Administering rabies vaccine intradermally (WHO guideline April 2018)

Step 1
Aseptically reconstitute the vaccine immediately before administration with the appropriate volume of diluent provided by the manufacturer. Do not use a different diluent or a different amount of diluent.

Draw enough vaccine into the syringe to inject a single patient, using appropriate sterile precautions. Carefully remove any air bubbles.

Disinfect the injection site with antiseptic, then stretch the surface of the skin and insert the tip of the needle (bevelled edge facing upwards) into the upper layer of the skin (dermis), ensuring that the needle and syringe are almost parallel to the skin surface.

Step 2
Begin injecting the vaccine. If the needle is in the correct position, there is considerable resistance.

A raised papule, which looks like orange peel, will appear immediately, measuring 6-8 mm in diameter.

If the vaccine is injected easily, or if the papule does not appear, it has been given subcutaneously, i.e. too deeply. In such cases, the correct injection should be repeated.

Step 3
Once all doses of 0.1 mL of vaccine have been injected into the same patient, discard the needle and the syringe.

Reconstituted vaccine can be used for more than one patient; however, a sterile syringe and needle must be used to draw up vaccine for each patient.

The reconstituted vaccine must be stored in a refrigerator at 2-8 °C and used within 6 h.