

**UMass Plant Diagnostic Lab: VEGETABLE and FLORICULTURE FORM\***

Providing analysis, identification, and ecologically sound management strategies for diseases, insects, weeds, and nematodes found in landscapes, turf, nurseries, greenhouses, farms, and the urban forest.



UMass Plant Diagnostic Lab –Lab 3, French Hall, 230 Stockbridge Road – Amherst, MA 01003-9316

Telephone: (413) 545-3208 - Fax: (413) 545-4385 - [ag.umass.edu/diagnostics](http://ag.umass.edu/diagnostics)

Send specimen to above address. Please include check payable to *University of Massachusetts*.

**⇒USE THIS FORM FOR:**  Disease, Nematode, or Water Analysis (\$50)  Disease Analysis + pH and Soluble Salts Test (\$60)

Host Plant

Cultivar

Date Collected

Approximate Age / Planting Date / Length of Time in Present Medium

When Did Symptoms Occur?

% of Crop Affected

Size of Planting

Briefly Describe the Problem

Describe Pesticides / Rates Used:

When?

Describe Site Conditions and Relevant Cultural Practices

Circle all that apply:

| Location   | Part(s) Affected | Symptoms         | Symptom Distribution | Soil Type    | Soil Moisture | Irrigation |
|------------|------------------|------------------|----------------------|--------------|---------------|------------|
| Container  | Roots            | Wilted           | Scattered            | Soiless      | Wet           | Overhead   |
| Field      | Crown            | Yellowed         | Localized            | Soiless/Soil | Moderate      | Drip       |
| Greenhouse | Stem             | Stunted          | Borders              | Soil Only    | Dry           | Flood      |
| Nursery    | Leaves           | Leaf Spot/Blight | Edges                | Sandy        | Very Dry      | None       |
| Hydroponic | Flower           | Fruit Blight     | All or Nearly All    | Clay         |               | Other      |
| Other      | Fruit            | Other            |                      | Loam         |               |            |

Contact

Firm

Address

Town

State

Zip

Phone

Fax

E-mail

**THE FOLLOWING SECTIONS WILL BE COMPLETED BY DIAGNOSTIC LAB:**

Lab Number

Date Received

Date Answered

Payment

Ver. 2015 GD

\* **NOTE** – Fruit, turf, and tree/shrub samples require alternate submission forms. Visit [ag.umass.edu/diagnostics](http://ag.umass.edu/diagnostics) for copies.