



## RABIES IMMUNOGLOBULIN - RIG DOSAGE

- The maximum dosage for HRIG is 20 IU/Kg of the body weight and that of ERIG is 40 IU/Kg of bodyweight.
- The entire immunoglobulin dose or as much as anatomically feasible but possibly avoiding compartment syndrome, should be carefully infiltrated into or as close as possible to the wound(s) or exposure site.
- Do not give RIG beyond the 7th day after the 1st vaccine dose on day 0.
- \*\*In previously vaccinated individual/s where direct nerve exposure is suspected treating physician may consider RIG infiltration



\*NRCP ADVOCATES INTRADERMAL ROUTE FOR RABIES VACCINE ADMINISTRATION

## NATIONAL RABIES CONTROL PROGRAMME

ADOPT ONE HEALTH, STOP RABIES

