

Fasig-Tipton Repository

2020 SELECTED YEARLINGS SHOWCASE

September 9-10, 2020

1. All images must be taken within **21 days prior to the selling date of the horse**. Video scopes (optional) must be taken within **10 days prior to the selling date of the horse**.
2. Radiograph start date:
 Session 1 – Wednesday, August 19
 Session 2 – Thursday, August 20
3. All images must be in a single DICOM folder on an external hard drive or flash drive*:
 One (1) hip per folder labeled as follows: hip28 (lower case, no spaces, no leading zeros)
 ** CDs will no longer be accepted beginning January 1, 2020.*
4. **ALL IMAGES ARE DUE BY NOON – Friday, September 4**
5. DICOM Tag Requirements:
 PATIENT ID = FTKYYMM-XXXX
 FTK = FASIG-TIPTON KENTUCKY
 YY = LAST TWO DIGITS OF THE YEAR
 MM = MONTH OF SALE
 XXXX = FULL HIP NUMBER - INCLUDING LEADING ZEROS i.e. 0001

 Example: FASIG-TIPTON KENTUCKY HIP 0001
 PATIENT ID = FTK2002-0001
 PATIENT NAME = DAM NAME (Example: PAPAS DARLING 08)
 STUDY DESCRIPTION = NAME OF VETERINARIAN/CLINIC TAKING X-RAYS
 STUDY DATE = DATE OF X-RAYS
6. Letters and certificates accompanying a hip must be delivered to Fasig-Tipton Repository at the time the radiographs are submitted.
7. To accommodate viewing sort order, all hips must be submitted with the anatomical/view information as laid out on the following page. You may have to contact your equipment representative to arrange this formatting
8. 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. The report will no longer be made available for review at the Repository; interested parties must obtain the report directly from the consignor. The x-ray report must also disclose attending veterinarian's ownership interest in the subject horse, if any.

FASIG-TIPTON
REMOTE REPOSITORY INSTRUCTIONS

Updated: 06/16/2020

QUICK LINKS

[Remote Access](#)

[Register to View a Study](#)

[Register to Submit a Study](#)

[Terms and Conditions: Two-Year-Old Sales](#)

[Consignor Portal](#)

AAEP Minimum Required Views (create and upload unique doc to ft)

NEW USERS

[Register to View a Study](#)

You will have to register separately for each sale.

[Register to Submit a Study](#)

REPOSITORY ACCESS

Access is restricted to registered vets for the purpose of examining a set of x-rays for a potential buyer or submitting x-rays taken on behalf of a consignor for a horse in the sale.

Details will be provided upon registration for repository access. Please change your password immediately upon initial login.

A username and password is required for viewing x-rays. Credentials for submission are different from credentials for viewing.

[Remote Access Link](#)

If you have forgotten your password, Asteris has online options for recovery to the registered email address. If you experience further difficulty, please contact repository staff via phone or email at repository@fasigtipton.com.

REPOSITORY TERMS AND CONDITIONS

Terms and conditions apply to use of the Fasig-Tipton Online Repository system. By registering to submit and/or view a study using the Fasig-Tipton Online Repository system, you agree to be held bound by the full Terms and Conditions.

Full Terms and Conditions:

[Two-Year-Olds in Training Sales](#)

FASIG-TIPTON
REMOTE REPOSITORY INSTRUCTIONS

TECHNICAL INFORMATION

A modern HTML5 compatible web browser such as Google Chrome is required. Most mobile devices can view the x-rays remotely. Keep in mind that viewing x-rays for diagnostic purposes is better on a larger, high quality screen.

SUBMITTING A STUDY

To [submit a study online](#), please login to the Keystone Community Website. If you have not submitted x-rays before, you will need to [register](#). You can queue many studies via the DICOM service and then submit them as appropriate to each hip.

If you are using Asteris Keystone at your veterinary practice, you may skip this step and find an option in the Asteris Clinic management software to upload instead. For further information about using this feature, please [contact Asteris](#).

To submit a study via a **USB Thumb Drive or USB Hard Drive** please place each study in its own folder/directory named as per the accession number labelling eg: x:\19GPR-0005, x:\19GPT-0012 etc. assuming X: is the letter of the USB device.

LABELLING

It is important to label your study as accurately and completely as possible. When submitting a set of x-rays please be sure to complete the following in your software.

Accession Number/DICOM Tag Requirements – A combination of the sale code and the lot number in 4-digit format as per the following examples.

Patient ID = FTZYMM-XXXX

Z = First letter of state in which sale is held

YY = Last two digits of the sale year

MM = Month of the sale

XXX = Full hip number including leading zeros

Examples:

2020 Kentucky Winter Mixed Hip 44 = FTK2002-0044

2020 Midlantic Two-Year-Olds in Training Hip 200 = FTM2006-0200

2020 Saratoga Fall Sale Hip 12 = FTN2010-0012

Patient Name (named horses aged 3+) – Horse's Name followed by apostrophe and the Year of Birth (YOB)

Example: SONGBIRD '13

Patient Name (horses aged 2 years or less, unnamed horses aged 3+) – Horse's Dam Name follow by an underscore then Horse's Sire Name followed by apostrophe and the Year of Birth (YOB)

Example: BAFFLED_TAPIT '11

FASIG-TIPTON
REMOTE REPOSITORY INSTRUCTIONS

The name of the veterinarian or clinic, date, sex and microchip (if available) are also required to appear in the study; no specific formatting is required.

OVERLAYS

Please export your studies without burnt in overlays on images. Our DICOM viewing software has the option toggle the most relevant tags on/off when viewing. In addition, there is a button to view all tags.

SURGERY REPORTS

If a surgery report is submitted it must be submitted in hard copy format. They should be submitted along with the x-rays where possible, and at least four (4) days prior to the start of the sale.

SCOPING VIDEOS (OPTIONAL)

The videos can be viewed on-site and remotely.

Supported file types: *.asf, *.avi, *.mov, *.mp4, *.mpeg, *.mpg, *.wmv

Recommended file size: There is no limit to video file size. For easy of viewing, it is recommended that file sizes be kept within reason.

Scoping videos must be performed no earlier than 10 days from the actual date the horse is sold.

HANGING PROTOCOLS

Our system is hanging protocol aware and can be customized depending on how effectively the anatomy of the horse can be identified during uploading of the study. If you want the viewing vet to be able to adjust the hanging protocol used we recommend you upload your study and match any images which can't be automatically identified.

Uploading your own studies online allows the submitting vet full control over the process and more accuracy as the automatic options do not always match perfectly.

If you have an x-ray machine that is new to market or recently updated please encourage your machine vendor to contact Asteris so they can work with the vendor to automate the hanging protocol detection system in their software. It is advisable to submit a sample set of x-rays before a sale to help eliminate potential problems.

FOR CONSIGNORS

Consignors can access Fasig-Tipton Online Repository system activity via the [Consignor Portal](#). Repository system activity displayed in the Consignor Portal will include both remote and on-site activity.

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

APPROVED RADIOGRAPHIC LABELING NOMANCLATURE

EACH CARPUS

Medial Oblique (30°-40°)
Lateral Oblique (20° cranial to medial lateral) (very flat)
Flexed Lateral

Third Carpal Skyline (recommended for two-year-olds in training)

DICOM TAG LEFT
Left Carpus DMPLO
Left Carpus DLPMO

Left Carpus FLM or
Left Carpus_Flexed_LM
Left Carpus DPr DDiO

DICOM TAG RIGHT
Right Carpus DMPLO
Right Carpus DLPMO

Right Carpus FLM or
Right Carpus_Flexed_LM
Right Carpus DPr DDiO

FETLOCK

Front

AP elevated 15°
Medial Oblique
Lateral Oblique
Flexed Lateral

Lateral (standing lateral to medial)

Left Front Fetlock DP
Left Front Fetlock DMPLO
Left Front Fetlock DLPMO
Left Front Fetlock Flexed LM or
Left Front Fetlock_FLM
Left Front Fetlock_SLM

Right Front Fetlock DP
Right Front Fetlock DMPLO
Right Front Fetlock DLPMO
Right Front Fetlock Flexed LM or
Right Front Fetlock_FLM
Right Front Fetlock_SLM

Hind

AP elevated 15°
Medial to Lateral Oblique
Lateral to Medial Oblique
Standing Lateral

Left Hind Fetlock DMPLO
Left Hind Fetlock DMPLO
Left Hind Fetlock DLPMO
Left Hind Fetlock LM

Right Hind Fetlock DMPLO
Right Hind Fetlock DMPLO
Right Hind Fetlock DLPMO
Rind Hind Fetlock LM

TARSUS

Medial Oblique (or 15° PALMO)
Off Center AP (slightly lateral)
Lateral

Left Tarsus DMPLO
Left Tarsus DP
Left Tarsus LM

Right Tarsus DMPLO
Right Tarsus DP
Right Tarsus LM

EACH STIFLE

Lateral to Medial
20° PALMO (posterior lateral 20° to anterior medial oblique should include femoral condyle in its entirety)
PA (posterior/anterior)

Left Stifle LM
Left Stifle Cdl_CrMO

Left Stifle_PA

Right Stifle LM
Right Stifle Cdl_CrMO

Right Stifle_PA