

Rabies Post-Exposure Prophylaxis: What to Expect

Rabies is a fatal disease spread through the bite of a rabies-infected animal. If you were bitten* by an animal that had or is suspected of having rabies, you may need to receive rabies post-exposure prophylaxis (PEP). Rabies is completely preventable with proper PEP.†

What is rabies PEP?

- Rabies PEP includes one dose of human rabies immune globulin (HRIG) and four doses of rabies vaccine given over two weeks. HRIG provides immediate protection while the vaccine helps your body’s immune system fight the virus.
- If you were previously vaccinated against rabies — you received rabies pre-exposure prophylaxis or rabies PEP for an earlier animal bite or exposure — rabies PEP will include two doses of rabies vaccine given over three days without HRIG.

The Minnesota Department of Health does not pay for the cost of rabies PEP. Speak with your provider and health insurance company about coverage. If you or your health care provider have any questions or concerns about HRIG, the rabies vaccine or how they are being administered, call the Minnesota Department of Health at **651-201-5414**.

For more information about rabies in Minnesota, visit: <https://www.health.state.mn.us/rabies>

*Rabies PEP may also be recommended if you were exposed to rabies due to a fresh wound or mucous membrane (mouth, eyes or nose) that may have been contaminated with saliva from a rabid animal, or if you were possibly bitten by a bat.

†Harmful side effects to rabies vaccine and HRIG are not common. Minor reactions to rabies vaccines may include pain, redness, swelling or itching at the injection site. Rarely, symptoms such as headache, nausea, abdominal pain, muscle aches and dizziness have been reported. Pain at the injection site and low-grade fever may follow HRIG treatment.

For people who have never received rabies vaccinations

<p>Immediate Wound Care</p>	<ul style="list-style-type: none"> ❑ Clean and gently rinse the wound(s) to decrease the risk of infections and flush out any rabies virus that may have entered the wound(s). ❑ Get a tetanus booster shot if it has been more than 5 years since your last shot. ❑ Your health care provider will decide how best to treat serious injuries that require medication, stitches or surgery.
<p>Day 0 <i>The day you receive your first rabies vaccine is counted as day 0</i></p>	<ul style="list-style-type: none"> ❑ Human Rabies Immune Globulin (HRIG) <ul style="list-style-type: none"> ▪ HRIG is given according to your weight. The larger the person, the larger the dose. ▪ HRIG must be injected into and around the wound(s). ▪ Any remaining HRIG should be injected into the deltoid muscle or the anterolateral thigh in young children but not the gluteal muscle. HRIG should not be given in the same site or area as the rabies vaccine. ❑ Rabies Vaccine #1 <ul style="list-style-type: none"> ▪ The first dose of rabies vaccine should not be given in the same site where HRIG was injected. ▪ All doses of rabies vaccine should be injected into the deltoid muscle. For children, the thigh muscle can also be used. Vaccine should never go in the gluteal muscles.

RABIES POST-EXPOSURE PROPHYLAXIS: WHAT TO EXPECT

Day 3	<input type="checkbox"/> Rabies Vaccine #2
Day 7	<input type="checkbox"/> Rabies Vaccine #3
Day 14	<input type="checkbox"/> Rabies Vaccine #4

For people who are immunocompromised

Day 28	<input type="checkbox"/> Rabies Vaccine #5 <ul style="list-style-type: none"> ▪ A 5th dose is only given to those who are deemed immunocompromised by their healthcare provider. This does not include an otherwise healthy pregnant woman.
---------------	---

NOTE: Deviations of a few days from this recommended schedule are common and do not affect the vaccine series' ability to work. There is no information on the effectiveness of the vaccine if there is more than 14 days between vaccine doses. If this occurs, your provider will discuss options with you. Patients who are few days late (or early) for their next rabies shot should resume the series and maintain the recommended spacing between doses.

For people who were previously vaccinated for rabies†

Immediate Wound Care	<input type="checkbox"/> Clean and gently rinse the wound(s) to decrease the risk of infections and flush out any rabies virus that may have entered the wound(s). <input type="checkbox"/> Get a tetanus booster shot if it has been more than 5 years since your last shot. <input type="checkbox"/> Your health care provider will decide how best to treat serious injuries that require medication, stitches or surgery.
Day 0 <i>The day you receive your first rabies vaccine is counted as day 0</i>	<input type="checkbox"/> Rabies Vaccine #1 <ul style="list-style-type: none"> ▪ All doses of rabies vaccine should be injected into the deltoid muscle. For children, the thigh muscle can also be used. Vaccine should never go in the gluteal muscles.
Day 3	<input type="checkbox"/> Rabies Vaccine #2

†Includes people who received rabies pre-exposure prophylaxis, such as veterinarians and animal control workers, or anyone who received rabies PEP for a previous animal bite or rabies exposure.

Adapted with permission from the NYC Health Department

Minnesota Department of Health
 Zoonotic Diseases Unit
 625 Robert St. N, St. Paul, MN
 651-201-5414
www.health.state.mn.us

11/07/2025

*To obtain this information in a different format, call:
 651-201-5414.*