

Date: Wednesday, November 13, 2019
To: Central Zone Emergency Medicine Physicians; Emergency Department Staff;
U of A Rural Family Medicine Program; Laura Fowler, Clinical Educator
CC: Communicable Disease Control; Public Health
From: Dr. Digby Horne , Medical Officer of Health – Central Zone

**Re: Revisions to the procedure for administering *Rabies Immune Globulin (RIG)*
as part of Rabies Post-Exposure Prophylaxis in Emergency Departments (EDs)**

Please be advised that the provincial shortage of rabies vaccine and RIG has been resolved.

The Alberta Advisory Committee on Immunization has advised that recommendations for the use of RIG should revert to those used before the shortage. This means that a total dose of 20 IU/kg should be administered, with as much as possible being infiltrated locally into the wound site (without compromising nerves, blood vessels, and muscles). The remaining portion of the total dose should be administered intramuscularly, typically in the anterolateral thigh.

Recommendations relating to the use of rabies vaccine as part of post-exposure prophylaxis in the Emergency Department setting remain unchanged.

Complete instructions for the administration of RIG and rabies vaccine accompany each Rabies Post Exposure Prophylaxis kit provided to EDs.

Thank you for attention and assistance.

Dr. Digby Horne, MD
Medical Officer of Health
Alberta Health Services, Central Zone

Enclosure

Instructions to Emergency Departments for Administering Rabies Vaccine and Rabies Immune Globulin (RIG) supplied by Public Health for Rabies Post-Exposure Prophylaxis

Post-Exposure Prophylaxis:

- 2 products are required: Rabies Immune Globulin (RIG), and rabies vaccine.
- ***Rabies vaccine and RIG must be administered with separate needles and syringes at separate anatomical sites.***

Rabies Immune Globulin:

- Total Dose: 20 IU/kg
Note: Concentration of IU/ml of product may differ by manufacturer.
- Administration site:
 - As much RIG as possible should be infiltrated deep into and around the wound(s) without compromising nerves, muscles, and blood vessels. When more than one wound exists, each site should be infiltrated with a portion of the RIG, using a separate syringe and needle for each infiltration. **Any remaining RIG should be administered intramuscularly at a site distant from rabies vaccine administration** (see next paragraph for description of sites). *If there are extensive wounds, such that the total dose of RIG (by weight) is not adequate in volume to infiltrate all wounds, dilute the RIG using manufacturer-recommended diluents and proportions to create an adequate volume to infiltrate all wounds.*
 - When there is no wound site, the preferred site for the administration of RIG is the vastus lateralis (mid portion of the anterolateral thigh). The deltoid should not be used for RIG administration. Both deltoid sites should be reserved for administration of rabies vaccine.

Rabies Vaccine:

- Dose: 1.0 ml
- Administration site:
 - For infants and children less than 12 months of age, the site for immunization is the anterolateral thigh.
 - For infants greater than or equal to 12 months of age and adults, the preferred site is the deltoid muscle.
- **DO NOT GIVE RABIES VACCINE IN THE GLUTEAL REGION.**

Questions: Please contact the Medical Officer of Health on-call: 403-356-6430

Updated: November 7, 2019