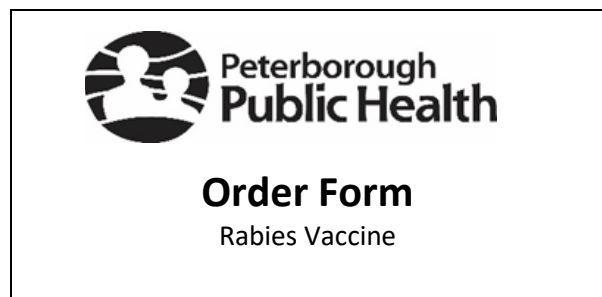


Patient Information

Name: _____
 Date of Birth (mm/dd/yyyy): _____
 Address: _____

 Telephone: _____



Order Details

<p>Patient Weight: <input type="text"/></p> <p>Globulin (Rablg) 2 ml vials <input type="text"/> (how many doses)*</p> <p>*Refer to chart on back for calculation and Management of Potential Rabies Exposures Guideline, 2020, Section 4.1.1 (Schedule and Dosage for Rabies Immune Globulin)</p>	<p>Rabies Vaccine 1 (please ✓)</p> <p><input type="checkbox"/> 1st dose (Day 0) <input type="checkbox"/> 2nd dose (Day 3) <input type="checkbox"/> 3rd dose (Day 7) <input type="checkbox"/> 4th dose (Day 14) <input type="checkbox"/> 5th dose (Day 28)**</p> <p>**Refer to Management of Potential Rabies Exposures Guideline, 2020, Section 4.1.2 Rabies Vaccine, Sub-section 4.1.2.2 Schedule & Dosage for Immunocompromised Persons</p> <p>PLEASE NOTE: Each dose is to be picked up on the day-of administration. If this poses an issue for your office, please call to discuss.</p>
<p>Total Globulin: _____ (doses)</p>	<p>Total Rabies Vaccine: _____ (doses)</p>

Order Date (mm/dd/yyyy): _____

Pick Up Date (mm/dd/yyyy): _____ Pick Up Time: _____ am (between 8:45 am and 12:00 pm)
 or _____ pm (between 12:00 pm and 4:15 pm)

Medical Facility: _____ Health Care Provider: _____

Contact Name: _____ Telephone Number: _____

Have you attached temperature logs to your order? yes no →vaccine will not be released

Healthcare Provider Signature: _____

For office use only:

Temp Log Received: Y N Temps in range: Y N Initial: _____

Rabies HealthSpace File #: _____

Order Filled: 20____/____/____ By: _____ Panarama Entry: 20____/____/____

By: _____

Source of information below: [Management of Potential Rabies Exposures Guideline, 2020](#) (from pages 13 and 14)
Please refer to the full Guideline document (above) and [Rabies vaccine: Canadian Immunization Guide](#).

4.1.1 Rabies Immune Globulin (Rablg)

The recommended dose of Rablg is 20 IU/kg body weight for all age groups, including children, given on the first day of initiation of therapy (day 0). Because of possible interference of Rablg with the immune response to the rabies vaccine, the dose of Rablg should not be exceeded.

Note that while the dose in mL to be administered will be different depending on which formulation of Rablg is being used, the number of vials to be dispensed will be the same.

For 150 IU/mL Rablg in 2 ml vials:

- $20 \text{ IU/kg} \times (\text{client wt in kg}) \div 150 \text{ IU/mL} = \text{dose in mL}$
 $\text{dose in mL} \div 2 \text{ mL/vial} = \# \text{ of vials to order}$
- $9.09 \text{ IU/lb} \times (\text{client wt in lb}) \div 150 \text{ IU/mL} = \text{dose in mL}$
 $\text{dose in mL} \div 2 \text{ mL/vial} = \# \text{ of vials to order}$

For 300 IU/mL Rablg in 1 ml vials:

- $20 \text{ IU/kg} \times (\text{client wt in kg}) \div 300 \text{ IU/mL} = \text{dose in mL}$
 $\text{dose in mL} \div 1 \text{ mL/vial} = \# \text{ of vials to order}$
- $9.09 \text{ IU/lb} \times (\text{client wt in lb}) \div 300 \text{ IU/mL} = \text{dose in mL}$
 $\text{dose in mL} \div 1 \text{ mL/vial} = \# \text{ of vials to order}$

Table 2: Number of Vials of Rablg to Dispense per Total Body Weight of Client

Total Weight		# of Vials	Total Weight		# of Vials
≤33 lbs	≤ 15 Kg	1	>165 – 198 lbs	>75 – 90 Kg	6
>33 – 66 lbs	>15 – 30 Kg	2	>198 – 231 lbs	>90 – 105 Kg	7
>66 – 99 lbs	>30 – 45 Kg	3	>231 – 264 lbs	>105 – 120 Kg	8
>99– 132 lbs	>45 – 60 Kg	4	>264 – 297 lbs	>120 – 135 Kg	9
>132 – 165lbs	>60 – 75 Kg	5	>297 – 330 lbs	>135 – 150 Kg	10

Note that the amount of Rablg administered may include administration of only a portion of one of the vials dispensed. For example, when a patient requires only 3.5 vials to be administered (which is 7 mls of the 150 IU/mL or 3.5 mls of the 300 IU/mL formulations), rather than 4 full vials, the remainder of the Rablg in the 4th vial should be discarded.