



# MALARIA SURVEY CARD

UNITED STATES • 1918

TREASURY DEPARTMENT,  
United States Public Health Service.  
OFFICIAL BUSINESS.

(Post office) ..... (County) ..... (State) .....  
(Date) .....

The number of new cases of malarial fevers occurring in my practice during the month of  
January, 1918, was ..... (give number.)

The diagnoses were confirmed by the use of the microscope in..... cases;  
of these cases. The types of infection thus found were: Tertian, ..... cases; Quartan,  
..... cases; Aestivo-summer, ..... cases.

Note.—Any additional information bearing on malarial fevers, their types, the kind of mosquitoes in the locality,  
the prevalence of these mosquitoes, the measures, chronic malaria, proportion of children affected,  
and heretofore failures, should be stated under remarks.

REMARKS: .....

....., M. D.

7-7044

**MALARIA PREVALENCE.**  
WASHINGTON, D. C.


DEAR DOCTOR:  
The United States Public Health Service has undertaken to collect information of the prevalence and geographic distribution of malarial fevers in the United States. To obtain this information the attached postal card, which requires no stamp, has been prepared for your reply.

Your report will be of value whether you have had cases or not. In every instance, please fill in your post-office address, county, and State, with your signature, as all data thus furnished will be tabulated and used in a report on the prevalence and geographic distribution of malarial fevers in your State.

Your cooperation will be appreciated.  
Respectfully,  
RUFERT BLUE,  
Surgeon General, United States Public Health Service.

7-7044

TREASURY DEPARTMENT  
United States Public Health Service.  
OFFICIAL BUSINESS.



**UNITED STATES PUBLIC HEALTH SERVICE,**  
U. S. Marine Hospital,  
New Orleans, La.

Prevalence and geographic distribution of malaria.  
7-7044

Description: official use postal card with response card attached and both marked with penalty indicium; outgoing card with explanation of Department of Health survey of malaria prevalence and distribution; return card with space for local health official to report incidence of malaria in area

Price: E



PC-1

Checklist: \_

**MALARIA SURVEY CARD**

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