<u>APPENDIX A</u> Proposed Amendments to form CDC 54.1 (Malaria Case Surveillance Report)

***Changes are in **Bold** font

Current Form (Field		Proposed Form (Field	
Current Form (Field Names)	Current Value Set	Names)	Proposed Value Set
DASH No.		CSID No.	
County		County	
County		County Age/ yrs. mos. wks. days	
Age/ (yrs)(mos)		(circle units)	
Lab results	Smear positive, smear negative, No smear taken	Positive lab test result (check all that apply)	Smear, PCR, RDT, No test done/unknown
Species (check all that apply) NEW FIELD	Vivax, Falciparum, Malariae, Ovale, Not determined	Species (check all that apply) Parasitemia (%)	Vivax, Falciparum, Malariae, Ovale, Not determined, Other (specify)
Patient admitted to hospital	Yes, No	Patient admitted to hospital	Yes, No, Unknown
Specimen being sent to CDC		Specimen being sent to CDC	Yes, No, Unknown
Has patient traveled or lived outside the US during the past 4 year?	Yes, No	Has patient traveled or lived outside the US during the past 2 year?	Yes, No
Duration of stay in foreign country (days)		Duration in country/ yrs. mos. wks. days (circle units)	
Did patient reside in US prior to most recent travel?	Yes, for ≥12 months, Yes, for <12 months, No (specify country), Unknown	Did patient reside in US prior to most recent travel?	Yes, No (specify country), Unknown
Principal reason for travel from/to US for most recent trip Was malaria chemoprophylaxis taken	Tourism, Military, Business, Peace Corps, Visiting friends/relatives, Airline/ship crew, Missionary or dependent, Refugee/immigrant, Student/teacher, Other Yes, No	Principal reason for travel from/to US for most recent trip Was malaria chemoprophylaxis taken	Tourism, Military, Business, Peace Corps, Visiting friends/relatives, Airline/ship crew, Missionary or dependent, Refugee/immigrant, Student/teacher, Other, Unknown Yes, No, Unknown

lf yes, which drugs were taken	Chloroquine, Mefloquine, Doxycycline, Primaquine, Malarone, Other	If yes, which drugs were taken	Chloroquine, Mefloquine, Doxycycline, Primaquine, Atovaquone/proguanil , Other, Unknown
Were all pills taken as prescribed	Yes missed no doses, No missed one to a few doses, No missed more than a few but <half doses,="" no<br="" of="" the="">missed doses but not sure how many, Don't know</half>	Were all pills taken as prescribed	Yes missed no doses, No missed doses, Unknown
If doses were missed, what was the reason	Forgot, Didn't think needed, Had a side affect (specify), Was advised by others to stop, Prematurely stopped taking once home, Other (specify)	If doses were missed, what was the reason	Forgot, Didn't think needed, Had a side affect (specify), Was advised by others to stop, Prematurely stopped taking once home, Other (specify), Unknown
History of malaria in last 12 months (prior to this report)	Yes, No	History of malaria in last 12 months (prior to this report)	Yes, No, Unknown
If yes, species (check all that apply)	Vivax, Falciparum, Malariae, Ovale, Not determined	If yes, species (check all that apply)	Vivax, Falciparum, Malariae, Ovale, Not determined, Other (specify)
Blood transfusion/organ transplant within last 12 months	Yes, No	Blood transfusion/organ transplant within last 12 months	Yes, No, Unknown
Clinical Complications	Cerebral malaria, Renal Failure, ARDS, Anemia (Hb<11, Hct<33), None, Other	Clinical Complications	Cerebral malaria, Renal Failure, ARDS, Severe anemia (Hb<7) , None, Other
Was illness fatal	Yes, No	Was illness fatal	Yes, No, Unknown
Therapy for this attack (check all that apply)	Chloroquine, Tetracycline/Doxycycli ne, Mefloquine, Exchange transfusion, Unknown, Primaquine, Quinine/quinidine, Pyrimethamine- sulfadoxine, Malarone, Other (specify)	Therapy for this attack (check all that apply)	Chloroquine, Tetracycline, Doxycycline, Mefloquine, Exchange transfusion, Unknown, Primaquine, Quinine, Quinidine, Clindamyacin, Atovaquone/proguanil, Artesunate, Other (specify)
Date		Date Submitted	

Date Submitted

Date

Justification

DASH changed to CSID (CDC Specimen Identifier) to conform to the new changes in laboratory specimen identification system in place

Field placement has been moved underneath "State/territory reporting this case"

Change to account for various reporting age units

Change to capture PCR and RDT positive test results

Change to capture other plasmodium species Added to capture parasetemia data if available Added unknown as a possible value to collect more accurate data

Added unknown as a possible value to collect more accurate data

Change to 2 years sufficiently captures travel history

Reworded Change to account for various reporting duration/time units

Simplified value set to capture the same data; Added unknown as a possible value to collect accurate data

Added unknown as a possible value to collect more accurate data

Added unknown as a possible value to collect more accurate data

Used chemical name of Malarone; Added unknown as a possible value to collect more accurate data

Simplified value set to capture the same data

Added unknown as a possible value to collect more accurate data

Added unknown as a possible value to collect more accurate data

Change to capture other plasmodium species

Added unknown as a possible value to collect more accurate data

Changed Anemia value to better identify associated clinical complications Added unknown as a possible value to collect more accurate data

Used chemical name of Malarone; Updated value set to capture drugs available for treatment Change to clarify date description