

**UVM PLANT DIAGNOSTIC CLINIC SPECIMEN FORM**

**PLANT & WEED IDENTIFICATION ONLY**

(See second sheet for instructions on how to collect and ship specimens)

GROWER NAME: \_\_\_\_\_  
STREET: \_\_\_\_\_  
CITY: \_\_\_\_\_  
STATE: \_\_\_\_\_  
ZIP CODE: \_\_\_\_\_  
COUNTY: \_\_\_\_\_  
TELEPHONE #: \_\_\_\_\_

DATE SENT: \_\_\_\_\_  
SUBMITTED BY: \_\_\_\_\_  
CROP OR PLANT: \_\_\_\_\_  
VARIETY: \_\_\_\_\_

**CHECK ONE:**     Commercial Grower  
                           Home Gardener

**OFFICE USE ONLY**

Ref #: \_\_\_\_\_  
Date Rcd: \_\_\_\_\_  
\$15 Service Fee Paid:  yes  no

**PROBLEM DESCRIPTION: Check all that apply**

Plant Part Affected

- roots
- stem or branch
- leaves
- flower
- fruit/seed
- other \_\_\_\_\_

General Appearance

- wilted
- discolored
- stunted
- abnormal growth
- leaf spot/blight
- leaf mottling
- other \_\_\_\_\_

Distribution

- throughout field
- scattered plants
- in spots
- certain variety
- in low areas
- upland areas
- other \_\_\_\_\_

Location

- field
- garden
- landscape
- lawn
- nursery
- greenhouse
- orchard
- forest
- other \_\_\_\_\_

**Briefly state the problem and ask the specific question you want answered:**

**GROWTH CONDITIONS:**

Size of planting

# acres: \_\_\_\_\_  
# plants: \_\_\_\_\_  
row feet: \_\_\_\_\_  
% affected plants: \_\_\_\_\_

Light

- full sun
- partial shade
- full shade

Air Circulation

- good
- moderate
- poor

Weather preceding symptoms

- cool, dry
- cool, wet
- frosted, or nearly
- hot, dry
- hot, wet

Last soil test if known

pH: \_\_\_\_\_  
aluminum: \_\_\_\_\_  
phosphate: \_\_\_\_\_  
reserve P: \_\_\_\_\_  
potash: \_\_\_\_\_  
magnesium: \_\_\_\_\_

Soil type

- sandy
- clay
- loam
- subsoil
- fill

Drainage

- good
- moderate
- poor

**CROP INFORMATION:**

Crop last year: \_\_\_\_\_  
Crop this year: \_\_\_\_\_  
When was the problem first noticed? \_\_\_\_\_

**SHRUBS AND TREES:**

Approximate age \_\_\_\_\_ yrs, height \_\_\_\_\_ ft  
Distance to nearest structure \_\_\_\_\_ ft  
Exposure \_\_\_\_\_ N, \_\_\_\_\_ S, \_\_\_\_\_ E, \_\_\_\_\_ W

**CHEMICALS APPLIED (Dates and Rates):**

	<u>Growing season</u>	<u>Previous year</u>
Fertilizer or manure:	_____	_____
Fungicide:	_____	_____
Herbicide:	_____	_____

## **INSTRUCTIONS FOR COLLECTING, PREPARING, AND MAILING SPECIMENS**

### **For Plant Disease Diagnosis:**

1. GIVE COMPLETE INFORMATION on **UVM PLANT DIAGNOSTIC CLINIC SPECIMEN FORM**.
2. Enclose \$15.00 fee with check made out to University of Vermont.
3. SEND GENEROUS AMOUNTS of material; ENCLOSE IN PLASTIC BAGS; NEVER ADD WATER to any sample. NEVER mix several host species in a single bag; AVOID LOOSE SOIL.
4. Send specimens IMMEDIATELY after collecting. If hold-over periods are encountered, keep the specimen in a refrigerator. Mail packages to arrive on weekdays (Monday through Friday) rather than during weekends or holidays.
5. Protect specimens from being crushed in the mail by adding newspaper or some cushioning material, inside of a rigid box.
6. If general decline or dying of plants is observed, send WHOLE PLANTS showing EARLY SYMPTOMS, with roots. DIG UP CAREFULLY. Send 5-6 plants. DEAD PLANTS ARE USELESS for examination.
7. When not possible to send whole plants, always send generous samples of aboveground portions showing all stages of symptoms. In the case of large ornamentals, shrubbery, evergreens, and small trees, please include a handful of FEEDER ROOTS.
8. When localized infections such as cankers, leaf spots, and rots are involved, send specimens representing early and moderate stages of disease. For cankers, include healthy portions from above and below disease area.
9. When sending greenhouse crops, include a sample of the propagation mix in a separate plastic bag.

### **For Plant or Weed Identification:**

1. Enclose \$15.00 fee with check made out to University of Vermont.
2. SEND GENEROUS AMOUNTS of material; ENCLOSE IN PLASTIC BAGS; NEVER ADD WATER to any sample. NEVER mix several host species in a single bag; AVOID LOOSE SOIL.
3. Include flowers and fruits as well as leaves.
4. Send specimens IMMEDIATELY after collecting. If hold-over periods are encountered, keep the specimen in a refrigerator. Mail packages to arrive on weekdays (Monday through Friday) rather than during weekends or holidays.

### **For Plant Insect Identification:**

1. GIVE COMPLETE INFORMATION on **UVM PLANT DIAGNOSTIC CLINIC SPECIMEN FORM**.
2. Enclose \$15.00 fee with check made out to University of Vermont.
3. Send specimens IMMEDIATELY after collecting. If hold-over periods are encountered, keep the specimen in a refrigerator. Mail packages to arrive on weekdays (Monday through Friday) rather than during weekends or holidays.
4. Insect specimens can be placed dry in a small box or glass jar. Cushion the specimen so that it won't be damaged. Do not add water.
5. PLEASE only Plant Insects. No household, structural, or animal insects can be identified.

#### **SEND TO:**

Plant Diagnostic Clinic  
235 Hills Building  
University of Vermont  
Burlington, VT 05405

*Questions? Contact Ann Hazelrigg at [ann.hazelrigg@uvm.edu](mailto:ann.hazelrigg@uvm.edu) or (802) 656-0493*