

PLANT DISEASE & INSECT DIAGNOSTIC LABORATORY

Oklahoma State University
127 Noble Research Center
Stillwater, OK 74078-3033
405-744-9961

County: _____ Agent: _____ County sample no.: _____

Person requesting diagnosis: _____ Phone: _____

Address: _____

E-mail (if avail.): _____

Name of plant (crop) and variety: _____

Date collected: _____ Date symptoms first appeared: _____

Planting date or age of plant: _____ Acres or number of plants affected: _____

Crop 1 year ago: _____ Crop 2 years ago: _____

Plant part affected

- roots
- stems
- leaves/needles
- twigs/branches
- trunk
- buds
- fruit
- flowers

Symptoms

- spot
- mottle
- distortion
- yellowing
- stunted
- wilt
- canker
- shot hole
- dieback
- root rot
- stem rot
- burn/scorch
- galls/swelling
- fruit rot
- other

Disease distribution

- single plant
- scattered plants
- group(s) of plants
- entire planting
- low, wet area
- high, dry area
- other

Type of planting

- garden
- greenhouse
- house plant
- orchard
- field
- home yard
- nursery
- golf course

Degree of injury: light moderate severe

Weather conditions prior to symptom development: clear cloudy rainy windy

heavy dews drought adequate moisture excess moisture

Soil type: sandy loam clay potting mix **Soil drainage:** good moderate poor

Chemicals applied to this crop: (include name, rate and date of application)

fertilizer _____ herbicides _____

fungicides _____ insecticides _____

Additional information: _____

For Lab Use Only

Lab no. (PDIS): _____ **Date received:** _____

Disease: _____ **Casual agent:** _____

Diagnosis and control: _____

Date of reply: _____ **By:** _____

Charge () No Charge ()

PDIDL Diagnostician