

PLANT SPECIMEN SUBMISSION FORM

99-941 Halawa Valley Street, Aiea, HI 96701
(808) 391-7159



Please submit symptomatic plant specimens that represents symptoms observed on site (if the sample is insufficient for diagnosis, you will be asked to submit a new sample).

If you have any questions, please call (808) 391-7159 before submitting your sample.

COLLECTION:

1. **DO NOT** send dry or dead material.
2. If possible, collect **several samples** showing various stages of symptom expression. When the whole plant can't be collected, select sample from the margin of the diseased area. Include a healthy plant if possible.
3. Send a representative sample from **all symptomatic parts** of the plant.
 - a. If a root problem is suspected, dig plants out of the soil (**DO NOT PULL**). **DO NOT** wash roots. Gently shake excess soil from roots.
 - b. A soil sample can also be taken for detection of nematode pathogens
 - i. Try to collect 5-10 soil samples near the roots of the plant and mix in a bucket before double bagging in a zip-lock bag
 - ii. Samples can be taken in a zig-zag pattern across a plot/field
 - iii. Try to keep sample within 250-500 mL
4. For turfgrass, select a 2-4" sample (including at least 2" of soil) from the margin of the diseased area.
5. Wrap sample in dry paper towel or newspaper and place in a Ziplock plastic bag. Never add moisture to any sample.
6. Submit a **completed** Plant Specimen Submission Form. Processing of the sample may be delayed for specimens received without the proper form or if information provided is insufficient.

PACKING:

1. Keep sample cool prior to shipment.
2. Pack the sample carefully in a sturdy box or padded envelope. Be sure not to crush specimens.
3. Mail immediately (**overnight delivery is recommended**). Avoid mailing over weekends and holidays.

DROP-OFF IN PERSON:

1. Make the first left after entering the driveway off Halawa Valley St.
2. Drive pass the main building and make a left at the sign that says "Veterinary Laboratory Specimen Drop Off"
3. Climb the stairs of the loading dock and press the button on the wall to notify staff

ADDRESS PACKAGE TO:

Josiah Marquez
Hawaii Department of Agriculture
Plant Pathology Unit
99-941 Halawa Valley Street
Aiea, HI 96701

PLANT SPECIMEN SUBMISSION FORM

99-941 Halawa Valley Street, Aiea, HI 96701
(808) 391-7159



1. Name: _____
2. Date collected: _____
3. Submission date: _____
4. Phone: _____
5. E-Mail address: _____
6. Address of sample: _____

7. Plant Host Details:

- a. Name of plant:
 - i. Variety: _____
 - ii. Common name: _____
 - iii. Scientific name: _____
 - iv. Age of plant (years; months): _____ Plant date: _____

8. Symptom information:

- a. Symptoms: spots; tipburn; distortion; mosaic/mottle; chlorosis; necrosis; rot; mildew; blisters; defoliation; wilt; dieback; blight; stunting; canker; galls

- b. Plant parts affected: roots/crowns; stems/branches; leaves; fruit; whole plant; other: _____

- c. Symptom description (be as specific as possible, describe the whole plant - remember the clinician is only seeing the specimen submitted):

- d. When did symptoms first appear: _____
- e. Are the symptoms (mark one): spreading; localized
- f. Symptom development (mark one): gradual; sudden; If gradual, describe early symptoms: _____
- g. Distribution of diseased plants (mark one): scattered; clustered; in a row or pattern
- h. Severity (0 = healthy to 10 = dead): _____; Incidence (% of plants with symptoms): _____
- i. Size of affected area (acres; square feet): _____; number of plants _____

PLANT SPECIMEN SUBMISSION FORM

99-941 Halawa Valley Street, Aiea, HI 96701
(808) 391-7159



9. Background information

a. Any known pests observed on site?

i. Name of pests: _____

b. Soil type (mark all that apply): Sand; Silt; Clay; Well drained; Poorly drained;
 Heavy; Light

c. Growing conditions (mark all that apply): Indoors; Greenhouse; Home Garden; Lawn;
 Landscape; Organic Garden; Commercial Field; Other

d. Weather conditions (immediately prior to and during development of symptoms) (mark all that apply):
 Wet; Dry; Humid; Windy; Dusty

i. Temperature (°F): _____; Other Conditions: _____

e. Irrigation history: (Mark all that apply): Furrow; Flood; Drip; Sprinkler; Hand

i. How often? _____

ii. How much water is applied? _____

f. Fertilization history: (type, nutrient ratio, amount applied, and frequency of application):

g. Chemicals applied (chemical name, method and frequency of application and amount applied):

h. Cropping history (for agricultural fields or home gardens):

i. Rotation (previous 3 years):

ii. Past Problems (in field):