



## **Veterinary Board of Governors Rabies Administration Technical Assistance**

The Veterinary Board of Governors (board) periodically receives questions about rabies regulations and how to respond during different scenarios. The guidance below addresses common issues brought to the board.

### **What if the client refuses the rabies vaccine?**

The [rabies rule](#) (see (3)) requires animal owners, not veterinarians to ensure animals are appropriately vaccinated. If the client refuses to follow this requirement, you can:

- Make sure they understand that it is their responsibility to have their animals vaccinated under Washington law.
- Let them know that if their animal were to be bitten or have other exposure to a confirmed or suspected rabid animal (this includes all wild mammalian carnivores, skunks, and bats), their pet would be considered either unvaccinated or overdue on vaccination. This could lead to a recommendation to euthanize their animal or to a 4-6 month quarantine period if they are unvaccinated or unable to provide proof of any Rabies vaccination.
- Advise them that Rabies vaccination is required for interstate and international travel Record in the patient record that the owner refused the vaccination despite counseling.

### **What if the animal's health condition would lead to adverse effects? My understanding is that the law does not permit exemptions.**

The veterinary standard of care **requires** the veterinarian to use professional judgement when determining when a rabies vaccination is appropriate for a given patient. Risks vs benefits of vaccination should be assessed for each patient and vaccination may be postponed temporarily or indefinitely if that is medically appropriate for the patient. The rabies rule does not supersede the veterinarian's obligation to recommend appropriate care for each individual patient in order to protect the patient's health

### **What would qualify as a reason to delay vaccination?**

Use your professional judgement to assess risks vs benefits of giving a rabies vaccine to the patient at this time. For many cases where current health status makes vaccination inappropriate the delay will be temporary and vaccination can occur once the current issue is resolved. As always recommendations should be based on available information and through the lens of what is most appropriate for the patient given current standards of care. The decision on whether or not to follow your recommendation is ultimately the client's.

### **Can I use titers as a substitute for the rabies vaccination?**

No. Under no circumstances should titers be considered a substitute. Rabies virus antibody titers are indicative

of a response to vaccine or infection. Titers do not directly correlate with protection because other immunologic factors also play a role in preventing rabies and our abilities to measure and interpret those other factors are not well-developed. Therefore, evidence of circulating rabies virus antibodies in animals should not be used as a substitute for current vaccination in managing rabies exposures or determining the need for booster vaccination.

For more information, please see the [Compendium of Animal Rabies Prevention and Control, 2016 \(PDF\)](#).