

# Standard History sheet for Analysis and Record of epidemiological

**Classification** ( Patient \_\_\_\_\_ )

## PART- 1 (CONCLUSION)

Species :- P. Vivax / P. falciparum / P. malariae / Mixed

\_\_\_\_\_

Epidemiological classification. Induced/ Imported/Relapes/Indigenous

\_\_\_\_\_

Remedial measures taken-

\_\_\_\_\_

Under which procedure the case detected

\_\_\_\_\_

Name and the Signature of the Officer initially investigated dated

\_\_\_\_\_

Verified/ Analyzed by dated

## PART-11

### 1. Location of the case

1.1 State- \_\_\_\_\_ District \_\_\_\_\_ Block/PHC

1.2 Tehsil/Police Station: \_\_\_\_\_

1.3 Village/Town \_\_\_\_\_ Serial No. \_\_\_\_\_ Sprayed/Unsprayed/Dated of Spray \_\_\_\_\_

1.4 BHW (if under active)

1.5 Hosp/Disp/PHC, other agency if under passive

### 2 Basic Information.

2.1 Name, Age, Sex

\_\_\_\_\_

2.2 Approx. date and duration of onset of (present) fever

\_\_\_\_\_

2.3 Date and number of blood smear collected

\_\_\_\_\_

2.4 Date of examination of blood smear

\_\_\_\_\_

\_\_\_\_\_

2.5 Date of reporting

\_\_\_\_\_

2.6 Date of Investigation

\_\_\_\_\_

### 3 Case History

History of admission to hospital and blood transfusion if so, date of transfusion.

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3.1 If there is a history of blood transfusion and correlation could be established between transfusion and attack, the case is to be classified as induced if not see 3.2 to 3.4.

3.2 Present illness

18.08.09

3.2.1 Date of onset and duration of fever.

3.2.2 Nature of fever (persistent, intermittent, etc.)

\_\_\_\_\_

3.3 Past illness \_\_\_\_\_

3.3.1 History of previous illness (fever) \_\_\_\_\_

3.3.2 Number of attacks and interval. \_\_\_\_\_

3.3.3 Duration of each attack. \_\_\_\_\_

3.3.4 Nature of fever (fill the chart attached) \_\_\_\_\_

3.3.5 History of previous blood examination if any through active/or passive agencies \_\_\_\_\_

3.4. Physical examination \_\_\_\_\_

3.4.1 Enlargement of Spleen if any and the size (measurement appear hockett's method) \_\_\_\_\_

3.4.2 Any other relevant information. \_\_\_\_\_

If there is a history of previous illness pointing to the possible attacks of malaria but prior to the last transfusion seasons and there were periodical bouts of fever. the present illness could because to a lapse enlargement of spleen will be supporting evidence.

**IF NOT RELAPSE see ITEM 4 BELOW**

4 History of movement

4.1 History movement inside/outside unit area.

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4.1.1 Ten days before collection of blood smear.

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4.1.2 Ten days before onset of fever (follow up backward for 3 weeks also fill in chart II)

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4.1.3 In case of local inhabitant.

4.1.3.1 Date of Exit \_\_\_\_\_

4.1.3.2 Date of Entry \_\_\_\_\_

4.1.3.3 In case of new comer date of entry: \_\_\_\_\_

In movement outside the unit area and area and night halts could be established during the period indicated under 4.1 above or the date of entry of the new comer to the area point out to a possible infection outside the unit area the same may be classified as imported. Absence of indigenous cases of recent origin in the same locality will be a supporting evidence.

**IF NOT IMPORTED PARA 5 BELOW**

5. 1. All Malaria cases are to be treated initially as of indigenous origin unless proved otherwise.
5. 2. All cases which cannot be classified under induced, Relapse or imported are to be treated as of Indigenous origin.
5. 3. All cases detected in transmission season and proved to have contacted the infection in the same unit area during the previous transmission season are to be treated as of indigenous origin.
5. 4. For all practical purpose introduced case (if subsequently) proved is to be classified as of indigenous origin (the classification phase prior to entry in to the maintenance phase).

**OTHER INVESTIGATION AND REMEDIAL MEASURES**

6. 1. Radial treatment of the positive cases, date of commencement and number of days treatment given by these Inspector/ Malaria Inspector/ Assistant Unit Officer treated for 12 Month.

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6. 2. Result of the monthly follow up of the cases treated for 12 month.

6. 3. If contact smears taken and result.

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6. 4. Total population of the village immediately vicinity or up to hundred houses.

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### **MASS SURVEY**

6.4.2 Number of smears taken \_\_\_\_\_

6.4.3 Number of mass survey \_\_\_\_\_

6.4.4 Action taken if any found positive.

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### **6.5 FOCAL SPRAY**

6.5.1 Number of house spray

6.5.2 Time lag between detection of cases and insecticides application.

6.5.3 Under whose supervision insecticides were applied.

### **6.6. IF CASE CLASSIFIED AS RELAPSE.**

6.6.1. If previous records available.

6.6.2. Date of completion of radical treatment and follow up.

6.6.3. If imported Unit/State notified date of notification.