

# Nematode Assay Form<sup>1</sup>

Tesfamariam Mekete and William T. Crow<sup>2</sup>

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The [Nematode Assay Form](#) is the form that must accompany samples submitted to the UF/IFAS Nematode Assay Laboratory. This service is available to the public for a fee of \$20.00 for each sample from Florida and \$25 for each sample from outside of Florida. UF/IFAS Extension personnel are not charged for samples when “trouble-shooting” plant growth problems.

The Nematode Assay Form is available in [writable pdf form](#). The form gives details about how to collect samples and what analyses will be performed. Please see “Florida Nematode Sampling Instructions” at <http://edis.ifas.ufl.edu/sr011>, for more information.

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1. This document is RFSR023, one of a series of the Department of Entomology and Nematology, UF/IFAS Extension. Original publication date October 1998. Revised March 2007 and July 2015. Reviewed September 2017. Visit the EDIS website at <http://edis.ifas.ufl.edu>.
  2. Tesfamariam Mengistu Mekete, assistant Extension scientist; and William T. Crow, professor of nematology, Department of Entomology and Nematology; UF/IFAS Extension, Gainesville, FL 32611.

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# NON-TURF NEMATODE ASSAY FORM

**CLIENT**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_  
E-mail \_\_\_\_\_

COUNTY \_\_\_\_\_ EXT AGENT \_\_\_\_\_

DATE COLLECTED \_\_\_\_\_

Signature \_\_\_\_\_

**SUBMITTER**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_  
Email \_\_\_\_\_

Send Results To:  Client  Submitter

By:  Mail  E-mail  FAX

**Information Needed for Correct Interpretation of Assay Results:**

**IS THIS SAMPLE FOR:**

- Diagnosis of problem of existing crop/plant
- Advice for future planting
- Experimental data

**SERVICE TYPE**

- Soil
- Root
- Soil and root
- Species ID

**PLANT/CROP - species and variety if known:**

Present \_\_\_\_\_ Age \_\_\_\_\_  
Previous \_\_\_\_\_ Future \_\_\_\_\_

**SYMPTOMS: (✓) terms which describe the crop**

- Plant -  wilted  stunted  yellow  decline  dead  
Root -  galls  stunted roots  root rot  pod rot

**SITUATION (✓):**  Commercial  Residential  Public

**(✓) ONE OF THE FOLLOWING:**

- Field  Grove  Nursery  Garden  Landscaping
- Containerized/Interior Ornamental  Other \_\_\_\_\_

**MAIN SOIL TYPE (✓):**  Sand  Clay  Muck  Artificial Mix  Marl

Size of crop area \_\_\_\_\_

Recent nematicide use, prior history of nematodes, other pertinent information

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Lab Sample No. \_\_\_\_\_ Date Received \_\_\_\_\_

Sample Status:  Paid  IFAS Service  Other (explain) \_\_\_\_\_



**PAYMENT INFORMATION**

*(this portion of the form will be detached and shredded after transaction is approved; we do not keep this information on file)*

Credit card number: \_\_\_\_\_ CVV: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Expiration date (mm/yy): \_\_\_\_\_

**\*Center staff only\* NAL #:** \_\_\_\_\_

**Amount: \$** \_\_\_\_\_

Florida: \$25 per sample  
Outside of Florida: \$35 per sample (soil or mist)  
Both soil and mist is double.  
Please make checks payable to University of Florida

## List Multiple Samples Here

<b>Grower Identification</b> <i>Examples: Fairway 1</i> Soccer Field Front Yard	<b>Plant/Crop</b> <b>(Species &amp; Variety)</b> <i>Examples: Petunia - Purple Haze</i> St. Augustine - Floratam Corn - Silver Queen	<b>Lab Sample #</b>  (Lab Use Only)

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## NEMATODE ASSAY FORM

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**GROWER/OWNER NAME AND ADDRESS**

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

COUNTY \_\_\_\_\_ EXT AGENT \_\_\_\_\_

DATE COLLECTED \_\_\_\_\_

**CONSULTANT, PEST CONTROL COMPANY, etc:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

Send Results To:  Grower  Pest Control/ConsultantBy:  Mail  E-mail  FAX

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**Information Needed for Correct Interpretation of Assay Results:****IS THIS SAMPLE FOR:**

- Diagnosis of problem of existing crop/plant
- Advice for a future planting
- Experimental data

**PLANT/CROP** - species and variety if known:

Present \_\_\_\_\_ Age \_\_\_\_\_

Previous \_\_\_\_\_ Future \_\_\_\_\_

**SYMPTOMS:** (✓) terms which describe the crop**Plant** -  wilted  stunted  yellow  decline  dead**Root** -  galls  stunted roots  root rot  pod rot**SITUATION** (✓):  Commercial  Residential  Public**(✓) ONE OF THE FOLLOWING:**

- Field  Grove  Nursery  Golf Course  Lawn  Garden  Park  Playing Field  Landscaping
- Containerized/Interior Ornamental  Other \_\_\_\_\_

**MAIN SOIL TYPE** (✓):  Sand  Clay  Muck  Artificial Mix  Marl

Size of crop area \_\_\_\_\_

Recent nematicide use, prior history of nematodes, other pertinent information  
\_\_\_\_\_  
\_\_\_\_\_

Lab Sample No. \_\_\_\_\_ Date Received \_\_\_\_\_

Sample Status:  Paid  UF/IFAS Service  Other (explain) \_\_\_\_\_

### List Multiple Samples Here

<b>Grower Identification</b> <i>Examples: Fairway 1 Soccer Field Front Yard</i>	<b>Plant/Crop (Species &amp; Variety)</b> <i>Examples: Petunia - Purple Haze St. Augustine - Floratam Corn - Silver Queen</i>	<b>Lab Sample #</b>  (Lab Use Only)

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