Fasig-Tipton Repository

# MIDLANTIC DECEMBER MIXED & HORSES OF RACING AGE

December 7, 2021

1. All images must be taken within **21 days prior to the selling date of the horse**.

# 2. SCOPING VIDEOS MUST BE PERFORMED NO EARLIER THAN 10 DAYS FROM THE ACTUAL DATE THE HORSE IS SOLD. <u>PLEASE STATE THE HORSE ID CREDENTIALS AT THE COMMENCEMENT OF THE</u> <u>VIDEO RECORDING.</u>

3. Radiograph start date:

Session 1 – Tuesday, November 16

- 4. ALL IMAGES ARE DUE BY NOON FRIDAY, DECEMBER 3
- 5. REPOSITORY WILL BE OPEN FOR VIEWING: MONDAY, DECEMBER 6 8am-5pm
- 6. All images must be in a single DICOM folder and submitted to the Fasig-Tipton Repository through Asteris. We will continue to accept information onsite, if needed.

One (1) hip per folder labeled as follows: hip28 (lower case, no spaces, no leading zeros)

7. DICOM Tag Requirements:

PATIENT ID = FTMYYMM-XXXX FTM = FASIG-TIPTON MARYLAND YY = LAST TWO DIGITS OF THE YEAR MM = MONTH OF SALE XXXX = FULL HIP NUMBER - INCLUDING LEADING ZEROS i.e. 0001

Example: FASIG-TIPTON MARYLAND HIP 0001

PATIENT ID = FTM2112-0001 PATIENT NAME = DAM NAME (Example: PAPAS DARLING 08) STUDY DESCRIPTION = NAME OF VETERINARIAN/CLINIC TAKING X-RAYS STUDY DATE = DATE OF X-RAYS

8. Letters and certificates associated with a hip must be in PDF format and submitted to Fasig-Tipton Repository through Asteris.

- 9. To accommodate viewing sort order all hips must be submitted with the anatomical/view information on the following page. You may have to contact your equipment representative to arrange this formatting.
- 10. All x-rays submitted to the repository must be accompanied by a veterinarian x-ray report. This report will be date & time stamped and will be made available to the consignor in the Fasig-Tipton Client Portal. 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.
- 11. Consignors can access Fasig-Tipton Online Repository system activity via the Client Portal. Repository system activity displayed in the Client Portal will include both remote and on-site activity.

Updated: 03/19/2021

#### **QUICK LINKS**

Remote Access

Register to View a Study

**Register to Submit a Study** 

Terms & Conditions of Sale: General | Midlantic Two-Year-Olds in Training

**Client Portal** 

AAEP Minimum Required Views

#### **NEW USERS**

Register to View a Study Please email request to register to view a study to: marylandrepository@fasigtipton.com

#### 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.

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 <u>marylandrepository@fasigtipton.com</u>

# **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.

# **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 <u>submit a study online</u>, please login to the Keystone Community Website. If you have not submitted xrays before, you will need to <u>register</u>. 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 <u>contact Asteris</u>.

# 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 = FTZYYMM-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:** Horse's Name OR Dam and last 2 digits of Year of Birth (YOB) Example: SPRING DANCE 20

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 <u>WITH burnt in overlays on images</u>. 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.

# ALL REPORTS

All reports must be submitted in PDF format through Asteris. They should be submitted along with the x-rays where possible.

# **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 a 100MB limit to video file size. For ease of viewing, it is recommended that file sizes be kept within reason.

Recommended: For ease of viewing, please state the horse <u>ID credentials at the commencement of the</u> video recording.

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 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 review their Repository submissions & activities via the <u>Client Portal</u>.
- The repository system displayed in the <u>Client Portal</u> will include both remote and on-site activity.
- Consignors may add as many individual users to their <u>Client Portal</u> account as necessary.
- Each individual user will be able to customize the text/email alerts they would like to receive, relating to repository activity as well as many other aspects of their consignment.

Updated: 09/28/2020

#### **QUICK LINKS**

Remote Access

Register to View a Study

**Register to Submit a Study** 

Terms & Conditions of Sale: General | Midlantic 2YO & Gulfstream Sale | California Sales

**Consignor Portal** 

AAEP Minimum Required Views

#### **NEW USERS**

<u>Register to View a Study</u> 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**

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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 <u>submit a study online</u>, please login to the Keystone Community Website. If you have not submitted xrays before, you will need to <u>register</u>. 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 <u>contact Asteris</u>.

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.

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Patient ID = FTZYYMM-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:

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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

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.

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#### FOR CONSIGNORS

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#### MINIMUM REQUIRED VIEWS

# FOR FILMS AND REPOSITORY PURPOSES

#### APPROVED RADIOGRAPHIC LABELING NOMENCLATURE

CARPUS Medial/Lateral Oblique (20°- 30°) (Dorsomedial 25°, Palmar Lateral Oblique) Lateral/Medial Oblique (30 - 40°) (Dorsolateral 35°, to Palmar Medial Oblique) Flexed Lateral (Flexed lateral to Medial) Third Carpal Skyline (recommended for two-year-olds in training)	DICOM TAG LEFT L Carpus_DMPLO L Carpus_DLPMO L Carpus_FLM L Carpus_Sky_DRow	<u>DICOM TAG RIGHT</u> R Carpus_DMPLO R Carpus_DLPMO R Carpus_FLM R Carpus_Sky_DRow
<u>FETLOCK</u>		
Front: AP elevated 15° (Dorsal, 15° elevated to palmar) Medial Oblique (Dorsomedial 30°, to palmar lateral oblique) Lateral Oblique (Dorsolateral 30°, to palmar medial oblique) Lateral (Flexed Lateral to Medial) Lateral (Standing Lateral to Medial) Hind: AP elevated 15° (Dorsal, 15° elevated, to plantar) Medial Oblique (Dorsomedial 30°, 15° elevated, to plantar lateral oblique) Lateral Oblique (Dorsolateral 30°, 15° elevated to plantar medial oblique) Standing (Lateral to medial)	L FFetlock_DP L FFetlock_DMPLO L FFetlock_DLPMO L FFetlock_FLM L FFetlock_SLM L HFetlock_DP L HFetlock_DMPLO L HFetlock_DLPMO L HFetlock_LM	R FFetlock_DP R FFetlock_DMPLO R FFetlock_DLPMO R FFetlock_FLM R FFetlock_SLM R HFetlock_DP R HFetlock_DMPLO R HFetlock_DLPMO R HFetlock_LM
HOCKMedial/Lateral Oblique (or 15° PALMO) (Dorsomedial 65° to plantar lateral oblique) or (Plantaro-lateral 25° to dorsomedial oblique) Off Center AP (slightly lateral) (Dorsolateral 10° to plantar medial) Lateral to medial	L Hock_DMPLO L Hock_DP L Hock_LM	R Hock_DMPLO R Hock_DP R Hock_LM
STIFLE		
Lateral to Medial 20° PALMO (posterior lateral 20° to anterior medial oblique should include medial femoral condyle in its entirety) PA (posterior/anterior)	L Stifle_LM L Stifle_CaLCrMO L Stifle_PA	R Stifle_LM R Stifle_CaLCrMO R Stifle_PA