

SUBJECT: Local Rabies Risk & Duty to Report Animal Bites and Incidents
Date: May 19, 2022
Pages: 5 (including 4 attachments)
To: Physicians and Healthcare Providers
From: Dr. Nicola Mercer, Medical Officer of Health & CEO

Rabies Risk

Rabies is a fatal disease. Careful assessment and post-exposure treatment should not be delayed with patients who have had exposure to wildlife or domestic animals. In 2020, seven bats and one skunk tested positive for rabies in Wellington-Dufferin-Guelph and in 2021, no animal tested positive for rabies.

Duty to Report

Healthcare professionals are required by law to report all incidents that have the potential to transmit rabies to humans (i.e. bites, scratches, saliva or mucous membrane contact). (*Duty to Report, Ontario Regulation 557, Section 2 [1] under the Health Protection and Promotion Act.*)

Reporting Bites and Contact Incidents

When you are reporting a bite or contact incident, please do one of the following:

1. Fill out the attached Rabies Exposure Report and fax to 1-855-934-5463.
Copies of this form can also be found at wdgpublichealth.ca under the Healthcare Providers tab.
OR
2. Call to leave a detailed message for a Public Health Inspector:
Monday-Friday (8:30 a.m. – 4:30 p.m.) 1-800-265-7293 ext. 4753
After Hours/Holidays 1-877-884-8653

Treating Exposures

For treatment guidelines, refer to the attached Rabies Vaccine and Immune Globulin Information. Copies of these guidelines are also available at wdgpublichealth.ca under the Healthcare Providers tab.

For more information, please contact:

Name/Title: Paul Medeiros, Manager, Environmental
Phone: Health 1-800-265-7293 ext. 4230
Website: www.wdgpublichealth.ca



Rabies Exposure Report

Complete and Fax ASAP to: 1-855-934-5463

Reporting Agency: _____ Date: _____

Phone Number: _____ Date of Incident: _____

| Owner/Animal Information | Victim Information |
|--|--|
| Owner Name: _____ _____ Address: _____ _____ Phone Number: _____ Type of Animal: <input type="checkbox"/> Cat <input type="checkbox"/> Dog <input type="checkbox"/> Bat <input type="checkbox"/> Other: _____ Details of Incident: _____ _____ _____ _____ | Victim Name: _____ Address: _____ _____ Phone Number: _____ DOB: _____ Sex: <input type="checkbox"/> M <input type="checkbox"/> F Weight: _____ kg/lb Name of Guardian: _____ Type of Exposure: <input type="checkbox"/> Bite <input type="checkbox"/> Scratch <input type="checkbox"/> Handling <input type="checkbox"/> Other <input type="checkbox"/> Unknown Location of Wound: _____ |

| Check box if rabies post-exposure prophylaxis started at hospital <input type="checkbox"/> | | | |
|--|------------|-------------|-----------------|
| | Lot Number | Expiry Date | Number of Vials |
| Vaccine Issued | | | |
| Immune Globulin Issued | | | |

The information on this form is collected under the authority of the *Health Protection and Promotion Act* in accordance with the *Municipal Freedom of Information and Protection of Privacy Act* and the *Personal Health Information Protection Act*. This information will be used for the delivery of public health programs and services; the administration of the agency; and the maintenance of healthcare databases, registries and related research, in compliance with legal and regulatory requirements. Any questions about the collection of this information should be addressed to the Privacy Officer.

Rabies Vaccine and Immune Globulin Information

Assessing Need for Post-exposure Prophylaxis (PEP)

The rabies virus is shed in the saliva of infected mammals and can be transmitted via a bite wound, open cuts in the skin, or mucous membranes. The following should be considered:

- **Domestic Animals:** In Canada, rabies is generally less likely. If a dog, cat or ferret is healthy and available for 10 day observation, PEP is not usually required. The exception is a bite to the head or neck region or a severe wound. Please consult Public Health for input on risk assessment in these cases.
- **Non-domestic Animals:** PEP should begin immediately following exposure to a wild terrestrial carnivore (such as a fox, skunk or raccoon) unless the animal is available for testing and rabies is not considered likely.
- **Bats:** When there is a known bat bite, scratch or saliva exposure to a wound or mucous membrane, rabies PEP should be initiated immediately. For suspect bat bites or scratches please consult Public Health.

Post-exposure Prophylaxis for Non-immunized Individuals

| Treatment | Regimen |
|------------------------------|---|
| Wound Cleansing | Thorough cleaning and flushing the wound with soap and water is an important post-exposure measure. |
| Rabies Immune Globulin (RIG) | 20 IU/kg body weight administered once on day 0. Each 2 mL vial contains 300 IU (150 IU/mL). If possible, the full dose of RIG should be infiltrated into the wound(s) and surrounding area. With multiple wounds divide the RIG among the wounds. Any remaining volume of RIG should be injected IM at a muscle site proximal to the bite. If the wound site is unknown or in the head/neck the RIG can be given IM in large muscle groups. Do not exceed the RIG dose. Do not administer RIG in the same syringe as the vaccine or at the same site as the vaccine. |
| Rabies Vaccine | IMOVAX® or RabAvert® 1.0 mL, IM (deltoid area; anterolateral thigh in infants), one each on days 0, 3, 7 and 14. Never administer vaccine to the gluteal area. For immunocompromised persons and those taking antimalarials a fifth dose of vaccine should be given on day 28. |

Post-exposure Prophylaxis for Immunized Individuals

| Treatment | Regimen |
|-----------------|--|
| Wound Cleansing | Thorough cleaning and flushing the wound with soap and water is an important post-exposure measure. |
| Rabies Vaccine | IMOVAX® or RabAvert® 1.0 mL, IM (deltoid area; anterolateral thigh in infants), one each on days 0 and 3. Never administer vaccine to the gluteal area. |

Rabies Vaccines and Immunoglobulin Available in Canada

Rabies Vaccines: IMOVAX® Rabies, RabAvert®

Rabies Immune Globulins: Imogam® Rabies Pasteurized, HyperRAB® S/D

Store and transport vaccines and RIG between 2°C and 8°C; do not freeze.

Missed Doses

Patients should be encouraged to complete vaccine schedule as closely as possible and to receive all recommended doses. Minor variations from the schedule are not significant. **If a dose of vaccine is delayed, it should be given as soon as possible and the schedule resumed with the same interval between doses.** The prescribed vaccination schedule represents the minimum interval between doses.

If RIG is not administered as recommended at the initiation of the rabies vaccine series, RIG can be administered up to day 7 after vaccine is initiated.

Contraindications and Precautions

There are no definite contraindications to rabies vaccine after significant exposure to a proven rabid animal.

- **Pregnancy and lactation** are not contraindications to post-exposure rabies prophylaxis, but it is prudent to delay **pre**-exposure immunization of pregnant women unless there is a substantial risk of exposure.
- **Egg allergy:** IMOVAX® Rabies is the preferred vaccine for those with a severe hypersensitivity reaction to egg or egg products.
- **Interaction with other vaccines:** MMR or varicella vaccine effectiveness is affected if given either two weeks prior to or up to 4 months after receiving RIG.

Common and Local Adverse Events

For both rabies vaccines and RIG, the most common adverse events are local reactions at the injection site (pain, erythema, swelling and induration). With RIG, systemic reactions such as headache and low-grade fever are also common. Please consult Public Health for significant or unusual adverse events following immunization.

Contact Us

- 1-800-265-7293 (Inspection: ext. 4753 / Clinical Consultation: ext. 4744)
- After Hours / Emergency: 1-877-884-8653
- Fax: 1-855-934-5463

Rabies Vaccine and Immune Globulin

Patient Vaccination Schedule

You must complete the full rabies vaccination series to be protected. If a scheduled dose must be delayed, the remaining doses must be rescheduled to maintain the minimum intervals outlined below.

If you received your first dose (Day 0) at the hospital, Public Health will contact you to arrange delivery of the remaining doses of vaccine to your family doctor or a walk-in clinic. If these options are not available, you may be able to receive your remaining vaccinations at a Public Health Office. Contact Wellington-Dufferin-Guelph Public Health for more information at 1-800-265-7293 ext. 4753 or PHI.Intake@wdgpublichealth.ca.

Patient Name: _____ **Weight:** _____

Family Doctor: _____

| | | | |
|----------------|----------------------------------|-------------------------------------|--------------|
| RIG | <input type="checkbox"/> Imogam® | <input type="checkbox"/> HyperRAB® | Notes: _____ |
| Vaccine | <input type="checkbox"/> IMOVAX® | <input type="checkbox"/> RABAvvert® | Notes: _____ |

| | | | | |
|---------------|-------|--------------------------|--------------|-------|
| Day 0: | _____ | (20 IU/kg body wt) | _____ mL RIG | Notes |
| | Date | | | |
| | | AND | | |
| | | 1.0 mL rabies vaccine IM | | Notes |

| | | | | |
|-----------------|-------|--------------------------|-------|-------|
| Day 3: | _____ | 1.0 mL rabies vaccine IM | _____ | Notes |
| | Date | | | |
| Day 7: | _____ | 1.0 mL rabies vaccine IM | _____ | Notes |
| | Date | | | |
| Day 14: | _____ | 1.0 mL rabies vaccine IM | _____ | Notes |
| | Date | | | |
| Day 28*: | _____ | 1.0 mL rabies vaccine IM | _____ | Notes |
| | Date | | | |

*For immunocompromised patients or those taking antimalarials only