## Summary Pre Exposure Prophylaxis Rabies Vaccination Schedules for Travellers

| | Australia (AIH, January 2024) | New Zealand (2024) * | WHO (2018) | CDC (May 2022) |
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| **TWO VISIT SCHEDULES** | | | | |
| **1 site IM – day 0, 7**<br><br>Check antibodies pre travel<br><br>Booster | **Yes**-not Immunocompromised(IC)<br><br>No<br><br>Yes at 12 months if future exposures likely | **Yes** (not IC)<br><br>No<br><br>No but a risk assessment may be recommended (particularly for IC or over 50 years), where a booster can be advised anytime between 1 and 10 years post primary series (depending on risk and anticipated activities e.g. remote travel) | **Yes** (not IC)<br><br>No<br><br>No | **Yes - recommended for travellers**<br>IC check 2-4 weeks post dose 2<br><br>IC yes if VNAb <0.5IU/ml<br>For all those with sustained risk, EITHER check titre 1-3 yrs post primary series and boost if <0.5 IU/ml OR<br>Boost without titre from day 21 up to 3 years |
| **2 site ID – day 0 & 7**<br>Check antibodies pre travel<br>Booster | **Yes** (not if >50yrs or IC)<br>Yes (2-4 weeks post dose 2)<br>Yes IM at 12 months if future exposures likely | **Yes** (not IC)<br>No<br>No – but a risk assessment may be recommended (particularly for IC or over 50 years), where a booster can be advised anytime between 1 and 10 years post primary series -depending on risk and anticipated activities e.g. remote travel) | **Yes** (not IC)<br>No<br>No | No |
| **THREE VISIT SCHEDULES** | | | | |
| **1 site IM – day 0,7,21-28**<br>Check antibodies pre travel<br>Booster | **Yes**<br>Only if IC (2-4 weeks after course) | **Yes** (IC only)<br>No | **Yes for IC**<br>No<br>No (unless occupation exposure) | No |

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| Check antibodies | No | No – but a risk assessment may be recommended (particularly for IC or over 50 years), where a booster can be advised - depending on risk and anticipated activities e.g. remote travel)<br><br>No | No | N/A |
| **1 site ID – day 0,7,21-28**<br><br>Check antibodies pre travel<br><br>Booster<br><br><br><br><br><br><br>Check antibodies | **Yes** if not IC, not on CHQ, Mefloquine or hydroxyCHQ<br>Yes 2-4 weeks after course (if no time, give IM instead)<br>Yes at 12 months if ongoing exposure; IM only<br><br><br><br><br><br><br>No | **Yes** (not IC)<br><br>No<br><br>No – but a risk assessment may be recommended (particularly for IC or over 50 years), where a booster can be advised - depending on risk and anticipated activities e.g. remote travel)<br><br>No | No<br><br><br><br><br><br><br><br>N/A | No<br><br><br><br><br><br><br><br>N/A |
| **2 site ID – day 0, 7, 21-28**<br>Check antibodies pre travel<br>Booster | **No** | **Yes (IC only)**<br>No<br>No – but a risk assessment may be recommended (particularly for IC or over 50 years), where a booster can be advised - depending on risk and | **Yes for IC**<br>No<br>No (unless occupation exposure) | No |

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| Check antibodies | **N/A** | anticipated activities e.g. remote travel)<br><br>No | No | **N/A** |
| **ONE VISIT SCHEDULES** | | | | |
| **2 sites ID – day 0 (5-47yrs)**<br>(if no time for 2 visits, PEP vaccines available)<br>Booster | No | No | 2 sites<br>2nd dose within 12 mths<br><br>No booster | No |
| **1 site IM – day 0 (5-47yrs)**<br>(if no time for 2 visits), PEP vaccines available)<br>Booster | No | No | 1 site<br>2nd dose within 12 mths<br><br>No booster | No |

* NZ Expert opinion