

Doncaster and Bassetlaw Teaching Hospitals

Tetanus Status

NHS Foundation Trust

The current Primary Immunisation Schedule against tetanus in the UK is 5 doses of tetanus vaccine (REVAXIS).

- 3 doses in the first year of life, 1 dose pre-school and the final dose around 10 years later.
- This has been the case since 1961 unless the person's parents withheld consent for immunisation.
- It should be standard practice to be mindful that patients born before 1961 may NOT have received the standard schedule Careful history taking is essential as other populations e.g. migrant communities may also not have had full immunisation.
- Recent guidance from PHE (Nov 2018) states that if a person sustains a tetanus prone wound AND their last dose as part of the standard immunisation schedule was more than 10 years ago that they should receive a reinforcing dose of tetanus vaccine. If they have a high risk tetanus prone wound AND their last dose of tetanus vaccine was more than 10 years ago they should receive a reinforcing dose of tetanus vaccine along with Human Tetanus Immunoglobulin (TIG),
- Patients who have NOT received a full course of tetanus vaccine, or are unsure of their vaccination status (unless this can be
 confirmed via the SCR/health record) should be given a dose of tetanus vaccine (REVAXIS) when they attend with any wound. If
 further doses are needed the GP should be informed.
- Patients needing REVAXIS also need TIG if they have a **TETANUS PRONE** OR **HIGH RISK tetanus prone** wound. TIG affords them immediate protection which REVAXIS does not.
- People who are fully vaccinated AND the last dose was less than 10 years ago DO NOT need TIG even for HIGH RISK tetanus prone
 wounds.
- Treat Immunocompromised patients as if their Vaccinations are incomplete.

Tetanus vaccination/prevention

Patient presents with a wound or burns

Fully Immunised (or up to date with immunisation schedule) AND last dose <10 yrs ago Fully Immunised (or up to date with immunisation schedule) AND last dose >10 yrs ago Incomplete/Uncertain Immunisation status or Immunocompromised

CLEAN
WOUND
(<6hrs
old, nonpenetrating
with
negligible
tissue
damage)

TETANUS PRONE HIGH RISK TETANUS PRONE CLEAN

TETANUS PRONE HIGH RISK TETANUS PRONE CLEAN WOUND

Wash

Give Revaxis

Record batch

number

Ask GP to

complete

Course (where

appropriate)

TETANUS PRONE HIGH RISK TETANUS PRONE





Wash well

Wash
Give Revaxis
(record
batch
numbers)

Wash
Give Revaxis
(record batch
numbers)
AND

Give TIG
250 iu in a
different site
(record batch
numbers)

500 iu may

be required if >24hrs have elapsed, risk of heavy contamination or following burns Wash
Give Revaxis
AND
Give TIG
250 iu in a
different site
(record batch

numbers)

500 iu may be required if >24hrs have elapsed, risk of heavy contamination

Ask GP to complete Course (where

appropriate)

or following

Wash
Give Revaxis
AND
Give TIG
250 iu in a

different site (record batch numbers) 500 iu may be required if >24hrs have elapsed, risk of heavy con-

tamination

or following burns Ask GP to complete Course (where

appropriate)

TETANUS PRONE

Wash well

Puncture type in a contaminated environment
e.g gardening injuries
OR
Foreign body e.g splinters
OR

Compound fractures
OR

Wounds or burns with systemic sepsis OR

Certain animal bites and scratches (does not include small animal bites unless animal has been rooting in soil or lives in agricultural setting) OR

Wound sustained >6 hrs ago

HIGH RISK TETANUS PRONE

Any of the above with either:

Wounds/Burns which are extensively devitalised.

Wounds/Burns heavily contaminated with soil or manure.

Wounds/burns requiring surgical intervention delayed for >6hrs even if the contamination was not initially heavy