Horticultural Diagnostic Service





Diagnosis is made on the samples received. To make the best use of this service it is important that samples sent are representative of plants in the field, are packaged appropriately and arrive in good condition. Otherwise the diagnosis may be of little help.

I understand that the diagnosis provided is limited to the samples received and that the results may not identify the extent of the problems in the field.

The Minister, his servants and agents accept no liability for any loss incurred as a result of inadequate samples or incorrectly collected samples, damage to the sample during delivery or postage, or any other interference to samples, or inadequate, incorrect or misleading information provided by the client.

I further acknowledge and agree that the results are provided on the basis of such standard testing procedures and scientific information as are currently available to SARDI, and accordingly that the liability of the Minister, his servants and agents is confined to negligence in the application of the said procedures and information.

I understand there is a minimum fee for sample submission and fees are dependent on the test required. I agree to accept all charges for this service.

SIGNED:	Date:/					
PLEASE PRINT CLEARLY						
SUBMITTER INFORMATION: (submitter receives invoice and report)						
Name: Company: Postal Address:						
Suburb/Town:						
Telephone: ()F						
Email:	• •					
Grower/owner name (if different from submitter):						
Send report by: Email Fax Copy report to: (Email)						
SPECIMEN DETAILS:						
Date collected:/ Cultivar:						
Specimen submitted: ☐ leaves ☐ freshly dug tubers ☐	☐ tubers dug over 1 month ago					
Virus ID required ☐ PLRV ☐ TSWV ☐ PVX	□ PVY □ PVS					
Sample details:						
☐ Leaf sample. Number of subsamplesNumber☐ Bulked tuber sample. Total number of tubers☐ Single plant sample	·					
Client ID:						
Express Post to: Horticulture Diagnostics, Plant Research Centre, GPO Box Courier to: Horticulture Diagnostics, Plant Research Centre, Gate 2B Hartley						
DO NOT SEND OVER WEEKENDS OR PUBLIC HOLIDAYS FOR FURTHER INFORMATION OR FOR CURRENT PRICES PLEASE RING 08 8429 2214 OR EMAIL sue.pederick@sa.gov.au or daniele.giblot-ducray@sa.gov.au						
Lab ID No:						
Date Received:						

Dr Daniele Giblot-Ducray Phone: (08) 8429 2229

Daniele.Giblot.Ducray@sa.gov.au

Issue Date: 30th November 2022

Issuing authority: Daniele Giblot-Ducray







Sample details - FOR LABORATORY USE ONLY. Lab ID Number:.....

Well numbers	Sample name	Results – number subsamples positive/total				
		PLRV	TSWV	PVX	PVY	PVS
					0	
			- 1	15		
		OT				
	012					
	13					

SAMPLE RECEIVED BY: Name/Signature
SAMPLE REJECTED:
☐ Leaves too old and necrotic ☐ Sample deteriorated in transit
Grower/submitter contacted: EMAIL VERBAL/PHONE
By: Name/Signature Date/
Lab Comments:
INTERIM REPORT:
Advised: EMAIL VERBAL/PHONE
(name)
By: Name/Signature Date/





