



Bonner County
4205 N. Boyer Ave.
Sandpoint ID 83864
(208) 263-8511

For office use only:

Reference Number: **2008-**

Report taken by:

Date:

Sample taken (Y/N):

**Plant Diagnostic Clinic
PLANT PROBLEM DIAGNOSIS
Home and Ornamental Landscape**

To better serve our clients:

1. Samples are processed on a first-come, first-served basis;
2. To ensure accuracy, please give us 2-3 business days to research your problem and get back to you with an answer;
3. A sample should be several plant parts from affected areas of the plant. For weed and plant identification we will need a sample of the entire plant, including roots, leaves and flowers.
4. Our diagnosis is only as good as the information we receive. Please fill out his form as completely as possible;
5. It is very helpful if we can also get digital photographs of a group of affected plants, individual plants and individual affected plant parts;
6. Diagnosis may be delayed by poor quality samples, incomplete or missing information or by staff schedules;
7. We may need to forward the sample and information to the University of Idaho for diagnosis, which may take additional time to complete. We will be in touch with you if we need to do this.

Name _____ Phone (daytime) _____

Address _____ Cell Phone _____

City _____ Email _____

State _____ Zip _____ County _____

Please fill out this form as completely as possible. It will provide us with the information we need to diagnose your plant problem and recommend the action you need to take. If you do not fill out this form, we will not be able to provide you with a prompt or adequate, accurate diagnosis and management recommendation for your plant problem.

1. Name of plant _____ Variety (if known) _____
2. Age of plant _____ When was plant planted in this location _____
3. Size of plant—approximate size (height and/or width) _____
4. Please describe the problem in comparison to a normal specimen in your own words, then check all that apply: _____

Patterns:

On affected plant:

- | | |
|--|--|
| _____ started at bottom and moves up | _____ started at top and moves down |
| _____ entire plant is affected | _____ damaged only on tips of branches |
| _____ damage only on one side
(N__ S__ E__ W__) | _____ damaged only on inside branches |

In landscape/planting:

- | | |
|--------------------------------|--|
| _____ scattered plant affected | _____ several plants in a row affected |
| _____ only one plant affected | _____ all similar plants affected |

5. When did you first notice the problem? _____
 _____ happened very quickly _____ happened gradually
 _____ is getting worse _____ is not getting worse
6. Has this plant ever had this problem before? ____ Yes ____ No If yes, when: _____
7. Are other plants of the same variety in your landscape/garden similarly affected? ____ Yes ____ No
8. Do other plants of different varieties in your landscape/garden show the same symptoms?
 ____ Yes ____ No

9. Plant parts affected and how affected (check all that apply):

- | | | |
|---|--|---|
| <input type="checkbox"/> Flowers
_____ spots
_____ wilted
_____ distorted
_____ insect injury
_____ other _____
_____ | <input type="checkbox"/> Fruit
_____ blotches
_____ dry
_____ distorted
_____ rotten/mushy
_____ other _____
_____ | <input type="checkbox"/> Leaves/needles
_____ spots ____ wilted
_____ fall off ____ rolled
_____ distorted
_____ yellowish
_____ brown
_____ other _____
_____ |
| <input type="checkbox"/> Roots
_____ brown (internally)
_____ rotted
_____ chewed
_____ few roots
other _____
_____ | <input type="checkbox"/> Twigs
_____ dead
_____ decayed area
_____ sticky/weepy
_____ other _____
_____ | <input type="checkbox"/> Stems
_____ dead
_____ decayed area
_____ sticky/weepy
_____ other _____
_____ |
| <input type="checkbox"/> Large branches
_____ dead
_____ decayed area
_____ sticky/weepy
_____ other _____
_____ | <input type="checkbox"/> Trunk
_____ dead/losing bark
_____ decayed area
_____ sticky/weepy
_____ other _____
_____ | <input type="checkbox"/> Whole plant
_____ wilted
_____ distorted
_____ stunted
_____ other _____
_____ |

10. Have you checked the base of plants and/or roots to look for signs of a problem or injury to the plant?
 ___ Yes ___ No If yes, what did you find? _____
11. How was the plant planted? (check all that apply)
- | | | |
|------------------------|-------------------------|------------------------------------|
| ___ balled & burlapped | ___ peat/manure/compost | ___ fertilizer applied at planting |
| ___ plastic pot | ___ added to backfill | ___ or right after planting |
| ___ bare root | ___ peat/paper pot | ___ planted by landscaper |
| ___ pot/burlap removed | ___ other _____ | ___ planted by previous owner |
| ___ from root ball | ___ don't know for sure | |
12. Mulched with:
- | | | |
|-----------------|---------------------|-----------------------------|
| ___ nothing | ___ grass clippings | ___ bark mulch (type _____) |
| ___ other _____ | | |
13. Irrigation
- | | | |
|-----------------------------|----------------------------------|----------------------------------|
| System: | Where is water applied: | Watering frequency: |
| ___ hand watered | ___ overhead watering | ___ times a week for |
| ___ sprinkler | ___ individual emitter per plant | ___ minutes each time |
| ___ set sprinkler system | ___ water with lawn | ___ as needed with checking soil |
| ___ drip/soaker hose/porous | ___ watered directly at base | ___ as needed without checking |
| ___ wall hose | ___ of plant | ___ soil but relative to weather |
| | | ___ conditions |
14. Where is the plant located?
- | | | |
|-----------------------------|------------------------------|------------------------------|
| ___ in garden | ___ next to driveway | ___ under eaves |
| ___ in lawn | ___ next to pool | ___ plant is shaded |
| ___ in landscape bed | ___ next to garage/carport | ___ full sun |
| ___ in landscape berm/mound | ___ next to road | ___ exposure N__ S__ E__ W__ |
| ___ on lot line | ___ next to house | ___ windy location |
| ___ on a slope | ___ next to sidewalk | ___ other _____ |
| ___ in nursery | ___ next to fence/deck/patio | |
| ___ in greenhouse | | |
15. Soil situation:
- | | | |
|----------------|-------------------------|-----------------------------------|
| ___ sandy soil | ___ lots of rocks | ___ white crust on soil |
| ___ loamy soil | ___ introduced top soil | ___ shallow soil 6" or less depth |
| ___ clay soil | ___ good drainage | ___ soil the builder left |
| | ___ poor drainage | |
16. Chemicals applied to plant or applied to nearby plants:
- | | | | |
|-----------------|------------|--------------------|---------------------|
| ___ insecticide | type _____ | date applied _____ | where applied _____ |
| | type _____ | date applied _____ | where applied _____ |
| ___ fungicide | type _____ | date applied _____ | where applied _____ |
| | type _____ | date applied _____ | where applied _____ |
| ___ fertilizer | type _____ | date applied _____ | where applied _____ |
| | type _____ | date applied _____ | where applied _____ |
17. Have any of these weed killers been used in your landscape/garden within the last two years?
- ___ Roundup, Kleen-up, Knock Out – when & where _____
- ___ Triox, Noxall, Spike, other soil residual pesticides – when & where _____
- ___ Casoron – when & where _____
- ___ Other soil sterilant herbicides _____
18. Do you use a separate sprayer when applying weed-killers and insecticides/fungicides?
 ___ Yes ___ No

19. Have any of these happened to your affected plant or within your yard or garden in the past 3 to 5 years?

20.

- construction or heavy equipment over soil
- change of soil grade—landscaping, pool installation
- soil/root injury—septic work, trenching, root removal or cutting, pool installation, construction
- addition to soil of a volume of organic matter or other soil additives
- trunk, bark injury—injury to plant from lawn mover or weed eater, staking wire, rope, twine
- extreme drought—no irrigation for several months in spring, summer, or fall months
- driveway or road paving nearby

Do not write in this space.

Diagnosed by: _____

Diagnosis:

Source:

Trade names have been used to simplify information; no endorsement is intended.

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