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BAT!NICK!

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A bat flew into my arm. At dusk. Eight feet from my front door. We'd just walked the dog, my husband and me. And grabbed our son off the skate park. We were returning home. One of my men said something behind me. I turned to see who it was, what was said. That's when I felt it: the gentle, yet firm slap of a small leather glove on my forearm. I looked. At dusk it was difficult to see, but combined with what I felt there was no mistaking what was stuck there ricocheting in the crux of my slightly bent arm. Five times the leathery thing bounced back and forth between my forearm and my bicep.

When it finally freed itself, it wobbled off into the night, drunk and disorderly.

"A bat just flew into my arm," I told my husband and my son.

"No way," my husband said. "You must have imagined it."

"Cool," my son said as he shuffled into the house.

My dog just looked at me. It was almost as if she knew. Perhaps she had seen it, or sensed it, or smelled it. As I looked into her eyes for the answer she cocked her head like she was communicating with me. She had seen it. I could see it in her face. Either that or she wanted her after-walk dog biscuit.

"Maybe it was just a moth," my husband offered.

"An eight-inch wide moth?" I asked. "It would be dead from all that bouncing."

We went inside. I told my daughter. "No way," she said, realizing how ironic it was that I was the victim of this senseless crime. Me: the only one in the family who refuses to swim or kayak or canoe at the lake after dusk because of the bats who skim the surface eating bugs.

I might have rabies, I realized.

I called my family physician's office. "What's the nature of the emergency?" the answering service man asked. He sounded bored.

"A bat just flew into my arm."

"Uh, huh," he said, obviously taking notes. He hardly flinched. "Your name? Your physician's name? Your birthday?" I answered each in order and was

informed I'd be contacted by the on-call physician.

I went to my computer to look up rabies protocol for bat encounters. I was hoping the only protocol was to do nothing unless your arm is hanging by a tendon. No such luck. The Centers for Disease Control (CDC) recommends that rabies vaccination be issued to persons who come into contact with a bat. More surprising was that even people who *MAY* have come into contact with a bat should undergo rabies treatment. Specifically they listed people who wake to find a bat in their room, inebriated people who may have encountered a bat, and children too young to know or report whether a nearby bat may have bitten them. Why the hard-line recommendation? Because of the fact that rabies is a fatal disease. It's just not worth taking a chance.

The phone rang.

It was for me, which was another surprise that evening since my teenage daughter and her friends usually tie up our line from the time my daughter steps in the door to the moment she leaves.

"Uh, it says here a bat flew into your arm," the on-call physician recited. "Is that mammal or metal?"

"Mammal." And I told her my story.

"Are there any obvious bite wounds or scratch marks?" she asked.

"None that I can see," I said.

"Does it hurt?"

"No."

"What did you do after the bat flew into your arm?" she asked.

Oh, that's right: I had washed my arm like five times with soap and water and even poured half a bottle of rubbing alcohol on it. "It didn't sting," I told her.

"Okay, that's good," she said. "You did everything you should have done."

I waited for her to drop the bomb.

"I'd say you're fine," she said.

"You mean I don't need rabies shots?" I asked, incredulous and relieved.

"No, not if there was no detectable mark left behind."

Wait, a little voice said inside my head. Why did the CDC recommend rabies treatment for bat encounters? "Okay, thank you," I said to her and hung up.

I told my mom and my husband. "Good," my husband said, knowing my intense fear of shots. My mom's look said she wasn't too sure.

I let it go for the moment, deliriously happy that I wouldn't need the rabies vaccination.

About a half hour later, after about the fourth time the phone had rung and been

answered, my daughter called out, "Mom, it's for you. It's the doctor."

She wanted to go through the details again. And to see if anything hurt now. Or felt numb.

So far so good, I told her. And she hung up, still convinced she had made the right decision.

That night I dreamt I had rabies.

The next morning I was as batty as my furry little friend.

I looked up the CDC website again and learned that the reason for the stringent guidelines is that bat teeth are razor sharp and tiny, so small that a surface check is unreliable proof that the skin was not pierced since the puncture wound is often no larger than a pinprick. Claw marks could leave the same miniscule cut.

My mom and I found a pinprick that had scabbed. We had to *really* examine my arm in order to find it, but it was there. No mistaking it. At least we were convinced as much.

I called the physician's office. My doctor is one of the most calm, level-headed people I know. He would tell me what to do. Furthermore, I would trust him.

He was vacationing that week.

I spoke with a nurse. She took my incredible story down, asked when my last tetanus booster was administered, and talked to the doctor on duty. She called me back, relayed that the actual date of my tetanus booster was only a few years earlier, and told me what the doctor had told her: "You do not need the rabies treatment."

"Are you sure?" I asked, and I told her again what I had learned at the CDC's website, and after reading a few online medical articles written on the subject.

"I'm sure, but I'll talk to him again," she said. "We'll call if anything changes."

By the time the office closed I was a bat case. I told my mom about my dream. I think my dad was the one who told me in my sleep. "Call your cousin," she said.

"Of course!" I said. "I'll call a friend of mine who practices with my former physician's group where we used to live."

"Or call him," she agreed.

I called. He answered. Again, that was odd since his wife always answers when I call. He's usually at the office or the hospital, or out tending his gardens.

We exchanged quick family updates. He told me his wife, who is one of my good friends and presumably who I had called to speak to, was away with the girls.

"Actually, I called to pick your brain as a physician," I confessed. "I hope you don't mind."

I know what kind of imposition this is really, since my husband is sometimes consulted for legal advice. He doesn't mind helping out, but if it happened too frequently, I think it would become annoying.

“I don’t mind at all,” he said, his voice taking on an instantly professional tone.
“What’s up?”

I told him. And I confessed that a little bit of internet self-diagnosing might have been a bad thing, but I couldn’t help myself. Like a moth to a flame, or a bat to an arm.

He told me mostly what I had read at the CDC site. And he relayed to me how as an intern he met with a patient with a story similar to mine. Not quite as dramatic, naturally, or at least I like to think I have the best bat tale. He was about to release her when he decided to get another, more seasoned opinion. Ultimately she was treated for rabies. That’s when he first learned of the CDC recommendations.

Next he got really quiet. Then he asked me when this had happened again. I told him it was the previous night.

He paused. Considered. I always knew him to be a thoughtful man. Finally he said, “If it were my wife or one of my daughters, I would be pushing for the rabies treatment.”

“Okay,” I managed, a quiver growing in my voice.

“And if you’re considering whether to go now to the ER, this late at night (it was after nine) or tomorrow morning (he knew I was a morning person), I’d go now.”

Sensing my fear, he quickly added, “This way you’ll at least have a tie breaker answer from a physician.” I think he was counting my family physician’s entire staff as one vote.

I thanked him, told my mom, and also my aunt who had just flown in from Texas that afternoon (she, thankfully, missed my arm, instead landing on the tarmac). My mom grabbed my car keys and her purse, ready to get me treated. I called the insurance company to get pre-approval to go to the ER.

“A bat?” the nurse on the other end of the insurance line asked. “Honey, get yourself to that ER now. You’re approved, I’ll take care of everything. You have to hurry. The first twenty-four-hours, that’s when you need to get in.”

Now I was frightened. Overwhelmed.

“Wait,” she said. “I’m a gardener. How did this happen again?” I told her the story. “Incredible. Okay get yourself in there. And just in case you consider it in the next month, do NOT skip any of the shots.”

I think she sensed my fear. I know she did.

At the ER I was a celebrity of sorts, or at least the most entertaining story that had walked in that night. In triage I told my story three times to three separate people, in processing I told it yet again, and once I was assigned to a bed I relayed the story to nurses and to the attending resident.

No one could believe it.

No one had heard of such a thing.

No one knew of the CDC recommendations.

Now I felt real fear. “We should have driven the hour north to the hospital where he interned,” I told my mom. “Maybe it’s not too late to go now.” That hospital

adheres strictly to the CDC guidelines. It's protocol. Routine. Ordinary.

It wasn't that the hospital I had gone to wasn't familiar with rabies treatment, it was just that they were unaware of the nature of bat bites and the unreliability of visually checking the surface of the skin for cuts.

That's when he appeared: the wise, senior attending physician. Dressed in white. He could recite the CDC recommendations verbatim.

"You understand," he calmly stated, "that we must weigh the risks of treatment versus the risks if no treatment is administered. Rabies is fatal if left untreated. And by the time it's detected, it's too late to cure it. Do you agree that you should undergo treatment?"

"Absolutely," I heard myself say with more confidence than I thought I felt. "I have too much to lose if I don't get treated."

He nodded and ordered the treatment.

About a half hour later two nurses bounced in. Six syringes skittered across a metal tray. "We feel so sorry for you," one of them said. I must have gone pale when I looked up at the noise and spied all those needles.

"Have you ever had to administer rabies shots before?" I asked, hoping this was more routine than everyone let on.

"She has once; this is my first time," one of the nurses answered.

On the way down to the ER with the serum, they had discussed ways to make the six shots less horrible. Their solution: double team me. They would count down and stick me in each shoulder at the same time. I wondered if they'd trained in some sort of prisoner of war camp. I knew I was letting myself get overly melodramatic, but by now, at the sight of all those shots, I was beginning to feel queasy...and a bit sorry for myself.

So that's what they did for four of the shots. Turned out I needed one of them in my backside, too. So while one nurse finished with a third shot to my left shoulder, the other hovered, waiting for me to be free to lower my drawers just enough to plunge that last needle into my flesh.

I have to say all in all it wasn't nearly as painful as the anticipation. Besides, I finally had a decision I could live with. And by live, I mean I knew I would, ultimately. Or at least it wasn't going to be "rabies" that would be listed on my death certificate when I'm finally finished with this ride.

I returned four more times: days three, seven, fourteen, and twenty-eight. One shot each time. In the shoulder. I had the usual side effects, I guess: feverish many of the days, and I ran a temperature of nearly 102 degrees for about twenty-four hours, naturally while on vacation with my family. I was also queasy off and on, experienced sore shot areas, painful joint swelling, occasional dizziness (my son asserts nothing was out of the ordinary those days) and an aching abdomen, but nothing nearly as horrible as the tales of the old days when stomach shots were the norm.

I am now vaccinated against rabies for life. At least that is the common belief of the medical community. If I encounter another possible rabid animal, a blood test will reveal my antibody level. If it's low, one simple booster should do the trick.

So if a bat should appear in your house, take my advice: duck. That's rather sage advice, in my opinion, since ducks are not known carriers of rabies.
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An award winning screenwriter, **Dana Biscotti Myskowski** studies in the low residency MFA in Creative Writing program at Goddard College where she is penning her latest screenplay "Topple," a thriller. She teaches writing and scriptwriting at the University of New Hampshire, having also earned her Professional Certificate in Screenwriting online via UCLA. Dana's writings have appeared in *The Pitkin Review*, *The Berkshire Review*, *Hollywood Scriptwriter*, *The Alpha Chi Recorder*, *The Dabbling Mum*, *Absolute Write*, *Once Upon a World*, and more. She has scripted a planetarium show, numerous corporate videos, public service announcements, an artist's video, and a plethora of short and feature length spec scripts. She has written for radio, newspapers, and newsletters, and has edited a college alumni magazine. Whenever the occasion presents itself she also performs voice-over work, most recently on a corporate video project for a Fortune 100 company. Dana can be found at: www.greenchairpictures.com and <http://greenchairpictures.blogspot.com>.

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