Summary of Risk Assessment of Rabies-prone Exposure and Post Exposure Treatment

This summary should always be used in conjunction with Interim Guidelines on Post-exposure Assessment and Treatment of Rabies- prone Exposures (August 2025).

1. **Determine the combined country or animal risk - remember, in whichever country it occurs, a bat exposure is always LOW (not NO) risk for rabies.**

2. Determine the category of exposure

Catego	Terrestrial mammals	Bats
1	No physical contact with saliva	No direct physical contact with bat's saliva or urine (NB if there is a reliable exposure history)
2	Minimal contact with saliva, with no evidence of transdermal inoculation or mucosal exposure	Uncertain or potentially unrecognised physical contact (i.e. no observed direct physical contact as above but where it may have occurred, for example adults and children who waken to find a bat in room)
3	Direct contact with saliva	Direct contact with saliva

3. Determine the composite rabies risk

Combined Country/ Animal risk	Category 1 exposure	Category 2 exposure	Category 3 exposure
No risk[§]	Green	Green	Green
Low risk	Green	Amber	Amber
High risk	Green	Amber	Red
Confirmed rabies	Green or amber	Red	Red

[§]NB: No risk refers to countries that have **no risk for terrestrial rabies** – **all countries are at least low risk for bat rabies**

4. Determine the post-exposure treatment required

Composite rabies risk	Non-immunised	Partially immunised	Fully immunised	Immunosuppressed
Green	None	None	None	None
Amber	4 doses of vaccine days 0, 3, 7, 14-28	4 doses of vaccine days 0, 3, 7, 14-28	2 doses of vaccine days 0 and 3	HRIG[c] and 5 doses of vaccine days 0, 3, 7, 14 and 28
Red	HRIG[c] and 4 doses of vaccine days 0, 3, 7 and 14-28	4 doses of vaccine days 0, 3, 7 and 14-28	2 doses of vaccine days 0 and 3	HRIG[c] and 5 doses of vaccine days 0, 3, 7, 14 and 28

NOTES:

- HRIG is not required if more than 7 days has elapsed since first vaccine dose, or more than one day has elapsed since the second vaccine dose 9interference with natural immune response).
- HRIG is not indicated if the exposure occurred more than 12 months previously.
- Given a reliable history of a rabies-prone exposure, irrespective how long ago this occurred, always consider vaccination.
- Most rabies incubation intervals (between exposure and onset of encephalopathy) are less than one year; the longest reliably documented incubation interval is 8 years. Accordingly, there is not considered to be any safe “cut-off” period when vaccine is not considered necessary following a reliable history of exposure.