**Instructions: Please fill put as much of the form as possible, ensuring you keep a copy for your record, and submit the original with the sample. Prior to sending samples, please email (turfpestlab@psu.edu) or call (814-863-0818) to advise when your sample will arrive.**

**DATE SAMPLE WAS COLLECTED** **/ /      DATE SAMPLE WAS SENT   / /**

**Payment: Invoices will be sent with report and can be paid by check or credit card.**

 **Attach Business Card or Fill in Below**

|  |  |  |
| --- | --- | --- |
| Business Contact |  | Sample Submitter or bill to |
| Name |  |  |  |
| Company |  |  |  |
| Address |  |  |  |
| City/zip |  |  | **Email/Mail/Fax to:** Submitter [ ]  Grower [ ]  |
| County |  |  |  (    )  |
| Phone No.  |  (    )  |  |  (    )  |
| Email |  (    )  |  |  |

|  |  |
| --- | --- |
| Turf Species, Cultivar, Turf use area |        |
| (green, tee, fairway, etc.) |  |

**Check/Fill-in all that apply**

|  |
| --- |
| Symptom development timing: [ ]  Suddenly [ ]  Within the last week [ ]  Over several weeks or months  |
| Field symptoms include: [ ]  Lesions [ ]  Blight [ ]  Patch [ ]  Rings [ ]  General decline [ ]  Spots  |
|  [ ]  Wilting [ ] Chlorosis [ ]  Browning [ ]  Mottling [ ]  Other (describe below) |
|  |
| *Symptoms are:* [ ]  less than 12" [ ]  Larger than 1 ft [ ]  Mild and scattered Severe and widespread  |
| *Symptom distribution*: [ ]  Scattered plants [ ]  Shaded areas [ ]  Wet areas [ ]  Dry areas [ ]  % Area affected  |
|  |
| Additional information:       |
|  |
|  |
|  |
|  |
|  |
|  |

|  |
| --- |
| **Turf maintenance (provide as much info as possible)** |
| **Height of cut**:       | Irrigation water quality/reliability:       | Soil pH        |
| **Growth regulator & frequency**:       Recent fertilization date:       |
| **Wind Exposure:** [ ]  Windy [ ]  Moderate wind [ ] Sheltered  |
| **Sun exposure:**  Full sun [ ]  Partial sun[ ]  Shade [ ]  |
| **List or attach recent pesticide applications for the past month**:      ­­­­­­­­­­­­­­­­­­­­­­­­­      |
|  |

**I would like:** [ ]  **Diagnostic confirmation** [ ]  **Fungicide recommendation** [ ]  **Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**GENERAL SAMPLE SUBMISSION GUIDELINES**

1. Submit a Cup Cutter-sized sample (4” diameter x 3” depth) that includes half symptomatic and half healthy turf.
2. Wrap samples in aluminum foil and pack tightly in a shipping container. DO NOT place samples in a plastic Ziplock.
3. **Include a completed Diagnostic Form with your sample(s).** These are available atturfpestlab.psu.edu or can be requested at TurfPestLab@psu.edu.
4. Complete the form with as much information as possible and keep the form separate from the sample in a Ziploc bag.
5. Hand-deliver sample(s) or ship **overnight** to arrive Monday-Thursday. Contact the lab via email or phone prior to sending.
6. Contact Drs. John Kaminski or Louis Bengyella at TurfPestLab@psu.edu to seek for additional advice or services.

**THE TURF PEST DIAGNOSTIC LAB**

The Turf Pest Diagnostic Lab's mission is to determine whether the symptomatic turf is caused by biotic factors (such as fungus, bacterium, virus, insect, invasive weed, etc.) and abiotic factors (such as water stress, drought, heat stress, mechanical stress, etc.). The Turf Pest Diagnostic Lab is open from **8:00 AM – 5:00 PM Monday – Friday** (except for Federal/State/University holidays) and is located on the University Park Campus at State College. Always call or email prior to sending samples.

**ADDITIONAL SERVICES**

Additional services include pathogen resistance screening, herbicide resistance evaluations, pathogen sequencing, and more. Contact the lab for more information.

***Ship samples and make checks payment to (contact us via email to pay by credit card):***

[ ] ***Check this box if you would like to pay via credit card***

[**Turf Pest Diagnostic Lab**](https://turf.psu.edu/pest-lab)

11 Tyson Building

University Park, State College, PA 16802

Email: TurfPestLab@psu.edu

Phone: (814) 863-0918

turfpestlab.psu.edu

**Diagnostic Services and Fee’s:**

* Disease identification examination and full report (**$125.00**)
* Pathogen culturing, PCR confirmation and full report (**$225.00**)
* Pesticide resistance screening (**$275.00**)
* Endophyte screening (**$275.00**)
* Species DNA sequencing (**$175.00**)
* Weed or insect identification (**$65.00**)
* Nematode counts (coming soon)