**Rabies Post-Exposure Prophylaxis Decision Tree**

**Decide with Confidence**

1. **Category I**
   - Animal: mammal? Yes
     - Animal rodent?
       - Rodents rarely transmit rabies: no PEP indicated, wash exposed areas with soap and water
     - Is the animal still alive?
       - PEP not indicated / can be discontinued
     - Start PEP immediately
     - Test positive
       - Start PEP immediately
     - Test negative
       - PEP not indicated / can be discontinued

2. **Category II**
   - Is the victim <14 years?
     - Yes
       - Start PEP immediately
     - No
       - Delay PEP pending investigation and quarantine results
       - Was the animal up-to-date on vaccination?
         - Yes
           - Start PEP immediately
         - No
           - Delay PEP pending investigation and quarantine results

3. **Category III**
   - Was the animal provoked to bite / scratch?
     - Yes
       - Delay PEP pending investigation and quarantine results
     - No
       - If exposure was a bat, PEP for WHO wound category III should be started immediately.

**Legend:**
- ARV = Anti Rabies Vaccine
- PEP = Post-Exposure Prophylaxis
- N = No
- RIG = Rabies Immunoglobulin
- U = Unknown
- RmAbs = Rabies Monoclonal Antibodies

**Notes:**
1. Dogs, cats and domestic ferrets being healthy 10 days after exposure present no rabies risk and PEP is not indicated. The infectious periods of other animals are not well characterized, and a more conservative 14-day clinical investigation is recommended.
2. Such as bites to the head, neck, face, genitals and hands.
3. Clinical signs of rabies in an animal include hypertension, paralysis, lethargy, unprovoked abnormal aggression (e.g. biting two or more people or animals and/or inanimate objects), abnormal vocalization, diurnal activity of nocturnal species. Hydrophobia is not a sign of rabies in dogs.
4. This risk assessment is made at one point in time with the available information. If new information is provided or the status of the animal changes, PEP might be indicated.
5. Wash the wound thoroughly with copious amounts of water and soap for 15 min and apply an antibiotic. This is a life-saving practice especially for immunocompromised patients.
6. When feasible, the RABV neutralizing antibody response should be determined 2–4 weeks after vaccination to assess whether an additional dose of vaccine is required.
7. This includes Pre-Exposure Prophylaxis (PrEP), previous PEP, or patients beyond the 14th day of PEP.
8. If PrEP or previous PEP was received: shorten the current vaccination schedule accordingly.
9. Patient with multiple bites, deep wounds, bites to highly innervated parts of the body (such as head, neck, face, genitals and hands), severe immunodeficiency, bites from an animal with probable (clinically) or confirmed (laboratory) rabies, exposure to a bat, bite, scratch or exposure of mucous membrane.