Grower's Name	Lab file #
Tre	E AND SHRUB DISEASE IDENTIFICATION FORM

Information to Supplement the Plant Disease Identification Form

Many tree and shrub problems are best diagnosed only after careful inspection of the whole plant in its growing site. However, because the plant disease diagnostician cannot visit the growing site, the grower's observations and information can be of tremendous help in formulating a diagnosis. The more information the grower provides, the better the diagnostician will be able to narrow down the cause(s) of the problem.

Please complete as much of the following as possible <u>in addition to the Plant Disease Identification Form</u>
(Include relevant photos, if available)

General Information				
Approximate height (feet) Time in present site		Trunk diameter at planting		
What is the distribution of affected branches.	Symptom			
		Scattered branches all over tree/shrub One portion of tree/shrub only Several portions of tree/shrub Entire plant Other What is the progression of symptoms throughout the tree/shrub (e.g. from lower branches to top; from branch tips toward trunk; from one side to another, etc.)?		
3) What is the progression of symptoms	on leaves/needles? (e.g. leaf m	nargins/needle tips inward; between leaf veins)		
4) Has problem occurred: □ slowly or	☐ rather suddenly? How rapid	ly?		
5) Are cankers, sunken areas, or injuries	mower, string trimmer, or oth	er) present on main limbs or trunk? $\ \square$ Yes $\ \square$ No		
Describe size and location				
How old are cankers or injuries indicate	ed above?	Is there any evidence of "healing"(callus)? $\ \square$ Yes $\ \square$ No		
	e" around trunk within 12 inche	oil level?		

(continued on reverse side)



	Are there other plants of this type also showing the same symptoms? Yes No Are there healthy plants of the same type nearby? Yes No Are there other plants not of this type showing the same symptoms? Yes No Are mushrooms, bracket fungi, or conks apparent on trunk or at base of tree/shrub? Yes No If so, describe:				
٠,	The mash some fine apparent on trained at sase of tree, small. I les and a so, describe.				
	Growing Site				
1)	Is tree/shrub surrounded by pavement or buildings? ☐ Yes ☐ No Is soil around tree/shrub compacted? ☐ Yes ☐ No				
2)) Is tree/shrub in $\ \square$ full sun $\ \square$ partial shade $\ \square$ full shade				
3)	Have roots been disturbed in the past 5 years? ☐ Yes ☐ No Has the grade (soil level) around tree/shrub changed in the				
	Past 5 years? ☐ Yes ☐ No If yes, explain ☐ soil added ☐ soil removed Reason				
4)	s) Is tree/shrub located in a low wet area or at the base of a downspout? Yes Does water stand or puddle on soil				
	after rain? ☐ Yes ☐ No Is tree/shrub in a site where topsoil was removed (e.g. a new home development)? ☐ Yes ☐ No				
	Cultural Practices				
1)	Is there mulch around tree/shrub base? ☐ Yes ☐ No Is there a tree guard around trunk ☐ Yes ☐ No				
2)	Has tree ever been topped $\ \square$ Yes $\ \square$ No When?				
3)	Has tree/shrub been bumped by lawn mower, string trimmer, or other equipment? \Box Yes \Box No				
4)) Have herbicides been used to control weeds □ in lawn □ around tree □ other				
5)) Is tree/shrub watered thoroughly during dry periods (equivalent of at least 1 inch of rain per week)? No				
6)	If tree/shrub was transplanted in last 2 to 3 years, describe method				
	Was plant □ bare root □ container-grown □ ball & burlap Container diameter or root ball size				
	If ball & burlap: type of root ball covering \(\price \text{degradable burlap} \) \(\price \text{plastic} \) \(\price \text{other} \)				
	Before planting, was root ball covering □ removed □ loosened □ slit				
7)	What were the results of last soil test taken for this site? pH P K				
	Ca-Mg When was the last time tree/shrub or surrounding lawn was fertilized?				
	[Be sure to indicate type of fertilizer on Plant Disease Identification form]				
	How was fertilizer applied □ cores dug □ broadcast □ injection □ other				
	Applied □ at drip line □ near trunk □ other				

Additional Information