

Field Form

This is one of four hard copy field forms for the national framework for community-based monitoring (CBM) of stream health. **Use this form when collecting water samples for eDNA testing.**

All fields with an asterisk (*) need to be completed for the data to then be entered onto the following ArcGIS Survey123 electronic field form: **CBM (Streams) – eDNA**. The electronic form will complete all necessary calculations.

Stream site visit information		
Group name*:		
Site name*:		
Site visit date*:		
Site arrival time*:		
Observer*:		
Second observer(s):		
General conditions		
Weather*: <ul style="list-style-type: none"> <input type="checkbox"/> Clear <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Overcast <input type="checkbox"/> Drizzle <input type="checkbox"/> Rain 	Wind*: <ul style="list-style-type: none"> <input type="checkbox"/> Calm <input type="checkbox"/> Light <input type="checkbox"/> Moderate <input type="checkbox"/> Strong 	Rain in last 24 hours*? <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Stream conditions		
Stream water level*: <ul style="list-style-type: none"> <input type="checkbox"/> High <input type="checkbox"/> Normal (or base flow) <input type="checkbox"/> Low 	Tick any of the following that you see*: <ul style="list-style-type: none"> <input type="checkbox"/> Stock on banks/in water <input type="checkbox"/> Wildfowl in water <input type="checkbox"/> Local bank erosion <input type="checkbox"/> Surface scums/oil <input type="checkbox"/> Rubbish on banks/in water <input type="checkbox"/> Periphyton (algae) – some <input type="checkbox"/> Periphyton (algae) – a lot <input type="checkbox"/> Macrophytes (aquatic plants) – some <input type="checkbox"/> Macrophytes (aquatic plants) – a lot <input type="checkbox"/> Fish 	
Does the water smell?* <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No 		
Stream water appearance*: <ul style="list-style-type: none"> <input type="checkbox"/> Clear and colourless <input type="checkbox"/> Slightly murky <input type="checkbox"/> Turbid <input type="checkbox"/> Humic-stained <input type="checkbox"/> Other (<i>describe below</i>) 	Comments on any observations: <hr/>	
Photograph(s) of waterway		
Notes:		
Field measurements		
Which of the following are you measuring or taking samples of today?*		
<ul style="list-style-type: none"> <input type="checkbox"/> Macroinvertebrates <input type="checkbox"/> Physical habitat quality 	<ul style="list-style-type: none"> <input type="checkbox"/> Macrophytes (aquatic plants) <input type="checkbox"/> Shade (canopy closure) 	

eDNA sample collection

The best place to sample is in moving water where eDNA is delivered regularly and is well mixed in the water. Take care to avoid contamination – wear gloves and always collect your sample upstream to where you're standing.

Sample collection method(s)*

Active sampling (syringes) – complete Box A
 Passive sampling – complete Box B

Box A: Active (spot syringe) sample collection

Select the number of syringe samples are you collecting at this site and enter the unique ID (UID) number for each?*

The UID number is supplied by the lab with each test kit.

<input type="checkbox"/> 1 Sample UID* _____	<input type="checkbox"/> 4 Sample UID* _____
<input type="checkbox"/> 2 Sample UID* _____	<input type="checkbox"/> 5 Sample UID* _____
<input type="checkbox"/> 3 Sample UID* _____	<input type="checkbox"/> 6 Sample UID* _____

Filtered sample volume*

Enter the volume of water filtered for each sample. Aim for 1,000 mL (1 L) or until the filter is clogged.

Sample 1	mL	Sample 1	mL
Sample 2	mL	Sample 2	mL
Sample 3	mL	Sample 3	mL

Sample collection and handling comments

Briefly outline any issues, including possible contamination, etc. (e.g., dropped filter 2)

Box B: Passive sample collection

Sample collection method(s)*

Peg-mount passive sampler
- select the number of filter pods (sample replicates) are you collecting*
 1 2 3 4 5 6

Manifold-mount passive sampler

Enter the time the sampler will be left to collect eDNA*

24 hours (*recommended*)
 Other (specify) _____ hr

Enter the unique ID (UID) number(s) supplied by the lab?*

<input type="checkbox"/> 1 Sample UID* _____	<input type="checkbox"/> 4 Sample UID* _____
<input type="checkbox"/> 2 Sample UID* _____	<input type="checkbox"/> 5 Sample UID* _____
<input type="checkbox"/> 3 Sample UID* _____	<input type="checkbox"/> 6 Sample UID* _____

Sample collection and handling comments

Briefly outline any issues, including possible contamination, etc. (e.g., dropped filter 2)