

Woman's full name: _____

ID_# _____

.....

ID# _____

**RAPID ASSESSMENT OF MALARIA DURING PREGNANCY
TOOL 3: HOSPITAL SURVEILLANCE OF MALARIA DISEASE
DATA ABSTRACTION FORM**

**NOTE: Abstract data only from forms of women who are
of reproductive age.**

Abstracter name _____
Today's date ____/____/____ Day Month Year
Interviewer number _____
Patient record ID# (or patient hospital file #): _____
Type of facility _____

PATIENT DETAILS

1. Age of patient (years):[]
2. Last menstrual period
Not applicable.....[]
Date of last menstrual period ____ ____ / ____ ____ / ____ ____
if *UNKNOWN*, mark this box[]
3. Pregnant []
YES = 1, NO = 2, UNKNOWN = 3
 - 3a. If *YES*, what is the gestational age (weeks)...[]
 - 3b. If *NO*, has she ever been pregnant?.....[]
YES = 1, NO = 2, UNKNOWN = 3
 - 3c. If *YES*, what is the date of the last delivery ... ____ ____ / ____ ____ / ____ ____
If *UNKNOWN*, mark this box[]
4. Patient's village/town/district _____

ID number: _____ -- _____ 1

HISTORY OF CURRENT ILLNESS AND TREATMENT

5. How long has the patient been ill?.....[]
days]
6. Prior to admission, did the patient have
YES = 1, NO = 2, UNKNOWN = 3
a. Convulsions[]
b. Decreased consciousness[]
c. Coma.....[]
7. Did patient receive any antimalarial treatment in the 7 days
before admission.....[]
YES = 1, NO = 2, UNKNOWN = 3

If YES, mark all that apply

- Chloroquine[]
Sulfadoxine-Pyrimethamine (SP)[]
Quinine[]
Artesunate[]
Other[]

(specify and explain): _____

ADMISSION DATA

8. Admitting diagnosis: *(mark all that apply)*
malaria = 1.....[]
severe malaria = 2[]
cerebral malaria = 3.....[]
anemia = 4[]
other = 5 *(specify)*:

9. Any manifestations of severe or cerebral malaria *(mark all that apply)*
Prostration[]
Respiratory distress (acidotic breathing)[]
Multiple convulsions[]
Circulatory collapse (shock).....[]
Pulmonary oedema (radiological)[]
Abnormal bleeding[]
Jaundice[]
Haemoglobinuria[]
Severe anemia[]
Impaired consciousness[]
Hypoglycemia.....[]
Decreased consciousness.....[]
Coma.....[]

LABORATORY RESULTS (provide if available)

10. Malaria blood film done[]
YES = 1, NO = 2

- 10a. If YES, result[]
 Positive = 1
 Negative = 2
 Result available, examined, but undetermined = 9
- 10b. If positive, parasite count: _____
- 10c. If positive, species (*mark all that apply*).....[]
 Plasmodium falciparum = 1.....[]
 P. vivax = 2.....[]
 P. malariae = 3.....[]
 P. ovale = 4.....[]
 Not determined = 5[]
11. Hemoglobin/Hematocrit (lowest)..... _____
12. Glucose (lowest) _____
13. Creatinine (highest) _____
14. Bilirubin (highest) _____
15. Plasma bicarbonate _____
16. Mean cell volume _____
17. Lumbar puncture
 Glucose _____
 Protein _____
 Cell Count
 RBC: _____ WBC: _____ WBC differential: _____
18. Other[]
 (*specify*): _____

TREATMENT

19. Antimalarial medications given (*mark all that apply*)
 Chloroquine.....[]
 Sulfadoxine-pyrimethamine (SP)[]
 Quinine.....[]
 Artesunate[]
 Primaquine.....[]
 Proguanil.....[]
 Artemisinin-containing combination therapy (ACT)[]
 If ACT, specify _____
 Other[]
 (*specify and explain*): _____
20. Other therapy given (*mark all that apply*)
 Anticonvulsant[]
 Transfusion of whole blood / packed RBC[]
 Glucose.....[]
 Furosemide (or other diuretic)[]

Oxygen[]
 Vitamin K[]
 Other.....[]
 (specify): _____

DISCHARGE INFORMATION

21. Woman's outcome.....[]
 Full recovery = 1
 Recovered with some residual disability = 2
 Died = 3
 Unknown = 9

22. Pregnancy outcome (for pregnant women only):
 Did woman deliver[]
 YES = 1, NO = 2, UNKNOWN = 3

22a. If YES, outcome.....[]
 alive = 1
 fetal loss = 2

22b. If NO, outcome[]
 no labor = 1
 false labor = 2

23. Discharge diagnosis: (mark all that apply)
 uncomplicated malaria = 1.....[]
 severe malaria = 2[]
 anemia = 3[]
 other = 4[]
 (specify): _____

24. Additional comments:

25. QUALITY CONTROL

Site supervisor should check all questionnaires for completeness every day at the end of all interviews. Data entry clerks should initial at the end of every entry.

	Person	Name/Signature	Date
25a	Site Supervisor		
25b	Data Entry Clerk 1		
25c	Data Entry Clerk 2		
25d	Assessment Coordinator		