Date: February 25, 2017

To: First Responders and Providers caring for persons exposed to flood water

From: Sara H. Cody, MD
Health Officer

RE: Exposure to flood water and assessment of need for vaccinations

According to the Centers for Disease Control and Prevention (CDC), outbreaks of infectious diseases after a flood in the U.S. are very unusual. Exposure to flood water alone is not a reason to give tetanus-containing vaccine or any other vaccine.

**Tetanus vaccine:**
The recommendations for tetanus vaccine that apply during a flood are the same as those that apply at any other time.

- Anyone who has sustained a severe wound should be evaluated by a medical provider. People with puncture wounds that may be contaminated with soil or fecal material should receive tetanus-containing vaccine if more than 5 years have elapsed since their last tetanus booster. Persons who have not completed a primary tetanus series must be vaccinated and given tetanus immune globulin (TIG) as soon as possible.
- Persons with clean, minor wounds should receive tetanus-containing vaccine if they have not completed a primary tetanus series or if more than 10 years have passed since their last tetanus booster.
- All persons should receive a tetanus-containing booster every 10 years.

**Hepatitis A vaccine:**
There is no specific reason to give hepatitis A vaccine routinely during floods. No transmission of hepatitis A virus from contaminated water has been identified in the U.S. since the 1980s. There are very low rates of hepatitis A in Santa Clara County, so the likelihood of flood waters being contaminated with the hepatitis A virus is extremely low.