

# Turfgrass Disease Identification Form



**Turfgrass Disease Identification**  
 28 Mumford Hall  
 University of Missouri  
 Columbia, Missouri 65211

**For Lab Use Only**

Lab No. \_\_\_\_\_

**Condition on arrival**

Excellent  Good  Fair  Poor

Check \$ \_\_\_\_\_ No. \_\_\_\_\_ Date \_\_\_\_\_

Cash \$ \_\_\_\_\_ Amount Due \$ \_\_\_\_\_

Contact us at: 573-882-3019 Fax 573-882-1467 E-mail: [plantclinic@missouri.edu](mailto:plantclinic@missouri.edu) <http://turfpath.missouri.edu/>

Mail reply to: <input type="checkbox"/> Submitter <input type="checkbox"/> Client Fax reply to: <input type="checkbox"/> Submitter <input type="checkbox"/> Client E-mail reply to: <input type="checkbox"/> Submitter <input type="checkbox"/> Client Bill to: <input type="checkbox"/> Submitter <input type="checkbox"/> Client	<b>Charges:</b> \$100/out-of-state \$50/in-state golf \$25/in-state commercial (lawn and landscape, sod production) \$15/in-state homeowner	<b>Make check payable to the University of Missouri</b> <b>Please use a separate form for each sample</b>
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Submitted By: _____	Submitted For (Client): _____
Business Name _____	Business Name _____
Address _____	Address _____
City/State/Zip _____	City/State/Zip _____
Phone (____) _____ Fax (____) _____	Phone (____) _____ Fax (____) _____
E-mail _____	E-mail _____

Information about	<u>Submitter</u>	<u>Client</u>	<u>Submitter</u>	<u>Client</u>	<u>Submitter</u>	<u>Client</u>
<b>Submitter/Client</b>	<input type="checkbox"/>	<input type="checkbox"/> Superintendent	<input type="checkbox"/>	<input type="checkbox"/> Dealer/Industry Rep	<input type="checkbox"/>	<input type="checkbox"/> Professional Lawn Care Company
	<input type="checkbox"/>	<input type="checkbox"/> Homeowner	<input type="checkbox"/>	<input type="checkbox"/> Landscaper	<input type="checkbox"/>	<input type="checkbox"/> Extension Educator

Turfgrass Species _____	Date noticed _____	Symptoms developed in:
Cultivar _____	Date collected _____	_____ Days _____ Weeks _____ Months
County of origin _____	Date sent _____	_____ Occurred in previous years

Turfgrass: When established \_\_\_\_\_  Sod  Seed  Plugs Greens: Age (when constructed) \_\_\_\_\_

<b>Location</b> <input type="checkbox"/> Putting green <input type="checkbox"/> Tees <input type="checkbox"/> Fairway <input type="checkbox"/> Surrounds <input type="checkbox"/> Athletic field <input type="checkbox"/> Sod Farm <input type="checkbox"/> Home lawn <input type="checkbox"/> Park/cemetery <input type="checkbox"/> Commercial property	<b>Soil pH</b> _____  <b>Soil Drainage</b> <input type="checkbox"/> Good <input type="checkbox"/> Poor	<b>Pesticides/Management Inputs within last 30 days (rates and date)</b> Fertilizer _____ Growth regulators _____ Herbicides _____ Fungicides _____ Insecticides _____ Aerification _____
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Please describe the problem. Include symptom (i.e. rings, patches, spots, etc), pattern (i.e. clustered, random, in lines), and plant parts affected. Email photos to [plantclinic@missouri.edu](mailto:plantclinic@missouri.edu).

<b>Diagnosis</b>	<b>Lab use only</b>
_____	_____
Diagnostician	

## Submission Instructions for Turfgrass Samples

### **SAMPLING INSTRUCTIONS:**

1. Collect samples early in the week, especially if sending by mail.
2. Take plugs from the outer margins of affected areas, including 2/3<sup>rd</sup> symptomatic turf and 1/3<sup>rd</sup> healthy turf.
3. Take plugs at least 4-6 inches across with a cup cutter or knife to a depth of 3-4 inches or to the extent of the root zone. Shake off any loose soil.
4. If possible, send two total plugs per sample.

### **SHIPPING INSTRUCTIONS:**

1. Wrap the soil in aluminum foil or newspaper, leaving turf foliage exposed.
2. **DO NOT** place turf samples in plastic bags. **DO NOT** add wet paper towels or excess moisture to packages. This can lead to proliferation of non-pathogens and increased decay of the turf sample in transit.
3. Place the samples in a cardboard box, and secure tightly with newspaper or other packing materials.
4. Please fill out the form completely and legibly. Pack form in box so it will not get wet or damaged.

### **MAILING INSTRUCTIONS:**

1. Take the sample on the same day you intend to mail it.
2. Avoid exposure of sample to excess heat (i.e. closed vehicle on hot day).
3. Mail early in the week to avoid weekend delays in shipping.
4. Always use at least first class mail. A next day service or delivery in person is the best way to assure that the sample arrives in good order.

### **PHOTOS**

- ❖ Submission of digital photographs is **highly recommended** to aid in disease identification.
- ❖ Email photos to [plantclinic@missouri.edu](mailto:plantclinic@missouri.edu) with information regarding the sample submission.