

*Stray dogs, cats or ferrets causing a face or neck bite to a person should be tested for rabies rather than quarantined.

Management of Human Patients with Possible Rabies Exposure

- A. Individuals bitten on the head or neck by a high-risk animal (wild carnivore, raccoon, or stray dog, cat or ferret) may need post-exposure prophylaxis (PEP) as soon as possible after the exposure.
 If the animal is not rabid (tests negative), PEP may be discontinued. For consultation, contact your local county health department.
- B. Because of the association of human rabies in the U.S. with bat rabies variant, PEP is recommended in situations where there is a reasonably high probability that contact with bats occurred (e.g., awakening to find a bat in the room, or an adult witnesses a bat in a room with a previously unattended child).
- C. Animals with no rabies risk include reptiles, birds and fish. Animals with virtually no rabies risk include animals reared in an environment where exposure to rabies can be eliminated.
- D. No definitive observation periods exist for other mammals. However, large domestic animals such as horses and cows, if apparently healthy, may be confined and observed for clinical signs compatible with rabies at the discretion of the county health department.
- E. Rabies PEP consists of human rabies immune globulin (HRIG) and rabies vaccines. For persons NOT previously immunized against rabies, HRIG is given once (20 IU/kg) as much as possible is infiltrated at the site of the wound and the remainder administered intramuscularly (IM) away from the vaccination site. Four 1.0 ml doses of rabies vaccine should be administered IM in the deltoid, one on day 0, 3, 7, and 14. For persons previously immunized against rabies, HRIG should NOT be given and only two doses of vaccine administered IM, one on day 0 and one on day 3.

For more information, consult the Rabies Prevention and Control in Florida guidance documents.

www.floridahealth.gov/diseases-and-conditions/rabies/index.html