**Diagnostic and Management Algorithm of Malaria due to Non-Plasmodium Falciparum Species**

**Obtain thick and thin blood smears**

Yes

Is the blood smear positive?

No

Repeat blood smears X 3 Q12 or Q24 hours

- If negative, consider different diagnosis
- If positive, follow algorithm

**Evaluate severity of the disease**

- Impaired Consciousness/coma
- Hemoglobin <7 (consider hemoconcentration)
- Renal failure
- Pulmonary edema
- Acute respiratory distress syndrome
- Hypotension
- Disseminated intravascular coagulation
- Spontaneous bleeding
- Acidosis (severe disease with HCO3 <15)
- Hemoglobinuria
- Jaundice
- Repeated generalized convulsions
- Parasitemia ≥5%

If patient has a positive blood smear or high suspicious for malaria PLUS ≥1 of these sx = SEVERE MALARIA

**Severe Malaria and/or patient is unable to take oral medication**

Intravenous Quinidine PLUS doxycycline or clindamycin

*If Quinidine unavailable, contact CDC stat for IV artesunate

Admit to the ICU

**Uncomplicated Malaria**

Determine plasmodium species

**Non-falciparum species**

**Plasmodium falciparum or not yet identified species**

Please, see algorithm for plasmodium falciparum

**P. malariae**

Chloroquine
Or Hydroxycloroquine

**P. ovale or P. vivax**

(acquired outside Papua New Guinea or Indonesia)

Chloroquine
Or Hydroxycloroquine
PLUS Primaquine

*Primaquine if not G6PD deficient and patient is not pregnant

**P. vivax (acquired in Papua New Guinea or Indonesia)**

Quinine PLUS doxycycline
PLUS Primaquine

*Primaquine if not G6PD deficient and patient is not pregnant

**P. knowlesi**

Chloroquine
Or Hydroxycloroquine

- Repeat blood smears Q 8 hours until prove parasitic clearance in severe disease and Q 12 hours in mild disease
- Check CBC, chem, LFTs, LDH every 6 hours for first 12 hours or until clinically stable