FASIG-TIPTON REPOSITORY

SARATOGA SELECTED YEARLING SALE

1. **ALL IMAGES MUST BE TAKEN WITHIN 21 DAYS OF THE FIRST SESSION** AND SUBMITTED IN DICOM 3.0 FORMAT ON EXTERNAL HARD DRIVE/USB DRIVE OR CD (ONE HIP PER CD)

2. ALL IMAGES PER HIP MUST BE IN A SINGLE DICOM FOLDER

3. ALL IMAGES ARE DUE BY NOON – AUGUST 3, 2017 **IN THE LEXINGTON, KY OFFICE, for horses that MUST have x-rays taken on the sales grounds in New York they are due by Thursday August 4th at NOON.** (IF THERE ARE QUESTIONS OR CONCERNS PLEASE CALL MARY BETH AT 859-255-1555)

4. DICOM TAG REQUIREMENTS:

   PATIENT ID = FTNYYMM-XXXX

   FTN = FASIG-TIPTON NEW YORK

   YY = LAST TWO DIGITS OF THE YEAR

   MM = MONTH OF SALE

   XXXX = FULL HIP NUMBER (INCLUDING LEADING ZEROS i.e. 0001

   EXAMPLE: FASIG-TIPTON NY SALE HIP 0001

   PATIENT ID = FTN1708-0001

   PATIENT NAME = DAM NAME

   EXAMPLE: PAPAS DARLING 08

   STUDY DESCRIPTION = NAME OF VETERINARIAN TAKING RADIOGRAPHS

   STUDY DATE = DATE OF X-RAYS

5. LETTERS AND CERTIFICATES ACCOMPANYING A HIP MUST BE DELIVERED TO FASIG-TIPTON REPOSITORY AT THE TIME THE RADIOGRAPHS ARE SUBMITTED

6. TO ACCOMMODATE VIEWING SORT ORDER ALL HIPS MUST BE SUBMITTED WITH THE ANATOMICAL/VIEW INFO ON PAGE 2 – TO SET THIS UP YOU MAY HAVE TO CONTACT YOUR EQUIPMENT REPRESENTATIVE

7. **WHEN DOWNLOADING X-RAYS TO A HARD DRIVE/USB DRIVE OR CD PUT EACH HIP NUMBER IN ITS OWN FOLDER AND IT MUST BE LABELED AS FOLLOWS – hip82 – NO ZEROS OR SPACES BETWEEN HIP AND THE NUMBER WITH THE WORD "hip" IN LOWER CASE**

8. **IN EFFORT TO ENCOURAGE MORE USE OF THE REPOSITORY PRE-SALE AND MORE ACCURATE VETERINARIAN INFORMATION FOR USE ON THE SALES GROUNDS, ALL X-RAYS SUBMITTED TO THE REPOSITORY MUST BE ACCOMPANIED BY A VETERINARIAN X-RAY REPORT. THIS REPORT WILL BE ACKNOWLEDGED AS HAVING BEEN RECEIVED BY THE SALES COMPANY AND THE STAMPED REPORT WILL BE RETURNED TO THE CONSIGNOR. A COPY WILL BE KEPT ON FILE IN THE REPOSITORY AS WELL. THE X-RAY REPORT MUST ALSO DISCLOSE ATTENDING VETERINARIAN'S OWNERSHIP INTEREST IN THE SUBJECT HORSE, IF ANY.**

THE AMERICAN ASSOCIATION OF EQUINE PACTITIONERS (AAEP)
HAS MADE THE FOLLOWING RECOMMENDATIONS FOR FILMS
FOR REPOSITORY PURPOSES

APPROVED RADIOGRAPHIC LABELING NOMANCLATURE

	DICOM TAG LEFT	DICOM TAG RIGHT
EACH CARPUS		
Medial Oblique (30° - 40°)	Left Carpus DMPLO	Right Carpus DMPLO
Lateral Oblique (20° cranial to medial lateral) (very flat)	Left Carpus DLPMO	Right Carpus DLPMO
Flexed Lateral	Left Carpus FLM or Left Carpus_Flexed_LM	Right Carpus FLM or Right Carpus_Flexed_LM
Third carpal skyline – recommended for two-year-olds In training	Left Carpus DPr DDiO	Right Carpus DPr DDiO
FETLOCK		
Front		
AP elevated 15°	Left Front Fetlock DP	Right Front Fetlock DP
Medial Oblique	Left Front Fetlock DMPLO	Right Front Fetlock DMPLO
Lateral Oblique	Left Front Fetlock DLPMO	Right Front Fetlock DLPMO
Flexed Lateral	Left Front Fetlock Flexed LM Or Left Front Fetlock_FLM	Right Front Fetlock Flexed LM OR Right Front Fetlock_FLM
Lateral (Standing Lateral to Medial)	Left Front Fetlock_SLM	Right Front Fetlock_SLM
Hind		
AP elevated 15◦	Left Hind Fetlock DP	Right Hind Fetlock DP
Medial to Lateral Oblique	Left Hind Fetlock DMPLO	Right Hind Fetlock DMPLO
Lateral to Medial Oblique	Left Hind Fetlock DLPMO	Right Hind Fetlock DLPMO
Standing Lateral	Left Hind Fetlock LM	Right Hind Fetlock LM
TARSUS		
Medial Oblique (or 15° PALMO)	Left Tarsus DMPLO	Right Tarsus DMPLO
Off Center AP (slightly lateral)	Left Tarsus DP	Right Tarsus DP
Lateral	Left Tarsus LM	Right Tarsus LM
EACH STIFLE		
Lateral to Medial	Left Stifle LM	Right Stifle LM
20° PALMO (Posterior lateral 20° to anterior medial Oblique should include femoral condyle in its entirety)	Left Stifle Cdl_CrMO	Right Stifle Cdl_CrMO
PA (Posterior/Anterior)	Left Stifle_PA	Right Stifle_PA