

# TISSUE SAMPLE QUESTIONNAIRE

Information Number: \_\_\_\_\_

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**Tissue Analysis Package: includes the following tests**

Total Nitrogen, Phosphorus, Potassium, Calcium, Magnesium, Boron, Iron, Manganese, Copper, Zinc, Molybdenum, Aluminum, Sodium.

**A. Please indicate your sample I.D. code/number:** \_\_\_\_\_

(Maximum 20 characters.)

Date sample was taken: \_\_\_\_\_

**B. CROP TYPE:**       1. Greenhouse       2. Nursery

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> a. Bedding Plants     | <input type="checkbox"/> g. Mum        | <input type="checkbox"/> m. Rhododendron   |
| <input type="checkbox"/> b. Cucumber           | <input type="checkbox"/> h. Poinsettia | <input type="checkbox"/> n. Conifer        |
| <input type="checkbox"/> c. Foliage            | <input type="checkbox"/> i. Tobacco    | <input type="checkbox"/> o. Deciduous Tree |
| <input type="checkbox"/> d. General Ornamental | <input type="checkbox"/> j. Tomato     | <input type="checkbox"/> p. Perennial      |
| <input type="checkbox"/> e. Geranium           | <input type="checkbox"/> k. Rose       | <input type="checkbox"/> q. Acer (Maple)   |
| <input type="checkbox"/> f. Lily               | <input type="checkbox"/> l. Azalea     | <input type="checkbox"/> r. Quercus (Oak)  |

*If crop type not listed, please specify* \_\_\_\_\_

**C. (OPTIONAL) VARIETY** \_\_\_\_\_

**D. CROP STATUS**

- 1. Plugs
- 2. Root Cuttings/Liners
- 3. Less than 3 weeks
- 4. More than 3 weeks and up to 12 weeks
- 5. More than 12 weeks and up to 6 months
- 6. More than 6 months

**E. LEAVES SAMPLED**

- 1. Recently Matured Leaves
- 2. Young/New Leaves
- 3. Old/Mature Leaves
- 4. Other \_\_\_\_\_

**F. SAMPLE TYPE**

- 1. Routine Analysis
- 2. Problem Situation

**IF PROBLEM, FILL OUT BELOW**

**G. THIS SAMPLE FROM**

- 1. Non-affected Plants (Good)
- 2. Affected Plants (Bad)

**H. SYMPTOM APPEARANCE (Check all that apply)**

- 1. Chlorosis, Yellowing Leaves
- 2. Necrosis (Dead areas/Dead spots)
- 3. Distortion
- 4. Stunted Plants

**I. WHERE DO SYMPTOMS APPEAR?**

- 1. New, Young Growth
- 2. Recently Matured Leaves
- 3. Old Mature Leaves
- 4. Other (stems, bracts, flowers)

**J. ROOT SYSTEM STATUS**

- 1. Dead
- 2. Unhealthy (i.e., some dead root tips)
- 3. Excellent

**K. OTHER COMMENTS** \_\_\_\_\_

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