



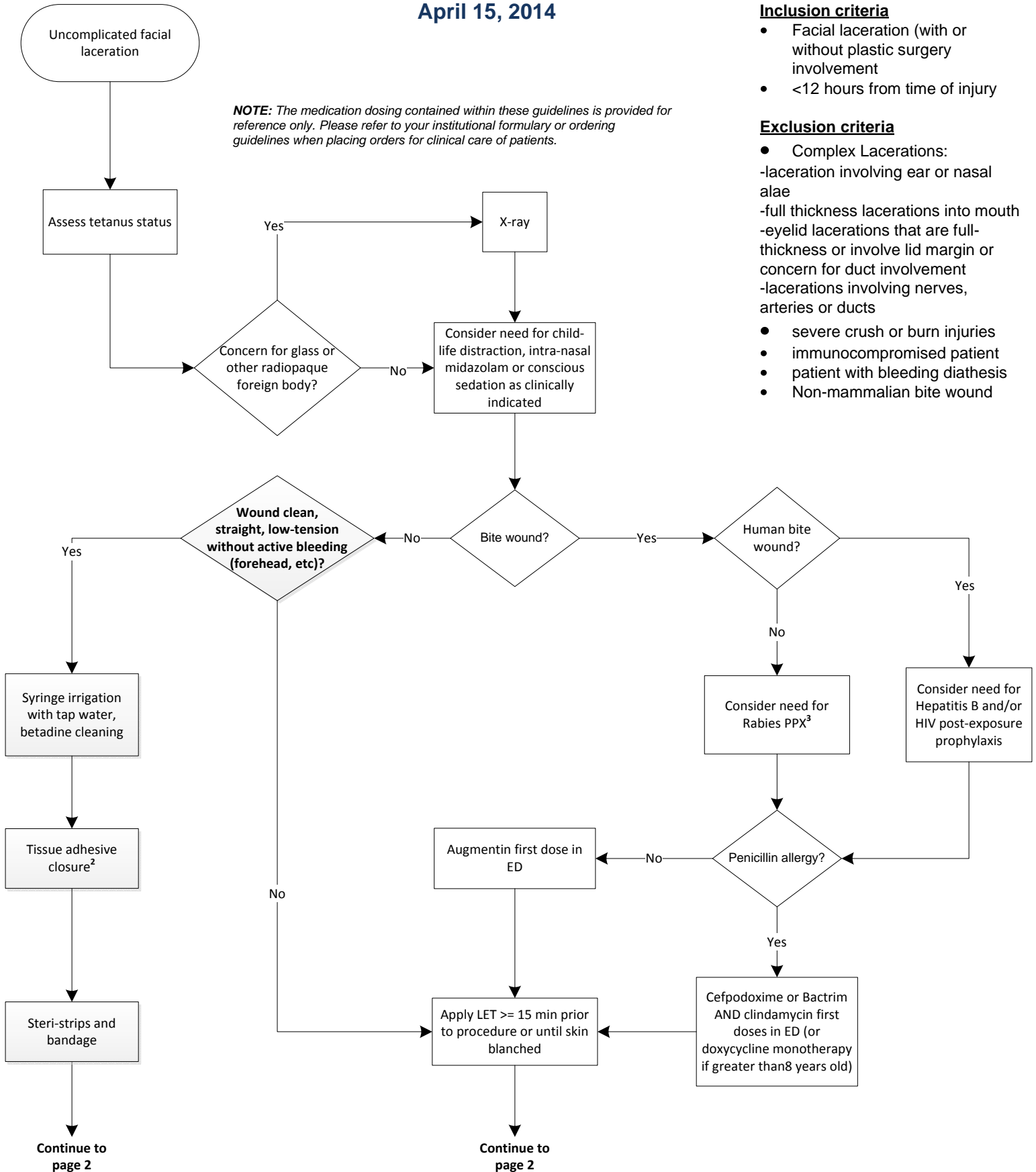
Inclusion criteria

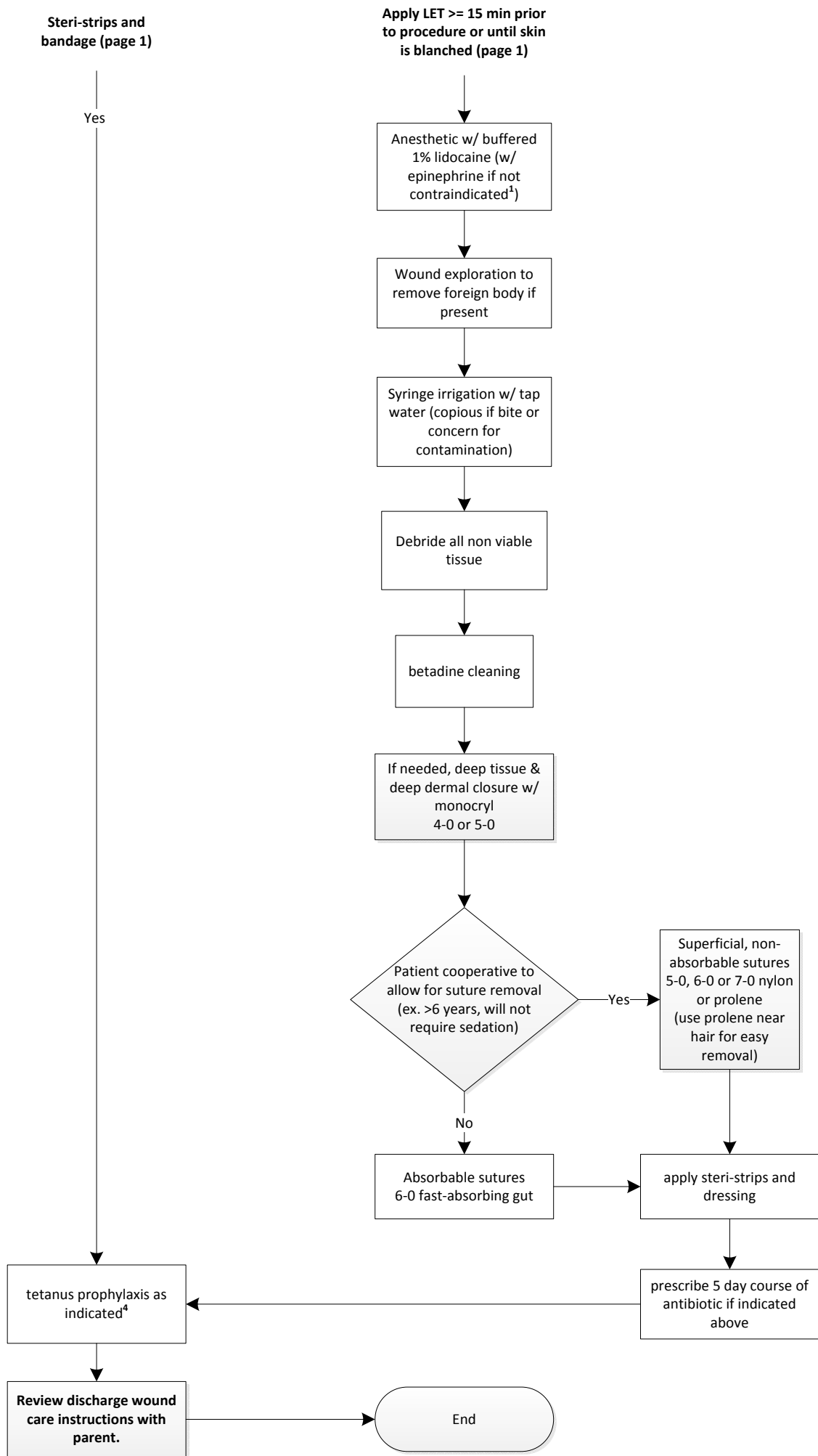
- Facial laceration (with or without plastic surgery involvement)
<12 hours from time of injury

Exclusion criteria

- Complex Lacerations:
-laceration involving ear or nasal alae
-full thickness lacerations into mouth
-eyelid lacerations that are full-thickness or involve lid margin or concern for duct involvement
-lacerations involving nerves, arteries or ducts
severe crush or burn injuries
immunocompromised patient
patient with bleeding diathesis
Non-mammalian bite wound

NOTE: The medication dosing contained within these guidelines is provided for reference only. Please refer to your institutional formulary or ordering guidelines when placing orders for clinical care of patients.





- 1.** - Max dose 3-5 mg/kg lido or 7 mg/kg lido w/ epi
- Consider mixing with bupivacaine if anticipate prolonged repair

2. Use of dermabond or occlusive dressings is contraindicated in contaminated wounds

3. Rabies Postexposure Prophylaxis Guide

Animal Type	Evaluation and Disposition of Animal	Postexposure Prophylaxis Recommendations
Dogs, cats, and ferrets	Healthy and available for 10 days of observation	Prophylaxis only if animal develops signs of rabies
	Rabid or suspected of being rabid	Immediate immunization and RIG ^c
	Unknown (escaped)	Consult public health officials for advice
Bats, skunks, raccoons, foxes, and most other carnivores; woodchucks	Regarded as rabid unless geographic area is known to be free of rabies or until animal proven negative by laboratory tests	Immediate immunization and RIG ^c
Livestock, rodents, and lagomorphs (rabbits, hares, and pikas)	Consider individually	Consult public health officials; bites of squirrels, hamsters, guinea pigs, gerbils, chipmunks, rats, mice and other rodents, rabbits, hares, and pikas almost never require antirabies prophylaxis
RIG indicates Rabies Immune Globulin.		
<ul style="list-style-type: none"> • ^a During the 10-day observation period, at the first sign of rabies in the biting dog, cat, or ferret, prophylaxis of the exposed person with RIG (human) and vaccine should be initiated. The animal should be euthanized immediately and tested. 		
<ul style="list-style-type: none"> • ^b The animal should be euthanized and tested as soon as possible. Holding for observation is not recommended. Immunization is discontinued if immunofluorescent test result for the animal is negative. 		

4. Guide to Tetanus Prophylaxis in Routine Wound Management

History of Adsorbed Tetanus Toxoid (Doses)	Clean, Minor Wounds		All Other Wounds ^a	
	DTaP, Tdap, or Td ^b	TIG ^c	DTaP, Tdap, or Td ^b	TIG ^c
Fewer than 3 or unknown	Yes	No	Yes	Yes
3 or more	No if <10 y since last tetanus-containing vaccine dose	No	No if <5 y since last tetanus-containing vaccine dose	No
	Yes if ≥10 y since last tetanus-containing vaccine dose	No	Yes if ≥5 y since last tetanus-containing vaccine dose	
Tdap indicates booster tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine; DTaP, diphtheria and tetanus toxoids and acellular pertussis vaccine; Td, adult-type diphtheria and tetanus toxoids vaccine; TIG, Tetanus Immune Globulin (human).				
<ul style="list-style-type: none"> ^a Such as, but not limited to, wounds contaminated with dirt, feces, soil, and saliva; puncture wounds; avulsions; and wounds resulting from missiles, crushing, burns, and frostbite. 				
<ul style="list-style-type: none"> ^b DTaP is used for children younger than 7 years of age. Tdap is preferred over Td for underimmunized children 7 years of age and older who have not received Tdap previously. 				
<ul style="list-style-type: none"> ^c Immune Globulin Intravenous should be used when TIG is not available. 				
<ul style="list-style-type: none"> ^d More frequent boosters are not needed and can accentuate adverse effects. 				

Clindamycin: 25-40 mg/kg/day in divided doses 3 times daily x 10 days; maximum single dose: 450 mg

Augmentin: 25-45 mg amoxicillin/kg/day in divided doses twice daily using the 200 mg/5 mL or 400 mg/5 mL oral suspension, or the 200 mg or 400 mg **chewable** tablet formulation x 10 days; maximum single dose: 875 mg amoxicillin

Cefpodoxime:

Infants and Children: 5 mg/kg/dose every 12 hours for 10 days; maximum dose: 200 mg
 Adolescents: 400 mg every 12 hours for 7-14 days

Bactrim: 6-10 mg TMP/kg/day in divided doses every 12 hours for 10 days, max dose 160 mg TMP