

Table 3. Rabies Postexposure Prophylaxis Schedule — U.S. 1999

- All postexposure treatment should begin with immediate and thorough cleansing of all wounds with soap and water. If available, a virucidal agent such as a povidone-iodine solution should be used to irrigate the wounds.

PATIENT NOT PREVIOUSLY VACCINATED[%]

- **Rabies immune globulin (RIG):** Administer 20 IU/kg body weight. If anatomically feasible, infiltrate the full dose around the wound(s); any remaining volume should be administered intramuscularly (IM) at an anatomical site distant from the vaccine administration. RIG should not be administered in the same syringe as vaccine.
Because RIG might partially suppress active production of antibody, give no more than the recommended dose.
- **Vaccine:** Human diploid cell vaccine (HDCV), rabies vaccine adsorbed (RVA), or purified chick embryo cell vaccine (PCEC) 1.0 mL IM (deltoid area⁺), one each on days 0⁺⁺, 3, 7, 14, and 28.

PATIENT PREVIOUSLY VACCINATED^{%§}

- **RIG:** RIG should not be administered.
- **Vaccine:** HDCV, RVA, or PCEC 1.0 mL IM (deltoid area), one each on days 0⁺⁺ and 3.

[%] These regimens are applicable for all age groups, including children.

⁺ The deltoid area is the only acceptable site of vaccination for adults and older children. For younger children, the outer aspect of the thigh may be used. Vaccine should never be administered in the gluteal area.

⁺⁺ Day 0 is the day the first dose of vaccine is administered.

[§] Any person with a history of preexposure vaccination with HDCV, RVA or PCEC; prior postexposure prophylaxis with HDCV, RVA, or PCEC; or previous vaccination with any other type of rabies vaccine and a documented history of antibody response to the prior vaccination.

Source: Centers for Disease Control and Prevention. Rabies prevention—United States, 1999. *MMWR Morbid Mortal Wkly Rep* 1999;48(RR-1):1-21.