



### Plant Health Checker - Step 1

<b>Name of Botanic Garden / Arboretum:</b>	
Country:	
Address:	
Name of IPSN contact:	
<b>Survey details</b>	
Survey carried out by:	
Date of survey:	
Best description of season:	
Main reason for surveying this particular individual:	
<b>Plant details</b>	
Species (Cultivar):	
Accession number:	
GPS	
Country/region species is native to:	
Age/amount of time plant has been present in gardens:	
General Comments:	
<b>General description</b> (please tick)	
Generally healthy <input checked="" type="checkbox"/>	Some damage <input checked="" type="checkbox"/>
Dying <input checked="" type="checkbox"/>	Dead <input checked="" type="checkbox"/>
Any recent changes in health or overall look:	

### General description of environment

Any management issues (e.g. irrigation, soil pH, sun bleaching) or any recent use of pesticides/ fungicides/ herbicides:

Description of environment (focusing on recent changes and individuals in close proximity):

For each section of the plant give it a rating dependent on how healthy it appears:

**Red (R)** = In very poor health and of imminent concern due to significant damage potentially resulting in death of individual

**Orange (O)** = Not currently a concern but could develop; should be checked frequently to monitor progress

**Green (G)** = As would be expected on a 'healthy plant'

**Black (X)** = Absent/not applicable

Where an **orange or red** rating is given, ensure you give a description of why you've given it this rating in notes.

**Notes:**

**1. Flowers & buds**  
R  O  G  X

**2. Leaves**  
R  O  G  X

**3. Stem**  
R  O  G  X

**4. Taproots and Branch Roots**  
R  O  G  X

What do you think is wrong with this plant?

*(give an indication of how sure you are of this diagnosis)*

Reference/file name of any photographs taken:

1.) Is a re-survey required?

2.) If yes, in what timeframe (include a suggested date)

3.) Should this be escalated to an appropriate staff member to carry out STEP 2?

4.) Name of person escalated to *(if applicable)*:

5.) Date:



Accession number: \_\_\_\_\_

Survey completed by: \_\_\_\_\_ Date: \_\_\_\_\_

## Plant Health Checker – Step 2

**Please read:** This section should be completed if escalation is specified by STEP 1. It should be carried out by an appropriately trained staff member who has the relevant knowledge concerning the plant's history and/or pest and pathogen identification skills.

**Tick** all signs/symptoms that are at abnormal levels or are unexpected for the individual, and are thus cause for concern (e.g. are out of the ordinary/new to the plant). Give a description and an indication of severity/abundance in the **notes**, plus note anything else of importance or interest.

### 1. Flowers and buds

Dead	✓	<b>Notes:</b>
Buds failed to open	✓	
Buds discoloured	✓	
Buds dry up or rot	✓	
Buds/flowers deformed	✓	
Buds/flowers swollen	✓	
Flowers discoloured	✓	
Flowers failed to develop	✓	
Flower heads collapsed	✓	

### 2. Leaves

Dead	✓	Dieback	✓
Thin/sparse	✓	Pustules	✓
Smaller than expected (stunted)	✓	Mosaics / mottled / variation in colour	✓
Sticky	✓	Galls/swellings	✓
Rust	✓	Mildew	✓
Surface growth	✓	Blistering	✓

### 2. Leaf Spots

Single	✓	Numerous	✓
Present only at the edge	✓	All over leaf	✓
Only on old growth	✓	Only on new growth	✓
Yellowing (chlorotic leaves)	✓	Brown/blackening (necrotic leaves)	✓

**Notes:**

### 3. Stem

Staining/discolouration	✓
Wilting	✓
Gummy/sticky residue	✓
Galls/swellings	✓

**Notes:**

### 4. Taproot and Branch Roots

Bootlaces/black strands (1-2mm wide)	✓
Galls/swellings	✓
Mushrooms/toadstools around plant	✓
Damage by mammals	✓
Staining	✓
Decay / rotting	✓

**Notes:**

### 5. General pest damage

		Location (e.g. leaf)
Insect eggs	✓	
Chewing damage	✓	
Insect webbing	✓	
Insect mines (leaves)	✓	
Frass	✓	
Mites seen	✓	

**Notes:**

### 6. Pest sightings

(give an indication of how sure you are of this identification or description if unknown)	Location (e.g. leaf)	Photo (file name)
	✓	
	✓	
	✓	
	✓	
	✓	
	✓	
	✓	

### 7. General Observations and Additional Notes

Reference/file name of any photographs taken:

What do you think is wrong with this plant? <i>(give an indication of how sure you are of this diagnosis)</i>	1.) Is a re-survey required?	✓	2.) If yes, in what timeframe <i>(include a suggested date)</i>	
3.) Should this be reported to the local diagnostic laboratory - a physical sample may be required <i>(this is only if symptoms are severe or if a pest of concern)</i>	✓	3.) Date reported:	4.) Should this be escalated to local <u>National Plant Protection Organisation (NPPO)</u> ? <i>(as advised by local diagnostic laboratory)</i>	✓
				5.) Date reported: