## Report Form WHO Test for Insecticide-Resistance in Mosquito Larvae

Date:	in / BHC / othe	<b>.</b> .				Species	D			
1. Investigator:						0				I
Country:     3. Provin     5. History of insecticide treatment (including agriculture):	treatment (incl	uding ag	3. Province: _riculture):				4. Locality:			
o. History of Hisecurciae of	rreaument (mici	- Guinn				4				1 1
6. Condition of larvae: instar	nstar viations: "M"	moribun		reared /	reared / collected / other	* <u>-</u>				I
Tests	Replicate 1	te 1	Replicate 2	e 2	Replicate 3	3	Replicate 4	e 4	•	
Date of Test									(for comparable	able
Temperature during Test									rest only)	)
Insecticide Concentration (p.p.b.)	M & D Total	Mort. (%)	M & D Total	Mort. (%)	M & D Total	Mort. (%)	M & D Total	Mort. (%)	M & D Total	Mort. (%) corr.²
Control 1										
<sup>1</sup> Cross out what does not apply		t by applyii	ng Abbott's formul	a if contro	<sup>2</sup> Correct by applying Abbott's formula if control mortality is between 5% and 20% (see instructions)	en 5% an	d 20% (see instruc	tions)		
Remarks:										1
Signature of Investigator:	1									

One copy of this form to be sent on completion to: World Health Organization, Vector Control Unit, Division of Environmental Health, Geneva, Switzerland. A second copy to be sent on completion to the appropriate WHO Regional Office.

