



Post-exposure management for tetanus-prone wounds

Immunisation status	Immediate treatment				Later treatment
	Clean wound ¹	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 aged 5-10 years who have received priming course and pre-school booster 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 vaccine³ but last dose more than 10 years ago Children aged 5-10 years who have received an adequate priming course but no preschool booster (Includes UK-born after 1961 with history of accepting vaccinations)	None required	Immediate reinforcing dose of vaccine		Immediate reinforcing dose of vaccine One dose of human tetanus immunoglobulin ² in a different site	
Not received adequate priming course of tetanus vaccine³ (Includes uncertain immunisation status and/or born before 1961)	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 Clean wounds are defined as wounds less than six hours old, non-penetrating with negligible tissue damage.

2 If TIG is not available, HNIG may be used as an alternative.

3 At least three doses of tetanus vaccine at appropriate intervals. This definition of ‘adequate course’ is for the risk assessment of tetanus-prone wounds only. The full UK schedule is five doses of tetanus-containing vaccine.

Patients who are severely immunosuppressed may not be adequately protected against tetanus, despite having been fully immunised, and additional booster doses or treatment may be required.