

# Performa of sample collection

Date: _____	Month: _____	Year : _____		
	Subject 1	Subject 2	Subject 3	Subject 4
<b>Personal</b>				
Field visit (s)				
Performa No.				
<b>Sample I.D</b>				
<b>Slide collection</b>				
Origin of subject				
Gender				
Age				
Language				
Education				
Occupation				
<b>Contact</b>				
<b>Symptoms</b>				
Shivering				
Temperature				
Coma				
Convulsion				
<b>Specie Identification (Through Microscopy)</b>				
<i>P. vivax</i>				
<i>P. falciparum</i>				
<i>P. malariae</i>				
<i>P. ovale</i>				
Mixed infection				