

Guidance for Tetanus Prophylaxis and Management of Tetanus Prone Wounds

Follow the guidance below starting at Step 1

STEP 1: Classification of wound(s)

Could the wound be tetanus prone? (Any of the following)

- i. a contaminated puncture wound (contact with soil or manure)
- ii. contains a foreign body
- iii. a compound fracture
- iv. wounds or burns with systemic sepsis
- v. some animal bites/scratches (agricultural or routing in soil)
- vi. caused by intravenous drug use- local recommendation

No →

A 'Clean wound' Booster may be required- GO TO STEP 2

↓ Yes

Could it be a high risk tetanus prone wound? (Any of the following)

- i. heavily contaminated with material likely to contain tetanus
- ii. wounds or burns that show extensive devitalised tissue
- iii. wound or burn requiring surgical intervention & is >6 hours old

No →

Tetanus Prone wound Vaccine and/or immunoglobulin may be required- GO TO STEP 2

↓ Yes

High risk tetanus prone wound
Vaccine and/or immunoglobulin may be required- GO TO STEP 2

STEP 2: Tetanus Immunoglobulin (TIG)

Tetanus Immunisation and Prophylaxis Following Injuries

Immunisation Status	Immediate treatment			Later treatment
	Clean wound	Tetanus Prone	High risk tetanus prone	
Those aged 11 years and over, who have received an adequate priming course of tetanus vaccine ¹ with the last dose within 10 years Children under 5 years who have received an adequate priming course	None required	None required	None required	Further doses as required to complete the recommended schedule (to ensure future immunity)
Received adequate priming course of tetanus vaccine ¹ but last dose more than 10 years ago Children aged 5-10 years who have received an adequate priming course but no preschool booster <i>Includes UK born after 1961 with history of accepting vaccinations</i>	None required	Immediate reinforcing dose of vaccine	Immediate reinforcing dose of vaccine One dose of human tetanus immunoglobulin ² in a different site	Further doses as required to complete the recommended schedule (to ensure future immunity)
Not received adequate priming course of tetanus vaccine ¹ <i>Includes uncertain immunisation status and/or born before 1961</i>	Immediate reinforcing dose of vaccine	Immediate reinforcing dose of vaccine One dose of human tetanus immunoglobulin ² in a different site	Immediate reinforcing dose of vaccine One dose of human tetanus immunoglobulin ² in a different site	

1. At least 3 doses of tetanus vaccine. 2. TIG is kept in both A&Es (not MMPS).
If TIG is not available, human normal immunoglobulin (HNIG; GammaNorm) may be used instead (see Formulary).

TIG dose: Tetanus Prone - 250 UNITS; High risk tetanus prone - 500 UNITS

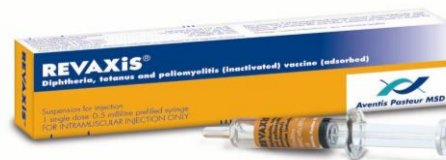
When a patient is unsure of their vaccination history an attempt must be made to confirm their status before immunoglobulin is given. If unlicensed TIG is used, obtain verbal consent when possible, provide a ULM leaflet and complete the ULM records held with the stock. If there is no TIG available, contact the A&E Pharmacist LGI 80-1245, SJUH 80-1140, or on-call OOH 80-1247 for HNIG.



Priming immunisations (3 months-3 years)



Pre-school booster (if priming complete)



Children >10 years and adult booster