

# Rabies Post-Exposure Treatment

## Medication Fast Facts

### Rabies Immune Globulin

- **Trade Names:** HyperRab S/D© and Imogam Rabies©
- **How Supplied:** 150 units/mL - 10 mL and 2 mL vial sizes available **\*\* Dispensed by Pharmacy\*\***
- **PLEASE NOTE – RN MUST SEND EDA TO PICKUP PRODUCT FROM ADULT IN PATIENT PHARMACY**
- **Mechanism of Action :** Provides passive immunity to patient via human donor globulins that have been vaccinated and have high rabies antibody titers
- **Dose :** 20 units/kg on day 0 only of exposure treatment ( NOTE- dose may be rounded to the nearest whole vial size when dispensed by the pharmacy)
- **Administration Details :**
  - Wound should be cleaned and irrigated before administration
  - Immune globulin should be infiltrated both within and surrounding the wound. Attempt to infiltrate as much of the total dose into and around the wound site as possible
  - If there is dose remaining after the site has been infiltrated, the rest may be administered as an IM injection(s) in a remote site on the SAME SIDE of the body in the deltoid or lateral thigh muscle  
(*ex: if the wound is on the left hand, the remaining immune globulin can be administered IM in the left arm or thigh*)
    - If there is a large volume left over after wound infiltration (>3 mL) and more than one IM injection is necessary, the patient can receive those IM injections in different sites on the SAME SIDE
- **Do NOT:**
  - Administer rabies immune globulin in the gluteal area to reduce the risk of sciatic nerve damage
  - Administer rabies immune globulin to patients who have already started their rabies vaccine series and have already received vaccine days 0 and 7. (If the patient is still within the first seven days of treatment, they can still receive the rabies immune globulin)
  - Administer to patients who have had pre-exposure prophylaxis or have already received a post-exposure series of vaccine from a previous bite

### Rabies Vaccine

- **Trade Names:** Imovax© and RabAvert©
- **How Supplied:** 2.5 units/mL – 1 mL single dose vials **\*\* Dispensed via Pyxis\*\***
- **Mechanism of Action:** Inactivated virus that induces active immunity by creating antibodies within 7-10 days of exposure. (*So the immune globulin helps to bridge the patient until they develop their own antibodies*)
- **Dose:** 2.5 units (1 mL) IM given on days 0, 3, 7, and 14
  - **\*\* Note\*\*** Patients who are immunocompromised should receive 5 doses (0, 3, 7, 14 and 28)
- **Administration Details:**
  - Dose should always be administered IM in the deltoid or lateral thigh
  - Because the vaccine can decrease the efficacy of the immune globulin, the vaccine should be administered on the OPPOSITE side of the body from the immune globulin  
(*ex: if the patient received the remainder of their immune globulin injection in the left deltoid, then the vaccine should be given in the right side of the body*)