



Extension Plant Pathology
 Oregon State University
 Hermiston Agricultural Research &
 Extension Center
 2121 South 1st Street
 Hermiston, OR 97838
 541-567-8321

HAREC Plant Pathology Sample Submission Form

Office use:
 Date Rec. _____
 PCE# _____

Grower: _____ **Submitter:** _____

Street: _____ **Street:** _____

City: _____ **State** _____ **Zip** _____ **City:** _____ **State** _____ **Zip** _____

County _____ **County** _____

E-mail: _____ **E-mail:** _____

Telephone: _____ **Fax** _____ **Telephone:** _____ **Fax** _____

Bill to (Must check one): **Grower** **Submitter** (General Sample Fee: \$60.00; additional fees may apply)
Send results to (Please check all that apply): **Grower** **Submitter** Send results via: **E-mail** **Mail** **Fax**

Host/Plant: _____ **Variety:** _____

Date Planted: _____ **Number of years at present site:** _____

Previous crops: _____

Acreage: _____ **% Affected:** _____ **Number of plants affected:** _____

Exposure: full sun partial shade full shade windy protected

Distribution of affected plants: single plants grouped scattered edge of field

Soil characteristics: sandy clay silt loam organic hard pan

Irrigation type and frequency: _____

Fertilizer Applications (product, rate, frequency): _____

Pesticide Applications (Insecticides, Fungicides, Herbicides, rates, frequency, etc.): _____

Date damage was first noticed: _____

Symptoms: Check all that apply.

Leaves		Stems		Fruit		Roots	
<input type="checkbox"/> Wilting	<input type="checkbox"/> Misshaped	<input type="checkbox"/> Stunting	<input type="checkbox"/> Wilting	<input type="checkbox"/> Spots	<input type="checkbox"/> Holes	<input type="checkbox"/> Rotten	<input type="checkbox"/> Stunting
<input type="checkbox"/> Yellowing	<input type="checkbox"/> Curling	<input type="checkbox"/> Spots	<input type="checkbox"/> Misshaped	<input type="checkbox"/> Misshaped	<input type="checkbox"/> Sticky	<input type="checkbox"/> Discolored	<input type="checkbox"/> Sparse
<input type="checkbox"/> Chlorosis	<input type="checkbox"/> Spots	<input type="checkbox"/> Brittle	<input type="checkbox"/> Cracks	<input type="checkbox"/> Discolored		<input type="checkbox"/> Shallow Growth	<input type="checkbox"/> Dry/Brittle
<input type="checkbox"/> Browning	<input type="checkbox"/> Discolored	<input type="checkbox"/> Streaking	<input type="checkbox"/> Lodging	<input type="checkbox"/> Rotten		<input type="checkbox"/> Misshaped	
<input type="checkbox"/> Early Drop	<input type="checkbox"/> Tattered	<input type="checkbox"/> Exuding Sap		<input type="checkbox"/> Streaking		<input type="checkbox"/> Easily Uprooted	
<input type="checkbox"/> Brittle	<input type="checkbox"/> Mosaic	<input type="checkbox"/> Holes		<input type="checkbox"/> Early Drop		<input type="checkbox"/> Bumps	
<input type="checkbox"/> Rotting		<input type="checkbox"/> Discolored		<input type="checkbox"/> Cracks		<input type="checkbox"/> Streaking	

Additional Symptoms:



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Specialty Testing Services

Soil Testing (Check all that apply):

- Pythium* spp. *Fusarium* spp. *Verticillium dahliae*
 Colletotrichum coccodes (Black Dot) pH Metalaxyl resistant *Pythium* spp.

Total number of soil samples _____

Silver Scurf and Black Dot Tuber Assay (Check all that apply):

- Silver Scurf Black Dot

Specialty Pathogen Testing*

I want to test for a specific Virus Fungus Bacterium

Pathogen Name _____ Host _____

Number of Samples** _____ Bulk Testing? Yes No

*Please contact lab prior to sending samples to determine if we test for a desired pathogen.

**Plants will be tested individually unless otherwise instructed. Plant samples can be bulked to reduce testing costs. If bulk testing is requested, typically five plants are sampled and tested as one. Please note that bulk testing may decrease the ability to detect an organism.