



¹ Malaria can be a rapidly fatal disease, particularly when due to *Plasmodium falciparum*, and less commonly *Plasmodium vivax* and *Plasmodium knowlesi*, and testing must be performed on a STAT basis. If testing is not available at the local laboratory, then arrangements must be made with another nearby laboratory that can provide immediate testing. A single negative test does not rule-out malaria. Consider repeat testing every 12 to 24 hours for a total of 3 evaluations if clinically indicated. Other laboratory tests (ie, complete blood count with differential, electrolyte panel, blood glucose, bilirubin, urinalysis, blood cultures) may be indicated to assess the severity of malaria and evaluate other potential causes of the patient's illness.

² Rapid screening tests such as lateral flow immunochromatographic assays generally provide sensitive detection of high levels of *P falciparum* and *P vivax* infection (ie, 2000 parasites/mcL), but lack sufficient sensitivity for detecting low levels of parasitemia (ie, 200 parasites/mcL) and other *Plasmodium* species.