

Biosecurity – Australian Bat Lyssavirus

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Scope:

The *Biosecurity Act 2015* (the Act) promotes biosecurity as a shared responsibility between government, industry and communities. This procedure is a State Priority for NSW and should be read in conjunction with the policy 'Prohibited matter sporadic pests and diseases of animals'. The procedure applies to the NSW Department of Primary Industries and Regional Development (NSW DPIRD), and Local Land Services (LLS) in their role as authorised officers under the Act.

Management of the biosecurity risk

Australian bat lyssavirus (ABLV) is endemic in microbats and flying foxes in Australia. Occasionally infected bats transmit infection to humans through bites or scratches and the resultant human infection is invariably fatal. Fatal spillover infection has been also seen in horses.

Transmission to non-bat species is usually associated with bites or scratches from clinically affected bats. The available data from natural ABLV infection indicates that the incubation period in humans and bats is similar to that of rabies and is variable from days to years. Death occurs after a short illness characterised by progressive severe nervous signs. Closely related lyssaviruses overseas cause illness in a wide range of domestic and wild animals and ABLV infection in additional animal species is likely to be reported in the future. Virus survival outside the host is short term and it is inactivated by many disinfectants and soap. Rabies vaccination is considered to provide cross protection against ABLV challenge.

Biosecurity legislation summary

Clinical ABLV in any animals other than bats and exotic lyssavirus genotypes in any animals are listed as prohibited matter under Schedule 2 of the Act. This means that a person who owns or is caring for animals, or a person such as a veterinarian in their professional capacity, has a duty to immediately notify an authorised officer if they suspect, or are aware, that an animal (other than a bat) has clinical ABLV or any animal has an exotic lyssavirus genotype (including rabies).

ABLV in bats is listed as notifiable in Schedule 1 of the Biosecurity Regulation 2017 (the Regulation). The notifiable listing requires people to notify any suspect or known cases of ABLV to an authorised officer, within 1 working day of first suspecting or becoming aware.

The collection, use and disclosure of information in accordance with this procedure, including any internal or external discussion or distribution of information, must be in compliance with the *Privacy and Personal Information Protection Act 1998* or be exempted by the operation of section 387 of the Act.

Section 387 (2) of the Act provides authority for the disclosure of information about a person, without the consent of the person: to a public sector agency, or to any other person, but only if the disclosure is reasonably necessary for the purpose of exercising a biosecurity risk function.

Work health and safety

The *Work Health and Safety Act 2011* places an obligation on the agency (NSW DPIRD and LLS) as a person conducting a business or undertaking and workers to provide a safe and healthy workplace. Safe Work Method Statements that support activities included in this procedure must be used in identifying, assessing and controlling risks.

NSW DPIRD and LLS will work together to create a safe and supportive work environment when undertaking any activities for this procedure.

ABLV is invariably a fatal zoonotic disease and as such, extreme caution must be exercised when dealing with live and dead bats. Handlers must be vaccinated and wear appropriate personal protective equipment (PPE).

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1. Roles and responsibilities

NSW DPIRD and LLS managers must:

- direct staff to not handle live bats or perform bat necropsies unless the officer has received a full course of rabies vaccinations and has undertaken titre monitoring to ensure that their level of protection is adequate.
- provide information on ABLV infection for the general public on the Department's website
- include information about ABLV in briefings on zoonotic disease

NSW DPIRD and LLS staff must:

- report any notifications or suspicions of ABLV they become aware of in accordance with the procedure - Reporting prohibited matter, notifiable pests and diseases of animals and other biosecurity events.
- coordinate the investigation of any suspect clinical ABLV in non-bat animals or exotic lyssavirus genotypes in any animals
- coordinate the investigation of any suspect ABLV cases in bats where the case has been risk assessed as appropriate for expedited testing
- refer veterinarians or veterinary clinical staff to Elizabeth Macarthur Agricultural Institute for submission of samples for ABLV / lyssavirus testing
- provide advice in liaison with private practitioners involved in the case, and communicate with the owner when required
- notify the local NSW Public Health Unit of any suspected human exposure to ABLV suspect or confirmed infected animals
- use appropriate PPE when dealing with possible exposure to zoonotic agents
- follow other appropriate policies, procedures and work instructions

2. Notification and reporting

Lyssavirus (including ABLV) is notifiable under the *Biosecurity Act 2015* (the Act). Clinical ABLV in any animal other than bats and exotic genotypes of lyssavirus (including rabies) are listed as Prohibited Matter under Schedule 2 of the Act. ABLV in bats is listed as notifiable under Schedule 1 of the Biosecurity Regulation.

This means that in NSW, a person who owns or is caring for an animal, or a person such as a veterinarian in their professional capacity, has a duty to:

- immediately and verbally notify suspected infection to an authorised officer where they suspect, or are aware, that:
 - an animal (other than a bat) has clinical ABLV
 - an animal has an exotic lyssavirus genotype (including rabies)
- notify an authorised officer within one working day if they suspect, or are aware, that a bat is infected with Australian Bat Lyssavirus

There is no requirement to notify an authorised officer of an interaction of a bat with another animal, such as a cat or a dog in cases when ABLV infection in the bat is not suspected.

These reporting obligations also apply to staff at laboratories who receive samples from bats or other animals where:

- the submitter requests ABLV testing
 - laboratory staff consider that testing for ABLV is appropriate.
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2.1 Notification of exotic lyssavirus in any animal or clinical ABLV in non-bat animals

Immediate verbal notification of suspected infection to an authorised officer is only required where a person suspects, or is aware, that:

- an animal (other than a bat) has clinical ABLV
- an animal has an exotic lyssavirus, such as rabies

In these circumstances call the Emergency Animal Disease Watch Hotline on 1800 675 888.

2.2 Infection or suspected infection of bats with ABLV

A person must notify an authorised officer within one working day if they suspect, or are aware, that a bat is infected with Australian Bat Lyssavirus.

In these circumstances, notification is by emailing animal.biosecurity@dpi.nsw.gov.au or calling the animal diseases hotline on 1 800 675 888 with details of the case and contact information. Where the bat is being submitted for ABLV testing, a copy of your submission form should be attached to the notification.

2.3 Notification from the laboratory of laboratory testing results

Elizabeth Macarthur Agricultural Institute staff must verbally notify the NSW CVO / DCVO of any positive ABLV laboratory testing results prior to results and/or reports being released to the submitter.

3. Action following reporting of suspect or confirmed cases of ABLV infection

3.1 History

Collect details of the incident: time /date/location of potential exposure, status of bat, nature of interaction, clinical signs observed, and details of who has been potentially exposed.

3.2 Risk assessment

Using the history provided, a risk assessment must be undertaken on all reports of suspect or confirmed ABLV infection. Guidance on the factors to consider when undertaking a risk assessment for ABLV exposure can be found in [ABLV guidelines for veterinarians](#)

Bats can be categorised based on their potential to transmit ABLV to humans and other animals (i.e. potential for an infected bat to have infectious contact with a human or other animal). These categories are listed from highest to lowest urgency for action:

Category 3 (high human health risk) - Bat that is known or reasonably suspected to have had potentially infectious contact with a human (e.g. has bitten or scratched a person). Within Category 3, bats with clinical signs suggestive of ABLV are of highest risk.

Category 2 (high animal health risk, medium human health risk) - Bats that potentially pose a risk of infection to humans due to either:

- history or clinical signs suggestive of ABLV without a history of a potentially infectious contact with a human (Category 2a), or
- history of known or suspected contact with another animal (other animal potentially exposed to ABLV via bat) (Category 2b).

Category 1 (low risk) - Bat that is neither Category 2 nor Category 3 — that is, bat that has no history of known or suspected contact with another animal or person and for which the index of suspicion for ABLV infection is low (e.g. no clinical signs consistent with ABLV).

3.3 Handling live bats

Only appropriately vaccinated and trained people should handle bats. Members of the public should be advised to contact a wildlife care agency (such as WIRES 1300 094 737) who have trained bat handlers.

The following precautions should be taken when handling live bats:

- avoid or minimize bat handling where possible
 - wear appropriate protective clothing, long sleeves, long pants, shoes and double gloves (e.g. nitrile rubber which is puncture resistant)
 - prevent mucous membrane exposure (eyes/mouth) by a face mask and safety glasses or a face shield
 - take all reasonable steps to avoid being bitten or scratched
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3.4 Handling dead bats

- Saliva or neural tissue from dead bats is potentially infectious and contact with dead bats should be minimal. If handling is necessary, use a tool such as a shovel to move the body. Puncture resistant gloves should be worn if touching the bat. If the bat is to be tested, place the body in a leak-proof bag and seal and then place in another labelled bag and store it in the refrigerator (not freezer). If testing is not required dispose of the body by burial or incineration.
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4. Management of suspected animal or human ABLV interactions

NSW DPIRD takes a precautionary approach to potential ABLV exposures. This assumes that ABLV may be transmitted to in-contact animals during close contact and that an exposed animal then may develop clinical illness and constitute an ongoing transmission risk.

A potential exposure occurs when an animal or human has broken skin (puncture/abrasion) or mucous membrane contact with a suspect or confirmed ABLV infected animal or its saliva or neural tissue. If there is any doubt that potential human exposure has occurred, it should be assumed that contact has occurred unless it can be categorically ruled out.

NSW DPIRD will cover the costs of transport and testing of samples for ABLV disease investigations under the notifiable disease testing program for category 2a and 3 interactions. Costs for testing bats for category 2b (animal bat interactions) and category 1 interactions are the submitter's responsibility.

4.1 Category 3 (high human health risk) interaction with bat

For all inquiries where the level of human exposure is assessed as category 3, the inquirer must be advised to contact their medical practitioner and/or [NSW Public Health Unit](#). Where the suspect bat has shown clinical signs suggestive of ABLV immediate action is required.

In addition, any laboratory results involving human interaction will be sent to NSW Health Protection.

If skin or mucous membrane contact has occurred the following first aid advice should be given in the first instance until medical assistance is initiated:

- wash any wounds with soap and water for five minutes
- after washing, apply an antiseptic with virucidal action, such as povidine-iodine, iodine tincture, or aqueous iodine solution
- if saliva enters the eyes, nose or mouth the area should be flushed thoroughly with water
- if available isolate the bat for testing
- If the suspect bat is available steps to submit the bat for ABLV testing should be initiated.
- If the bat is alive it will need to be euthanased. See above for information on handling bats.
- If the bat is not made available for testing, regulatory action to secure the bat is not undertaken unless requested by NSW Health.

4.2 Category 2 bat interactions

These exposures should also be investigated and testing of the bat undertaken because of the potential risk of direct or indirect human exposure.

If the bat is not made available for testing, regulatory action to secure the bat is not undertaken unless requested by NSW Health.

Any bat that has shown clinical signs indicative of ABLV infection needs to be handled with extreme caution as discussed above.

4.3 Category 1 interactions (low risk)

Where the bat is alive but there are no clinical signs and no history of an animal or human interaction with the bat, the bat should be handled by someone who is vaccinated and trained in bat handling (such as a registered wildlife carer) in order not to exacerbate any risky interactions. Be aware that bats are often injured because of impaired mobility or ability to respond to danger, and ABLV may be the underlying cause. Therefore, all such bats should be treated with caution.

Where the bat is just found dead and no history is available it should be disposed of, ideally by incineration or deep burial, without direct handling, e.g. using a shovel or rubber gloves and a plastic container or strong plastic bag.

Laboratory testing for ABLV is not required for category 1 interactions. Bats can be tested but will be at submitter expense unless alternate program funding is identified.

4.4 Domestic animals with neurological signs/behaviour changes and possible exposure to a bat within the last two years

Any such domestic animal should be treated with caution. Advise the owner that the animal should be isolated from people and other animals until it has had a clinical examination by a veterinarian who is aware of the full history.

A risk assessment must be conducted as to the likelihood that the animal has ABLV, and the risk it poses to other animals and humans. If the risk is assessed as high or medium, particularly if the animal has a classic rabies presentation, then the animal should be humanely euthanised in a manner that poses minimal risk to personnel. For companion animals the whole animal should be submitted intact to the Elizabeth Macarthur Agricultural Institute for ABLV testing.

For horses or other livestock suspected of being ABLV infected, collection of appropriate samples may be undertaken in the field if safety precautions are adhered to and if Hendra virus infection has been excluded.

For other cases where no other cause of the neurological signs is apparent after clinical and laboratory investigation, then euthanasia and submission of samples for testing is also recommended.

As ABLV infection is notifiable any suspicion of ABLV infection must be reported.

In situations where euthanasia is not carried out on a non-bat species that is suspected of being ABLV infected based on the clinical history, an authorised officer will give a biosecurity direction to the owner or person in charge of the suspect animal to isolate the animal from other animals, pending further decisions regarding the management of the animal.

If a written risk assessment by a government veterinarian concludes that the animal presents a significant risk to people or other animals and the owner is not prepared to have the animal euthanised voluntarily a further biosecurity directive may be used to seize the animal.

Subsequent management of the animal including possible euthanasia under section 136 of the Act will be determined by the NSW DPIRD Chief Veterinary Officer (CVO) who will take into account the written risk assessment and the on-going welfare of the animal as well as the resource implications involved.

Any person who has had potential exposure to an animal suspected of being ABLV infected should be referred immediately to their local [NSW Public Health Unit](#) or general practitioner for assessment. The District Veterinarian or NSW DPIRD veterinarian must also notify the local NSW Public Health Unit.

5. Sampling Australian bat lyssavirus suspect animals

Advice on samples to collect for ABLV testing and packaging arrangements for transport can be found on the [Elizabeth Macarthur Agricultural Institute ABLV](#) webpage.

Suspect bats are usually submitted whole. Often suspect bats, if dead, may be found partially dismembered but residual nervous tissue can still be tested. For larger animals such as dogs or cats submission of the whole carcass is preferable, while for suspect large animals debulking of the head or submission of the brain may be necessary to fit into transport containers. Tissues should be chilled and not frozen.

Infected bats may show aggression and actively seek contact. This has been documented in two of the human cases. Live bats will need to be euthanised before they can be submitted for laboratory testing.

ABLV is a serious zoonotic pathogen so extreme care should be taken when collecting samples. The Wildlife Health Australia Guidelines "[Personal Protective Equipment \(PPE\) for Bat Handlers](#)" should be consulted.

Live animal tests such as skin or salivary gland sampling for ABLV diagnosis have low sensitivity and only useful if positive. A negative result does not mean the animal is not infected with ABLV.

Samples should be triple-bagged and a note inserted outside the bags but inside the esky indicating that suspect ABLV submission is enclosed. The samples should be submitted chilled with adequate ice bricks for the transport period. The laboratory will also need to be advised that ABLV suspect samples are being submitted.

6. Advice to owners of exposed animals following laboratory testing of bats

6.1 Bat tests positive

The owner must be advised that the contact animal has a low risk of developing ABLV infection but if it did it could potentially then also transmit the infection to humans or other animals.

Advice to the animal owner should include the following options.

6.1.1 Vaccination

Rabies vaccination of the at-risk animal as soon as possible after the contact with the bat should mitigate the risks of clinical ABLV infection.

Registered veterinarians are permitted to order and stock Novibac inactivated rabies vaccine for use as per the [APVMA Permit 14236](#). Permit conditions must be followed when administering the vaccine.

The vaccine must be administered by registered veterinarians, as per label and CVO direction for post-exposure prophylaxis, to terrestrial mammals (except pigs). Veterinarians must keep records of the vaccine and animal details and available for examination by an Authorised Officer.

6.1.2 Euthanasia

To avoid any further risk of possible human exposure to ABLV infection from a suspect animal, the owner has the option of authorising euthanasia of the animal (especially in those cases where it can be established that physical contact between the animal and the bat definitely occurred).

6.1.3 Health monitoring

In this option the animal should be kept under observation for at least two years for any changes in behaviour or signs of ill-health (due to the possible long incubation period). If these are seen, they should be immediately reported to an authorised officer. The owner needs to also understand that observing the animal does not reduce the potential exposure risk and if clinical signs suggesting ABLV disease are reported, it is likely to be recommended that the animal be euthanised and samples taken for ABLV testing.

Testing for ABLV antibodies in animals thought to be exposed is of limited value as antibodies to natural infection appear after the onset of clinical signs.

6.2 Bat not available for testing

The owner must be advised that the in-contact animal has a very low risk of developing ABLV infection. But if it did, it could potentially then also transmit the infection to humans or other animals.

The options for managing this scenario include the ones listed in section 6.1. Where the suspect bat is alive and not showing any clinical signs of ABLV infection but is not available for testing, an additional option is to monitor the health status of the isolated bat for 10 days. The purpose of the monitoring is not to determine if it is ABLV infected, but whether it was likely to have been infectious at the time of the animal interaction. A bat free of clinical signs 10 days after an interaction is unlikely to have been infectious at the time of interaction.

6.3 Bat tests negative

No further action required.

It is important for a negative result particularly for category 3 interactions, that there is a very high level of confidence that the bat sent for testing is the same bat which had a human or animal interaction. This should be emphasised in communication with submitters.

7. Vaccination of animals

7.1 Pre-exposure vaccination

Pre-exposure vaccination is undertaken for animals moving overseas where they may be exposed to rabies or other lyssaviruses. A wider use of pre-exposure vaccination in Australia may be considered if ABLV infection is detected more frequently in non-bat species or the risks of exposure for susceptible species increases. Clinical ABLV infection was detected in two yearling horses in Queensland in 2013 and overseas closely related lyssaviruses have occasionally caused clinical disease in a wide range of wild and domesticated species. The occurrence of sporadic ABLV infection in additional susceptible species in the future cannot be discounted.

The use of rabies vaccine in animals moving overseas is coordinated by the Australian government Department of Agriculture Fisheries and Forestry (DAFF). For many countries rabies vaccination of companion animals is an entry requirement. Contact DAFF for details on pre-exposure rabies vaccination for animals being exported from Australia.

7.2 Post Exposure

There is no vaccine specifically against ABLV. However, because ABLV is closely related to rabies virus, inactivated rabies vaccines are expected to provide a high degree of cross-protection against ABLV.

To provide the best chance of protection the vaccine must be given well before the appearance of clinical signs. Protective immunity is normally in place by 21 days after the second vaccination, but caution should be used in contact with the animals until 60 days have passed.

Registered veterinarians are permitted to order and stock Nobivac Rabies Inactivated Rabies Vaccine for use as per the APVMA Permit 14236.

The Nobivac Rabies Inactivated Rabies Vaccine is administered by registered veterinarians, as per label and requires CVO approval for post-exposure prophylaxis, to terrestrial mammals (except pigs) that have are thought to have had direct exposure to a suspected or confirmed diagnosed case of ABLV in NSW. Animals must be microchipped prior to administration of the vaccine. The administering veterinarian must keep accurate vaccination records including the species, microchip number, vaccination date and vaccine batch number. These records must be maintained by the private veterinarian for the life of the animal and made available at the request of an authorised officer.

If any animal develops clinical signs suggestive of ABLV infection it must be reported to an Authorised Officer at NSW DPIRD or LLS and investigated by a veterinarian.

Note: all costs associated with post exposure vaccination of domestic mammals, elective euthanasia or ongoing veterinary monitoring of a domestic mammal that has been exposed to a bat will be at the expense of the owner/manager.

8. Liaison with NSW Health

NSW Health must be notified of all cases where human exposure to a suspect or confirmed ABLV infected animal is suspected to have occurred or where any ABLV positive animal (including bats) is confirmed. The NSW CVO (or delegate) will notify staff in Health Protection NSW. The location of the incident, date and contact details and rabies vaccine history for involved parties is information NSW Health would need to undertake their own assessments.

9. Recording information

All information regarding incidents of suspected or confirmed ABLV infection are to be recorded in LHMS by the NSW DPIRD Wildlife Coordinator.

Definitions and acronyms

ABLV: Australian bat lyssavirus

Authorised officer: An officer of DPIRD that is authorised under the Biosecurity Act 2015

Bats: Fruit eating bats (flying foxes) and insect eating bats (microbats)

Confirmed Case: A case confirmed in the laboratory using diagnostic tests specific to ABLV, i.e. ABLV confirmed by ABLV-specific nucleic acid or antigen typing tests

CVO: Chief Veterinary Officer of NSW

DAFF: Department of Agriculture Fisheries and Forestry

Exposure: Exposure occurs when an animal or human is bitten or scratched by a bat or has mucous membrane or broken skin contact with saliva or neural tissue from a bat

Incubation period: The time period between virus entry and the onset of clinical signs

LHMS: Livestock Health Management System

NSW DPIRD: NSW Department of Primary Industries and Regional Development

LLS: Local Land Services

Positive animal: An animal that is confirmed positive for ABLV by fluorescent antibody test and PCR for ABLV ribonucleic acid (RNA)

Precautionary principle: The establishment of an obligation, if the level of harm may be high, for action to prevent or minimise such harm even when the absence of scientific certainty makes it difficult to predict the likelihood of harm occurring, or the level of harm should it occur.

Susceptible animals: Species susceptible to ABLV infection. Bat human and horse cases reported to date but closely related lyssaviruses overseas cause illness in many warm-blooded animals both domestic and wild.

Suspect animal: Any animal (including bats) showing clinical signs that are consistent with infection by ABLV, as well as any bat that has bitten/scratched a person or animal.

Triple bag: Placing a sample in a sealed primary container which is then disinfected on the outside and then placed in secondary and tertiary sealed containers.

WIRES: Wildlife Information, Rescue and Education Service

Documentation:

DPIRD NSW Website - Policy and Procedures

Policy – Prohibited matter – sporadic pests and diseases of animals

Policy - Biosecurity collection, use and disclosure of information

Policy - Records Management (IND-I-177)

Policy - Information Security (IND-I-197)

Policy - Classified Information (IND-I-196)

Policy -Government Information (Public Access) (IND-I-178)

Procedure - Biosecurity collection, use and disclosure of information

Procedure - Reporting notifiable pests and diseases of animals

Procedure - Prohibited matter pests and diseases of animals – investigation and alert phase

Procedure - Personal decontamination kit & use for property visits.

Record Keeping and Information Management | Department of Primary Industries and Regional Development

Policy – State Records NSW Records and Information Management Policy

Policy - Government Information (Public Access)

Other resources

Work Instruction - Correct use of PPE for infectious animal disease investigations

Strategy - AUSVETPLAN Disease strategy Australian bat lyssavirus - version 5.1 2024

Manual - AUSVETPLAN Operational Procedure - Decontamination and Disposal

Webpage - State Veterinary Diagnostic Laboratory ABLV

Factsheet - ABLV Wildlife health Australia

Handbook - Australian Immunisation handbook

Factsheet - Rabies and other Lyssavirus infection

Records

Records created as a result of this procedure are stored in the Livestock Health Management System (LHMS).

Records relating to properties placed under biosecurity restrictions must be maintained for at least ten years.

Revision history:

Version	Date issued	Notes	By
1	01 July 2017	New procedure developed from amalgamation and complete revision of old procedure in response to <i>Biosecurity Act 2015</i>	Animal Biosecurity and Welfare
1.1	07 August 2018	Updates to include the Biosecurity (Rabies vaccination for Australian bat lyssavirus) Control Order 2018	Animal Biosecurity
1.2	19 November 2019	Updates to include amendments to the Biosecurity Act and Regulation	Animal Biosecurity
1.3	24 July 2024	Updates to remove references to 2018 Control Order which has lapsed	Animal Biosecurity
1.4	02 August 2024	Updated to DPIRD template – new version saved in CM as PROC24/24 (old ref: INT18/109322[v3])	Animal Biosecurity
1.5	1 July 2025	Updated DPIRD content and document links	Animal Biosecurity

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