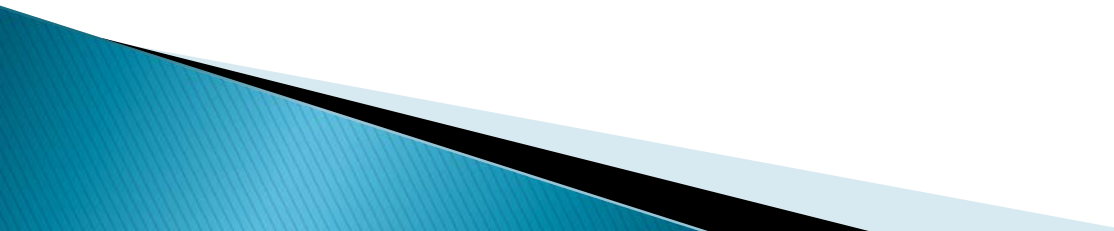


# Rabies Program Basics for Local Health Departments

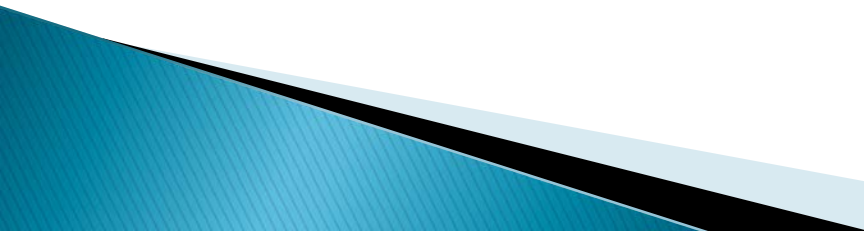
Dr. Carl Williams, DVM  
State Public Health Veterinarian  
North Carolina Division of Public Health  
Medical Consultation Unit

Jodi Reber, RN  
Vectorborne Nurse Consultant  
North Carolina Division of Public Health  
Medical Consultation Unit

# Rabies Program Basics for Local Health Departments

- ▶ Wake AHEC requires all speakers to disclose any relevant financial conflicts of interest.
  - ▶ Dr. Carl Williams has no relevant financial conflicts of interest to disclose.
  - ▶ Jodi Reber has no relevant financial conflicts of interest to disclose.
- 

# Program Objectives

- ▶ Identify components of local health department rabies program.
  - ▶ Understand the basics of rabies disease, North Carolina rabies laws and epidemiology in N.C.
  - ▶ Understand the components of human rabies risk assessment.
  - ▶ Recognize rabies situations that require additional assessment criteria or consultation with DPH.
- 

# Basics of LHD Rabies Program Infrastructure

- ▶ As a LHD do you have a structured rabies programs?

Policies

Designated Rabies Staff

Effective and Timely Communication

Rabies Information

# Agreement Addenda 510

## Division of Public Health Agreement Addendum FY 14–15

Page 1 of 4

<hr/> <b>Local Health Department Legal Name</b>	<hr/> <b>Epidemiology/Communicable Disease Branch</b>
<hr/> 510 - General Communicable Disease Control	<hr/> <b>DPH Section/Branch Name</b>
<hr/> <b>Activity Number and Description</b>	<hr/> Kathryn Dail, 919-715-7396
<hr/> June 1, 2014 – May 31, 2015	<hr/> kathy.dail@dhhs.nc.gov
<hr/> <b>Service Period</b>	<hr/> <b>DPH Program Contact</b>
<hr/> July 1, 2014 – June 30, 2015	<hr/> (name, telephone number with area code, and email)
<hr/> <b>Payment Period</b>	<hr/> <b>DPH Program Signature</b> <b>Date</b>
	<hr/> (only required for a <u>negotiable</u> agreement addendum)

# Agreement Addenda 510

## I. Background:

(Go to third paragraph.....)

North Carolina General Statute includes specific laws related to specific communicable diseases such as HIV infection, sexually transmitted infections, tuberculosis disease and rabies. Per NCGS 130A-41(b) 10, the Local Health Director is responsible for examination, investigation, and control of rabies. While these functions may be delegated to local animal control or law enforcement agencies, it is essential that human rabies risk assessments be handled by formally trained health care providers.

<http://epi.publichealth.nc.gov/cd/lhds/manuals/cd/agreement/510AATemplate.pdf>

# Agreement Addenda 510

## III. Scope of Work and Deliverables:

3  
i LHD agrees to maintain a policy incorporating all of the aforementioned items. This policy will be electronically available to Regional Communicable Disease Nurse Consultant upon request.

4. Per NCGS 130A-41(b)10, the Local Health Director is responsible for examination, investigation, and control of rabies.

LHD clinical staff will provide guidance to persons, utilizing the North Carolina Rabies Manual, <http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/toc.html>, pertaining to:

- Obtaining rabies pre-exposure immunization
- Human rabies risk assessment
- Rabies post-exposure prophylaxis in persons
- Sending staff to regional training

# Meeting AA510 FY14-15 Requirements

**Have Infrastructure in  
place by June 30, 2015.**





# Rabies Infrastructure: Staff

- ▶ Identify agencies to be involved in Rabies Program
  - Local Health Department Clinical Staff
  - Animal Control Agency or Environmental Health
  - Sherriff's Department
- ▶ Identify and Train Designated Staff in Rabies Program



# Availability of Staff

Staff should be available 24/7 to answer rabies related questions.

Local County Health Department

**Action Dates**

Approval: \_\_\_\_\_

Revisions: \_\_\_\_\_

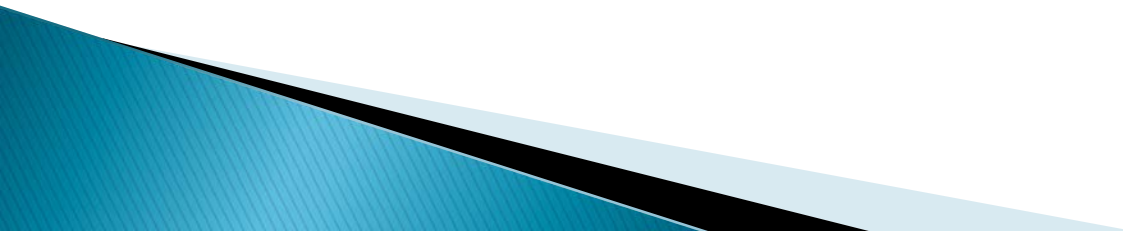
Effective: \_\_\_\_\_

Next Review: \_\_\_\_\_

Policy Title: 24/7 Response for Communicable Disease  
No. [Example X.XXX-0X]

Purpose: This policy sets the standard for the health department to respond to reports of communicable disease within their jurisdiction on a 24 hour/7 day a week basis.

Policy: The local health department will investigate and implement control measures for all reports of communicable disease according to local and state laws and in accordance with the recommendations of the Centers for Disease Control and Prevention.





# Guidance Documents

## North Carolina Rabies Public Health Program Manual February 2013

[http://epi.publichealth.nc.gov/cd/lhds/  
manuals/rabies/toc.html](http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/toc.html)

(Additional resources are referenced in this manual)

**Resources:**

**DPH Rabies On-Call Staff**

**Available 24/7:**

**(919) 733-3419**





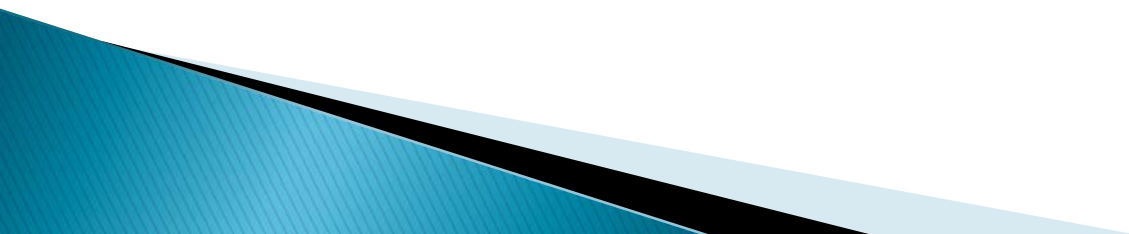
# Rabies Infrastructure: Policies

Policies will be county specific due to county specific decisions.

What agencies are involved in the Rabies Program?

Do we allow a 10 day home confinement?

Do we administer Post-Exposure Prophylaxis?





# Rabies Infrastructure: Policies

Agencies and staffing roles should be clearly defined in policy.



# Rabies Infrastructure: Policies

LHDs play a role in giving guidance .....so if they do not provide a service, need to be able to give guidance on where the service can be obtained.

Example: Where would someone be told to go and get rabies post-exposure prophylaxis is not offered at LHD?

# Rabies Infrastructure: Memorandum of Understanding

Interagency staff can work off of agency policies.

Outside agencies do not follow other agency policies, therefore Memorandum of Understandings are put in place to define working relationships and resources.



# Rabies Infrastructure: Memorandum of Understanding

Is the following an interagency or  
outside agency to your local health  
department?

Animal Control Services  
Environmental Health  
Sherriff's Department  
Hospital





# Rabies Infrastructure: Memorandum of Understanding

## N.C. Rabies Control

### MEMORANDUM OF UNDERSTANDING

between

[Any] County Health Director

and

[Name of Agency, Ex. Sherriff's Department]

This is an agreement between [Any] County Health Director, hereinafter called Health Director and [Name of Agency], hereinafter called XXXXXX.

#### I. PURPOSE & SCOPE

The purpose of this MOU is to clearly identify the roles and responsibilities of each party as they relate to Rabies Control per NCGS 130A-41(b) 10 and NCGS 130A 196-199.

In particular, this MOU is intended to:

- Delegate particular responsibilities of NCGS 130A-41(b) 10 from the Health Director to (Name of Agency).
- Designate staff members from (Name of Agency) and from the Health Department to work collaboratively to update annually and implement policies and procedures to address enforcement of NCGS 130A 196-199.

# Rabies Infrastructure: Memorandum of Understanding

## II. [Name of Agency] RESPONSIBILITIES UNDER THIS MOU

(XXXXXX) shall undertake the following activities:

- Designate and train staff for role in N.C. Rabies Control.
- Follow procedures as published in the online N.C. Rabies Public Health Program Manual, <http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/toc.html> .
- Investigate all reported instances in which a person has bitten by a dog, cat, ferret, or wildlife that can potentially expose a person to rabies.
- Investigate all reported instances in which a person has been potentially exposed (non-bite) to rabies.
- Notify the Health Department of all investigations that involve potential human exposure to rabies by providing a copy of the Animal Bite/Exposure Report (Attachment A) of each incident to the Health Department.
- Refer all questions regarding human rabies post-exposure prophylaxis and/or other medical/healthcare issues to the Health Department.
- Consult with Health Department in the event of any unusual or atypical situations.
- *(Will there be handouts for this agency to give out?)*
- *(Add responsibilities – for example is this agency involved in 10 day home confinement? What are the roles and responsibilities? Or, will the agency transport animals to animal shelter? Will the be responsible to....Ensure that any animal that becomes ill or dies of suspected rabies during the confinement period will be destroyed and properly prepared for transport to the State laboratory of Public Health)*
-

# Rabies Infrastructure: Memorandum of Understanding

## III. HEALTH DIRECTOR RESPONSIBILITIES UNDER THIS MOU

- Designate and train staff for role in N.C. Rabies Control.
- Follow procedures as published in the online N.C. Rabies Public Health Program Manual, <http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/toc.html> .
- Collaborate on all investigations that involve potential human exposure to rabies as well as performing human rabies risk assessment and providing recommendations for care to those persons.
- Consult on all questions regarding human rabies post-exposure prophylaxis and/or other medical/healthcare issues.
- Consult with N.C. DPH Rabies on-call staff in the event of any unusual or atypical situations.
- Be available to discuss any aspect of a rabies investigation including citizen's request to appeal rabies decisions.
- *(Will the LHD develop handouts for the outside agency to give out?)*
- *(Add responsibilities – for example if the above agency is involved in 10 day home confinement.... What are the roles and responsibilities of LHD for this confinement?  
Will the LHD be responsible to....Ensure that any animal that becomes ill or dies of suspected rabies during the confinement period will be destroyed and properly prepared for transport to the State laboratory of Public Health....or is it the above agency)*

# Rabies Infrastructure: Memorandum of Understanding

## IV. IT IS MUTUALLY UNDERSTOOD AND AGREED BY AND BETWEEN THE PARTIES THAT:

- **Amendments**- This agreement may be amended by written consent of both parties and all amendments shall be attached to this agreement.
- **Termination**- This agreement may be terminated by either party on thirty (30)-day written notice, except that the (Agency) may choose to immediately terminate the agreement without notice for following:
  - Failure to follow procedure, regulation or guidelines in the N.C. Rabies Public Health Program Manual.
  - *(Add any additional language)*
- **Independent Status** – Nothing in this agreement shall create a relationship other than that of an independent contractor between [Any] County and the [Agency], nor shall the [Agency] have any claim against the County for Worker’s Compensation, Unemployment compensation, insurance coverage, or other benefits.

# Rabies Infrastructure: Memorandum of Understanding

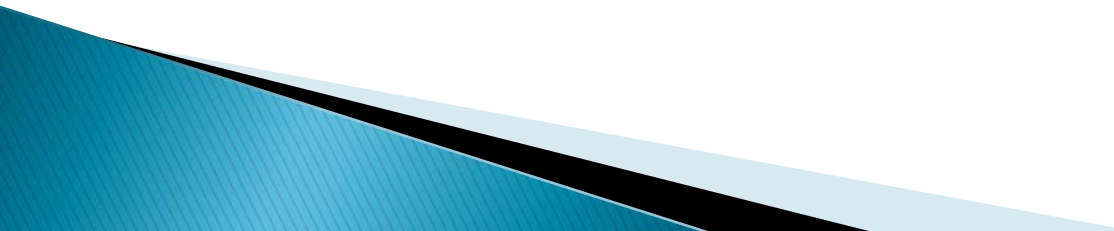
**V. FUNDING**

This MOU does not include any reimbursement of funds between the two parties.

**VI. EFFECTIVE DATE AND SIGNATURE**

This MOU shall be effective upon the signature of [Agency] authorized officials and [Any] County Health Director. It shall be in force for a period of one year, from [Month/Day/Year] to [Month/Day/Year]. [Agency] and [Any] County Health Director indicate agreement with this MOU by their signatures.

_____	_____
<b>Name, [Agency]</b>	<b>Date</b>
_____	_____
<b>Name, [Any] County Health Director</b>	<b>Date</b>



# Rabies Infrastructure: Staff Communication Tool

## **Rabies Animal Bite/Exposure Report**

LHD clinical staff should be advised immediately if there is need for Human Rabies Risk Assessment.



**Animal Bite/Exposure Report**

**XXXX County Health Department**

**1. Human Exposure Information**

Last Name:	First Name:	DOB/Age:
If Child, Parent's Name:		
Address:		
Home Phone:	Cell/Work phone:	
Date of Bite/Exposure:	Time of Bite/Exposure:	Address of Bite/Exposure:

**2. Human Bite/Exposure Information**

Human(s) exposed? Y N	Number of humans exposed _____
Domestic Animal(s) Exposed? Y N	Number of domestic animals exposed _____ (see: 4. Exposed Domestic Animal Information)
Circumstances of exposure:	Provoked? Y N
Description/location of wounds:	
Treatment Provided: (include treatment PEP, Tetanus, Wound Tx, Antibiotics), dates, treatment facility, provider(s))	

**3. Source (exposing) Animal and Owner (if applicable) Information**

Wild animal? Y N	Domestic Animal? Y N			
Species:	Color:			
If Domestic, complete the following:				
Animal's Name:	Breed:	Sex: M F	DOB/ Age:	Neutered? Y N
Current Rabies Certificate? Y N	Rabies Tag#:			
Expiration date (last rabies vaccine) _____	Dates of Rabies Vaccinations: _____			
Veterinarian:	Hospital and Address:	Phone:		
Owner's Name:	Home Phone:	Cell:		
Owner's Address:				

**Notes:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**1. Domestic Animal Exposure Information**

Owner's Name:	Home Phone:	Cell:		
Owner's Address:				
Species:	Breed:	Sex: M F	DOB/ Age:	Neutered? Y N
Current Rabies Certificate? Y N	Rabies Tag#:			
Expiration date (last rabies vaccine): _____	Dates of Rabies Vaccinations: _____			
Veterinarian:	Hospital and Address:	Phone:		

**2. Domestic Animal Bite/Exposure Information**

Circumstances of exposure:		
Description/location of wounds:		
Rabies Vaccine Provided within 5 days? Y N		
Dates of Rabies Vaccine Booster: _____	Expiration date _____	
Veterinarian:	Hospital and Address:	Phone:

**3. Source (exposing) Animal Information**

Wild animal? Y N	Domestic Animal? Y N			
Species:	Color:			
If Domestic, complete the following:				
Animal's Name:	Breed:	Sex: M F	DOB/ Age:	Neutered? Y N
Current Rabies Certificate? Y N	Rabies Tag#:			
Expiration date (last rabies vaccine) _____	Dates of Rabies Vaccinations: _____			
Veterinarian:	Hospital and Address:	Phone:		
Owner's Name:	Home Phone:	Cell:		
Owner's Address:				

**Notes:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Rabies Infrastructure:

## Sample DPH Rabies Program Policy

Policy/Procedure Title: **Rabies Prevention and Control**

Written by (Department): Public Health /Nursing (*Could also add AC*)

Name:

Title:

Date:

**APPLICABLE TO:**            XXXX County Health Department

**PURPOSE:** Per NCGS 130A-41(b) the Local Health Director is responsible for examination, investigation, and control of rabies. This policy discusses the roles and responsibilities of multiple agency staff. While much the functions may be delegated to (*Insert agency here....ex. local animal control or sheriff's department*) it is essential that human rabies risk assessments be handled by formally trained health care providers.

# Rabies Infrastructure: Sample DPH Rabies Program Policy

**POLICY:** All XXX county agency staff involved with examination, investigation, and control of rabies follow the guidance published within the North Carolina Rabies Public Health Program Manual located online at, <http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/toc.html> . If additional guidance is needed, the agencies will contact the North Carolina Division of Public Health (NC DPH) 24/7 on-call epidemiologist at (919) 733-3419.

**DEFINITIONS:** Per NCAC 130A-184,  
[http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter\\_130A/GS\\_130A-184.html](http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter_130A/GS_130A-184.html)

# Rabies Infrastructure: Sample DPH Rabies Program Policy

## General Guidance

1. All staff will have access to the North Carolina Rabies Public Health Program Manual.
2. All staff assigned to rabies control will receive rabies related training. The local health department (LHD) will ensure all agencies have appropriately trained staff. If a multiple agency training need is identified, LHD staff will contact NC DPH to assist in in-servicing.
3. A written memorandum of agreement (MOA) will be implemented between LHD and any agency outside of the LHD who are involved in examination, investigation, and control of rabies.

Currently, the LHD (*has or has no*) MOA (*with \_\_\_\_\_*).

# Rabies Infrastructure:

## Sample DPH Rabies Program Policy

### Rabies-Local Roles and Responsibilities

1. ( Insert Agency here, ex. Animal Control ) is responsible for investigating all incidents involving potential rabies exposures. All investigations will be documented using a standard Rabies Animal Bite/Exposure Report .
2. ( Insert Agency here, ex. Animal Control ) will immediately notify LHD rabies clinical staff of all mammal animal bite/non-bite exposure that involve a potential human exposure to rabies by providing a copy of the Rabies Animal Bite/Exposure Report.
3. (Insert staff title, ex. CD nurse) is responsible for conducting the Post exposure assessment for all human bite exposures and recommending PEP, if indicated

# Rabies Infrastructure: Sample DPH Rabies Program Policy

## **Rabies Educational Materials**

XCHD will provide the following to citizens involved in a rabies exposure investigation:



(County to decide what materials will be handed out to public.)

# Rabies Infrastructure:

## Sample DPH Rabies Program Policy

### **Rabies Pre-exposure Prophylaxis Vaccination (Rabies Pre-EP)**

Routine rabies pre-exposure prophylaxis is not recommended for the general U.S. population. Rabies pre-exposure prophylaxis should be offered to persons who work in occupations where frequent rabies exposure risk has been identified or in travelers who are likely to come into contact with high risk rabies vectors and immediate access to appropriate medical care is limited. Refer to the N.C.

Rabies Control Manual for additional information,

<http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/docs/preEP.pdf> .

This agency (*offers/does not offer*) rabies pre-EP. (*Pick one of two scenarios below and describe what agency follows*)

(*scenario 1*)

XCHD will provide rabies pre-EP to those persons identified as high risk per the N.C. Rabies Control Manual. This agency requires payment for vaccines prior to the vaccine being ordered. Vaccine can be ordered through .....(*describe ordering process....many LHDs use Cardinal Drugs*).

Refer to the N.C. Rabies Control Manual for description of the rabies pre-EP regimen,

<http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/docs/preEP.pdf> .

A XCHD standing order for Registered Nurses (RNs) has been implemented to allow rabies pre-EP to qualifying citizens.

(*scenario 2*)

XCHD does not provide rabies pre-EP. Those persons identified as high risk per the N.C. Rabies Control Manual will be instructed to (*County needs to be able to direct persons to an agency that will provide pre-EP to high risk individuals*).

# Rabies Infrastructure: Sample DPH Rabies Program Policy

## **Rabies Post-exposure Human Rabies Immunoglobulin and Vaccination Series (Rabies Post-EP)**

Prompt rabies exposure risk assessment is required for all persons who have been exposed to a potentially rabid animal. Refer to the N.C. Rabies Control Manual for specific guidance, [http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/docs/steps\\_for\\_HCP.pdf](http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/docs/steps_for_HCP.pdf).

XCHD (offers/does not offer) Human Rabies Immunoglobulin (H-RIG).

XCHD (offers/does not offer) Rabies Vaccination series for rabies post-exposure.

*(Pick one of three scenarios below and describe what agency follows)*

*(scenario 1)*

XCHD can provide both H-RIG and rabies vaccine. Persons seeking medical evaluation and treatment for potential/known rabies exposure should be seen without delay. *(LHDs should describe internal process of getting patient to clinic). (LHDs should refer to agency standing order for RN's if applicable).*



# Rabies Infrastructure:

## Sample DPH Rabies Program Policy

*(scenario 2)*

XCHD cannot provide H-RIG, but can follow-up with the administration of subsequent doses of rabies vaccine. The patient should provide evidence of H-RIG administration and any rabies vaccine doses they have received. A XCHD standing order for Registered Nurses (RNs) has been implemented to allow rabies post-EP.

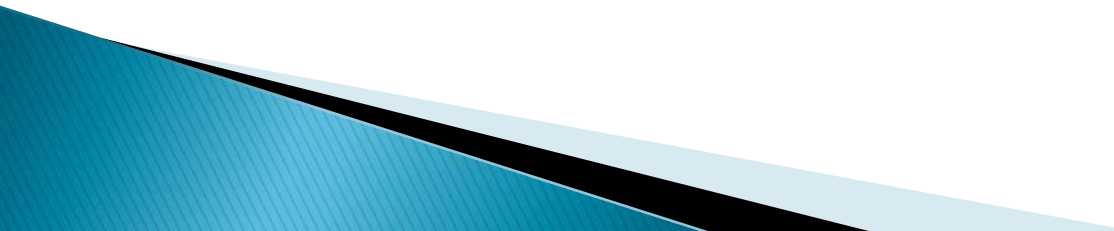
*(scenario 3)*

XCHD does not provide rabies post-EP. Those persons identified as needing rabies post-EP will be instructed to consult their physician. *(Also, county needs to be able to direct persons to an agency that will provide post-EP....insert locations for rabies post-EP here)*. Each patient will be given a Rabies Post-Exposure Prophylaxis Treatment Sheet to give to the treating physician, [http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/docs/ncdhhs\\_human\\_PEP\\_sheet.pdf](http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/docs/ncdhhs_human_PEP_sheet.pdf) . Agency staff will be available to consult with exposed persons or physicians during normal working hours and as described in the agency 24/7 policy.

# Reminder:

## Standing Orders for RNs

LHDs that decide to provide Rabies Pre-EP and/or Rabies Post-EP in policy must also remember to develop a standing order for RNs unless the policy states the RN must seek an order for each request for services.



# Reminder:

## Standing Orders for RNs

- ▶ Sample Rabies Pre-EP standing order...new.
- ▶ Sample Rabies Post-EP, see sample in CD Manual,

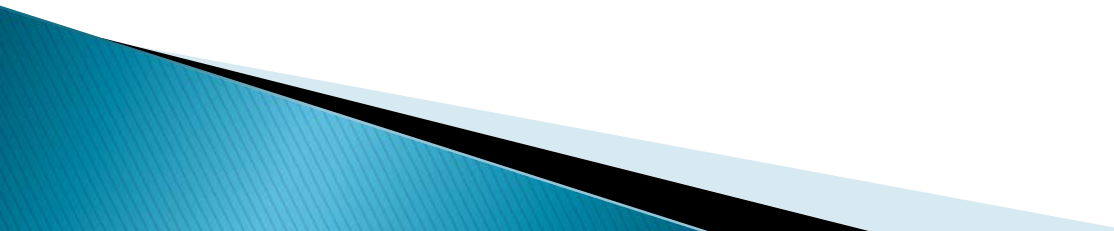
[http://epi.publichealth.nc.gov/cd/lhds/manuals/cd/appendices/Rabies\\_SO.pdf](http://epi.publichealth.nc.gov/cd/lhds/manuals/cd/appendices/Rabies_SO.pdf)

# Rabies Infrastructure: Sample DPH Rabies Program Policy

---

**Rabies Human Immunoglobulin and Vaccination Stock**

*(If applicable to agency, describe who is responsible for stock and what stock level is maintained).*



# Rabies Infrastructure:

## Sample DPH Rabies Program Policy

### Vaccine for Indigent Residents

The agency will make every attempt to break down any barrier to access to care. Oftentimes, this relates to an individual not having medical insurance or sufficient resources to pay for Rabies Biologicals. This may be addressed in the following manners:

- The agency can provide manufacturer contact information. Both manufacturers have indigent resources. Rabies Biologics information can be found in the N.C. Rabies Control Manual, <http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/docs/biologics.pdf>.
- The agency can submit a request for free state-supplied vaccine. The N.C. State Laboratory of Public Health (NC SLPH) maintains stock of both H-RIG and rabies vaccine for indigent residents. To obtain this stock the agency must complete the Request for Free State-Supplied Rabies Vaccine form, <http://epi.publichealth.nc.gov/cd/rabies/docs/AffidavitFreePEP.pdf>. Once eligibility and stock requirement is determined call the DPH Rabies on-call person at (919) 733-3419. (*Note – LHD needs to decide if will reimburse a hospital for stock used there.....DPH is okay with this.....however, LHD is responsible to get stock to hospital and make sure patient bill is corrected to not charge for items reimbursed.*) Provide the on-call person with the stock requirement, LHD shipping address, and LHD point of contact. DPH will arrange for shipment from NC SLPH. Keep the Request for Free State-Supplied Rabies Vaccine form until a bill comes in the mail (the bill does not come with the product). Staple the form to the bill and return to the address on the bill.

# Rabies Infrastructure:

## Sample DPH Rabies Program Policy

### **10 Day Confinement (for dogs, cats, and ferrets)**

XCHD (allows/does not allow) a home 10 day confinement. (*LHD should describe what occurs in their county*).

### **Specimen Submittal for Rabies Testing/Weekend and Holiday Testing**

General specimen submittal guidelines can be found in the N.C. Rabies Control Manual at, <http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/testing.html> .

Special arrangements must be made for weekend and holiday testing. NC SLPH does not perform testing on weekends and holidays unless approval has been given by DPH. Call DPH rabies on-call staff at (919) 733-3419 to discuss need for weekend or holiday testing. If approved, the outside of the package being delivered to NC SLPH should have a highlighted statement “For Weekend Testing” put on the package. The DPH on-call staff should be told the persons exposed as well as the name and number of the person receiving the results for the county. It is policy that NC SLPH/DPH verbally gives the results to appropriate county staff.

# Rabies Infrastructure: Sample DPH Rabies Program Policy

## Notification to Outside Agencies

XCHD will ensure that all appropriate agencies are informed of potential rabies exposures.

- N.C. DA&CD Veterinary Division ([www.ncagr.gov/vet](http://www.ncagr.gov/vet)) is responsible for rabies following up and conducting field investigations of any equine or livestock exposures. The main number is (919) 733-7601.
- Multiple agencies could be involved in rabies investigations regarding hybrid or exotic animals.

Contact DPH rabies on-call person at (919) 733-3419 to discuss any investigation containing livestock, hybrid, or exotic animals.

# Rabies Infrastructure: Sample DPH Rabies Program Policy

## **Resident Request to Appeal Rabies Decisions**

*(LHD should describe this process and provide it to citizens if conflict occurs)*

## **Rabies Clinics and Certified Rabies Vaccinators**

*(LHD should describe rabies clinics they offer and if have CRV....how many, who are they...etc.)*

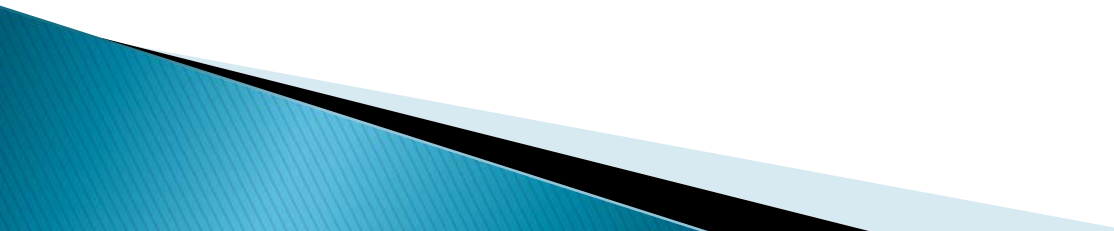
## **Community Outreach**

*Could discuss reaching out to hospitals and physicians and vets regarding role with reporting.....see Durham's Physician reporting form (could do a yearly reminder to physician by blast fax)*

*Could put together MOA with ER.....ER could already have indigent forms....LHD will replace indigent stock.*



# Rabies Infrastructure: Communication Tools/Handouts

- ▶ Inter/Outside Agency Forms
    - Policies
    - Rabies Bite/Exposure Report
    - MOUs
  
  - ▶ Handouts for Citizens
- 

# Rabies Infrastructure: Handouts

Currently, N.C. Counties vary from having no handouts to providing packets of information.

Visit other LHD websites to see what they have created:

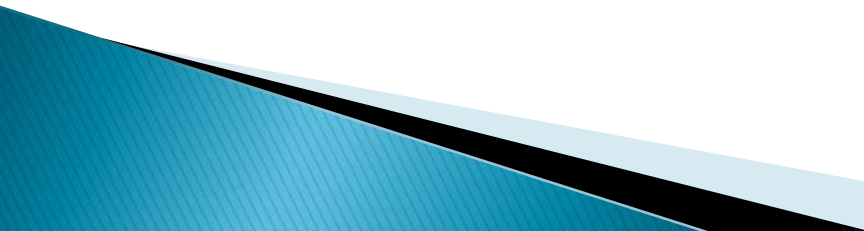
Cabarrus

Durham

Orange

# Rabies Infrastructure: Handouts

DPH recommends the following handouts be available:

- Animal Bite/Exposure and Rabies FAQ
  - Statement of Confinement Policy for County
  - Statement of Animal Exposure Policy
  - Rabies Post-Exposure Prophylaxis Treatment Sheet and Vaccine Information Statement
- 

# Animal Bite/Exposure and Rabies FAQ

## Animal Bites/Exposures and Rabies

### Frequently Asked Questions

#### What is Rabies?

Rabies is a viral disease of mammals most often transmitted through the bite of a rabid animal. The vast majority of rabies cases reported to the Centers for Disease Control and Prevention (CDC) each year occur in wild animals like raccoons, skunks, bats, and foxes.

The [rabies virus](#) infects the central nervous system, ultimately causing disease in the brain and death. The early symptoms of rabies in people are similar to that of many other illnesses, including fever, headache, and general weakness or discomfort. As the disease progresses, more specific symptoms appear and may include insomnia, anxiety, confusion, slight or partial paralysis, excitation, hallucinations, agitation, hypersalivation (increase in saliva), difficulty swallowing, and hydrophobia (fear of water). Death usually occurs within days of the onset of these symptoms.

#### How is Rabies Transmitted to a Human?

The rabies virus is transmitted through saliva or brain/nervous system tissue. You can only get rabies by coming in contact with these specific bodily excretions and tissues. Transmission of rabies virus usually begins when infected saliva of an animal (mammal) is passed to an uninfected human. The most common mode of rabies virus transmission is through the bite and virus-containing saliva of an infected host. Transmission has been rarely documented via other routes such as contamination of mucous membranes (i.e., eyes, nose, mouth), aerosol transmission, and corneal and organ transplantations.

# Animal Bite/Exposure and Rabies FAQ

## How do I know if I have been exposed to Rabies?

Any person who suspects that they may have been exposed to rabies should report the event to (LHD Clinical person for rabies and contact #) . Each incident will be reviewed and persons will be advised on whether they should seek Rabies Post Exposure treatment. If you are being given this FAQ because (Name of Agency) is investigating a potential rabies exposure incident, the Animal Bite/Exposure Report form will be forwarded to the local health department staff who will be calling you shortly.

Depending on the situation, domestic animals (dogs, cats and ferrets) may be monitored for 10 days to determine if there has been any rabies transmission risk. In other situations, there may be a recommendation to immediately test the domestic animal.

In general, it is recommended to immediately test wildlife (high risk rabies vectors, such as raccoons, foxes, skunks, bats) to then advise whether Rabies Post Exposure treatment is recommended. Situations involving low risk rabies vectors, such as mice, rats, squirrels and other small mammals will be reviewed on a case by case basis.

If the recommendation is to watch or test an animal, and the animal is unavailable, you may be given the recommendation to seek Rabies Post Exposure treatment since you cannot be given the assurance that an exposure did not occur.

# Animal Bite/Exposure and Rabies FAQ

## How soon do I need to see treatment for Rabies?

It's important to remember that rabies is a medical urgency but not an emergency. Decisions should not be delayed, however, can wait in certain circumstances. See ***"How do I know if I have been exposed to Rabies?"***

## What should I do now?

Immediately wash wounds or areas exposed to saliva or tissue with soap and running water for 15 minutes. It is recommended that healthcare providers assess and treat wounds.

Work with local health department staff to assess your rabies exposure risk.

Please feel free to call \_\_\_\_\_ at \_\_\_\_\_ with any questions or concerns you may have.

# Statement of Confinement Policy for County



## **Catawba County Public Health**

[www.catawbacountync.gov/phealth](http://www.catawbacountync.gov/phealth)

3070 11th Ave. Dr. SE, Hickory, NC 28602

Phone (828) 695-5800

Fax (828) 695-4410

### **Policy for Dealing with the Confinement of Dogs, Cats, or Ferrets after They Have Bitten a Human Being**

Pursuant to North Carolina General Statute § 130A-196, any person bitten by a dog, cat, or ferret as well as the owner of the biting animal, must immediately notify the local health director or Catawba County Animal Services. This statute provides the health director with the authority to designate a confinement place for dogs, cats, or ferrets that have bitten a person. Therefore, I direct that any dog, cat, or ferret that has bitten a person shall be confined, for ten (10) days immediately following the biting incident, at the Catawba County Animal Shelter, with a licensed veterinarian in Catawba County or a contiguous county, or, based on the totality of the circumstances and at the health director's discretion, at the owner of the bite animal's home. All expenses related to the confinement are the responsibility of the owner of the animal. The health director has the authority to exempt law enforcement dogs. The health director has the authority to permit the confinement at the owner of the biting animal's home under the following limited circumstances: any required fee is paid in advance, *and* the animal's rabies vaccination is current *or* will be made current immediately at the end of the quarantine period, *and* prior to the animal being released from confinement.

In those circumstances, where there is conflicting evidence as to the residence of the animal or the location that the bite occurred, the animal shall be quarantined at the Catawba County Animal Shelter.

Anyone failing to follow the order of the Health Director shall be guilty of a Class 2 misdemeanor. In addition, any animal not confined as ordered shall be seized by Catawba County Animal Services and confined for the remainder of the quarantine period, at the expense of the owner.

[http://www.catawbacountync.gov/animal/\\_Docs/confine.pdf](http://www.catawbacountync.gov/animal/_Docs/confine.pdf)

# Statement of Animal Exposure Policy



## **Catawba County Public Health**

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[www.catawbacountync.gov/phealth](http://www.catawbacountync.gov/phealth)

3070 11th Ave. Dr. SE, Hickory, NC 28602

Phone (828) 695-5800

Fax (828) 695-4410

### **Policy for Dealing with Animals Exposed to Rabies**

Pursuant to North Carolina General Statute § 130A-197, any animal that has been exposed to rabies and has not been vaccinated, must be euthanized. The statute also provides the health director with the authority to allow for a quarantine of an unvaccinated, exposed animal. I direct that any unvaccinated animal may be quarantined, at the owner's expense, for a six-month period with a North Carolina licensed veterinarian practicing in Catawba County or a contiguous county, as an alternative to immediate euthanization. For purposes of this policy, an animal tested for rabies that is deemed "untestable" for any reason shall be considered as having tested positive for rabies.

For any animal that has been exposed to rabies whose vaccination is not current, written proof of the animal's vaccination history must be provided to Catawba County Animal Services within 48 hours of the exposure. Depending on the biting animal, and after consultation with the North Carolina Veterinarian, a modified quarantine period may be determined.

[http://www.catawbacountync.gov/animal/\\_Docs/exposed.pdf](http://www.catawbacountync.gov/animal/_Docs/exposed.pdf)



# Rabies Post-Exposure Prophylaxis Treatment Sheet



North Carolina Department of Health and Human Services  
Division of Public Health

Pat McCrory  
Governor

May 2014

Aldona Z. Wos, M.D.  
Ambassador (Ret.)  
Secretary DHHS

Penelope Slade-Sawyer  
Division Director

## RABIES POST-EXPOSURE PROPHYLAXIS TREATMENT SHEET

Patient name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

1. For **persons not previously vaccinated**, post-exposure prophylaxis (PEP) consists of administration of both antibody (Human Rabies Immune Globulin, or HRIG) and human rabies vaccine (Imovax® or RabAvert®). **Persons who have previously received a complete rabies pre-EP or PEP series** require post-exposure treatment with a series of human rabies vaccine only (no HRIG).
2. The **dose of HRIG** is 20 I.U./kg body weight. HRIG contains 150 I.U./ml. HRIG should be given as soon as possible after the incident but not more than 7 days after the first dose (Day 0) of human rabies vaccine. As much HRIG as is anatomically feasible should be infiltrated into and around the wound or bite areas. The remainder (if any) should be given by intramuscular injection at an anatomical site distant from the rabies vaccine administration site (usually the deltoid or anterolateral thigh muscle on the same side as the wound infiltration).

$$\frac{\text{Patient weight}}{\text{lbs}} \times \frac{0.454 \text{ kg}}{1 \text{ lb}} \times \frac{20 \text{ I.U.}}{1 \text{ kg}} \times \frac{1 \text{ ml}}{150 \text{ I.U.}} = \frac{\text{ml}}{\text{Volume HRIG}}$$

3. **Immune-competent persons** who have never received a complete rabies vaccine series (pre-EP or post-EP) should receive one dose of HRIG and four (4) doses of vaccine (1.0 ml each), given intramuscularly in the deltoid region (or anterolateral thigh for infants and small children). The first dose (Day 0) should be given as soon as possible after the exposure. Additional doses should be given on days 3, 7, and 14 to complete the series. **Human rabies vaccine and HRIG must never be given in the gluteal area**; studies show this may result in lower neutralizing antibody titers.

[http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/docs/ncdhhs\\_human\\_PEP\\_sheet.pdf](http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/docs/ncdhhs_human_PEP_sheet.pdf)

# Rabies Post-Exposure Prophylaxis Treatment Sheet

4. For **persons previously immunized** (*i.e.*, history of a 3-dose pre-exposure series or a complete post-exposure series), only human rabies vaccine should be given and only on days 0 and 3 (no HRIG).
5. Immunosuppressive agents should not be administered during PEP unless essential for the treatment of other conditions. When PEP is administered to an **immune-suppressed person, a 5<sup>th</sup> dose of vaccine is required** on day 28. Blood should be drawn for a rabies neutralizing antibody titer (Rapid Fluorescent Focus Inhibition Test, or RFFIT) after the series is completed to ensure that an acceptable immune response has developed.
6. **It is critical that each dose of human rabies vaccine be given as scheduled** (see [www.cdc.gov/rabies/specific\\_groups/doctors/serology.html](http://www.cdc.gov/rabies/specific_groups/doctors/serology.html)). Health care providers must make certain that patients are not lost to follow-up. For consultation on dose schedule or RFFIT, contact the Communicable Disease Branch Medical Consultation Unit at 919-733-3419 (24/7).

Treatment	Day #	Lot #	Date Due	Date Given	Injection Site	Dosage (mL)	Provider	Date VIS** given	Date on VIS**
HRIG	Day 0								
Vaccine	Day 0								
Vaccine	Day 3								
Vaccine	Day 7								
Vaccine	Day 14								
Vaccine*	Day 28*								

\*Day 28 only if patient immunosuppressed

\*\*Vaccine Information Statement ([www.cdc.gov/vaccines/pubs/vis/default.htm#rabies](http://www.cdc.gov/vaccines/pubs/vis/default.htm#rabies))

[www.ncdhhs.gov](http://www.ncdhhs.gov) • <http://epi.publichealth.nc.gov/cd/>

Tel 919-733-7301 • Fax 919-733-1020

Location: 225 N. McDowell Street • Raleigh, NC 27603

Mailing Address: 1902 Mail Service Center • Raleigh, NC 27699-1902

An Equal Opportunity / Affirmative Action Employer



[http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/docs/ncdhhs\\_human\\_PEP\\_sheet.pdf](http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/docs/ncdhhs_human_PEP_sheet.pdf)

# Rabies Vaccine Information Sheet

## VACCINE INFORMATION STATEMENT

### Rabies Vaccine

#### What You Need to Know

Many Vaccine Information Statements are available in Spanish and other languages. See [www.immunize.org/vis](http://www.immunize.org/vis)  
Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite [www.immunize.org/vis](http://www.immunize.org/vis)

#### 1 What is rabies?

Rabies is a serious disease. It is caused by a virus. Rabies is mainly a disease of animals. Humans get rabies when they are bitten by infected animals. At first there might not be any symptoms. But weeks, or even months after a bite, rabies can cause pain, fatigue, headaches, fever, and irritability. These are followed by seizures, hallucinations, and paralysis. Human rabies is almost always fatal.

Wild animals—especially bats—are the most common source of human rabies infection in the United States.



Skunks, raccoons, dogs, cats, coyotes, foxes and other mammals can also transmit the disease. Human rabies is rare in the United States.

#### 3 Who should get rabies vaccine and when?

##### Preventive vaccination (no exposure)

- People at high risk of exposure to rabies, such as veterinarians, animal handlers, rabies laboratory workers, spelunkers, and rabies biologics production workers should be offered rabies vaccine.
- The vaccine should also be considered for:
  - People whose activities bring them into frequent contact with rabies virus or with possibly rabid animals.
  - International travelers who are likely to come in contact with animals in parts of the world where rabies is common.

The pre-exposure schedule for rabies vaccination is **3 doses**, given at the following times:

- Dose 1: As appropriate
- Dose 2: 7 days after Dose 1
- Dose 3: 21 days or 28 days after Dose 1

For laboratory workers and others who may be repeatedly exposed to rabies virus, periodic testing for immunity is recommended, and booster doses should

# Resources:

N.C. Rabies Manual:

<http://epi.publichealth.nc.gov/cd/lhds/manuals/rabies/toc.html>

N.C. Public Health Website:

<http://epi.publichealth.nc.gov/cd/diseases/rabies.html>

CDC Rabies website:

<http://www.cdc.gov/rabies/>

CDC Rabies website for kids:

<http://www.cdc.gov/rabiesandkids/>



# Resources

If needed, feel free to call Jodi Reber at (919) 733-3419 for word documents used in this presentation.

# Any Questions?

End

