

THE GULFSTREAM SALE Selected Two-Year-Old's in Training

Gulfstream Park
Hallandale Beach, Florida
March 30, 2022
Under Tack Show March 28th, 2022

REPOSITORY INFORMATION

- ALL RADIOGRAPHS MUST BE TAKEN AFTER THE UNDER-TACK SHOW.
- SCOPING VIDEOS may be performed no earlier than 10 days (March 20th) from actual date horse is sold.
 - PLEASE STATE THE HORSE ID CREDENTIALS AT THE COMMENCEMENT OF THE VIDEO RECORDING.
- All images are due in the repository by 4pm MONDAY, March 28^{th.}
- PLEASE review submitting veterinarian instructions.
- The repository will be open for viewing:
 - Tuesday March 29th 2:00pm − 5:00pm onsite.
 - Wednesday March 30th 8:00am End of Sale
- ALL XRAYS, REPORTS, DOCUMENTS AND SCOPE VIDEOS <u>SHOULD BE SUBMITTED</u>
 THROUGH ASTERIS

Important Contact information:

repository@fasigtipton.com 859-255-1555 contact Asteris 877-7ASTERIS (877-727-8374)

Updated: 12/08/2021

SUBMITTING VETERINARIAN

NEW USERS

Register to Submit a Study

SUBMITTING A STUDY

To <u>submit a study online</u>, please login to the Keystone Community Website. If you have not submitted x-rays 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 contact Asteris.

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. Terms & Conditions of Sale: Conditions of sale

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 XXXX = Full hip number including leading zeros

Example:

2022 Florida Gulfstream Sale Hip 44 = FTF2203-0044

FASIG-TIPTON

REMOTE REPOSITORY INSTRUCTIONS

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 are specific formatting is required.

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.

REQUIRED VIEWS

AAEP Minimum Required Views

To accommodate viewing sort order all hips must be submitted with the anatomical/view information. You may have to contact your equipment representative to arrange this formatting.

ALL REPORTS

All reports must be submitted in <u>PDF format</u> through Asteris. They should be submitted along with the x-rays where possible, and at least four (4) days prior to the start of the sale. <u>Register to Submit a Study</u> The veterinary report will no longer be made available for review at the repository. The x-ray report must also disclose attending veterinarian's ownership interest in the subject horse, if any.

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 ID credentials at the commencement of the video recording.

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

All video scopes can be submitted through Asteris.

HANGING PROTOCOLS

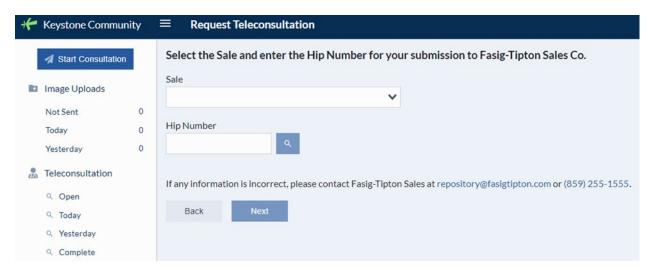
Our system is hanging protocol aware and can be customized depending on how effectively the anatomy of the horse can identified during uploading of the study. If you want the viewing vet to be able to adjust the hanging protocol used we recommend you upload your study and match any images which can't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

- 1. See below for submitting radiograph studies and reports:
 - a. https://keystone.asteris.com/#/login





VIEWING VETERINARIAN

NEW USERS

Register to View a Study

Please email request to register to view a study to: repository@fasigtipton.com

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 repository@fasigtipton.com

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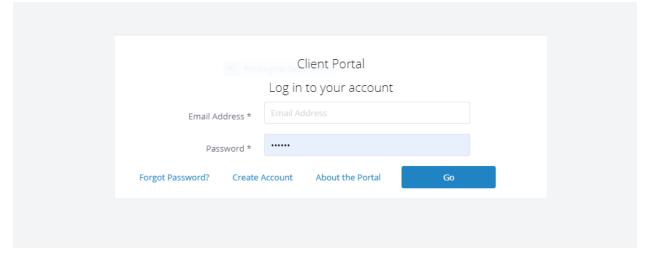
TECHNICAL INFORMATION

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.

CONSIGNOR INFORMATION

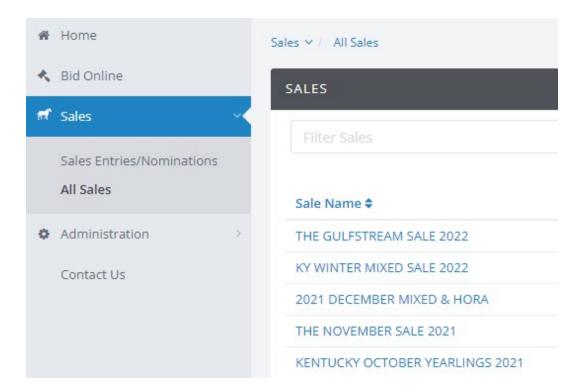
 Consignors can review and print their x-ray reports via the Client Portal. https://www.fasigtipton.com/forms/consignors

Login with your username and password.



Select the current sale and then Repository.

For Printing reports, select summary. A register of each horse will be shown with a green check. Click on each check mark to open & print or save report on your device.



- All x-rays submitted to the repository must be accompanied by a veterinarian x-ray report. This report will be date & time stamped following the approval process and will be made available to the consignor in the Fasig-Tipton Client portal. 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.
- Consignors can review their Repository submissions & activities via the Client Portal.
- 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.
- Terms & Conditions of Sale: <u>Conditions of sale</u>

MINIMUM REQUIRED VIEWS

FOR FILMS AND REPOSITORY PURPOSES

APPROVED RADIOGRAPHIC LABELING NOMENCLATURE

CARPUS Medial/Lateral Oblique (20°- 30°)	DICOM TAG LEFT	DICOM TAG RIGHT
(Dorsomedial 25°, Palmar Lateral Oblique)	L Carpus_DMPLO	R Carpus_DMPLO
Lateral/Medial Oblique (30 - 40°)	L Carpus_DLPMO	R Carpus_DLPMO
(Dorsolateral 35°, to Palmar Medial Oblique)	L Carpus_FLM	R Carpus_FLM
Flexed Lateral (Flexed lateral to Medial)	L Carpus_Sky_DRow	R Carpus_Sky_DRow
Third Carpal Skyline (recommended for two-year-olds in training)		
FETLOCK		
Front:		
AP elevated 15° (Dorsal, 15° elevated to palmar)	L FFetlock_DP	R FFetlock_DP
Medial Oblique (Dorsomedial 30°, to palmar lateral oblique)	L FFetlock_DMPLO	R FFetlock_DMPLO
Lateral Oblique (Dorsolateral 30°, to palmar medial oblique)	L FFetlock_DLPMO	R FFetlock DLPMO
Lateral (Flexed Lateral to Medial)	L FFetlock_FLM	R FFetlock_FLM
Lateral (Standing Lateral to Medial)	L FFetlock_SLM	R FFetlock_SLM
Hind:	L UEstlank DD	
AP elevated 15° (Dorsal, 15° elevated, to plantar)	L HFetlock_DP	R HFetlock_DP
Medial Oblique (Dorsomedial 30°, 15° elevated, to plantar lateral oblique)	L HFetlock_DMPLO L HFetlock DLPMO	R HFetlock_DMPLO
Lateral Oblique (Dorsolateral 30°, 15° elevated to plantar medial oblique)	L HFetlock_LM	R HFetlock_DLPMO R HFetlock_LM
Standing (Lateral to medial)		KTII CHOCK_LIVI
НОСК		
Medial/Lateral Oblique (or 15° PALMO)		
(Dorsomedial 65° to plantar lateral oblique) or	L Hock_DMPLO	R Hock_DMPLO
(Plantaro-lateral 25° to dorsomedial oblique)	L Hock_DP	R Hock_DP
Off Center AP	L Hock_LM	R Hock_LM
(slightly lateral) (Dorsolateral 10° to plantar medial)		
Lateral to medial		
STIFLE		
Lateral to Medial	L Stifle_LM	R Stifle_LM
20° PALMO (posterior lateral 20° to anterior medial oblique	L Stifle_CaLCrMO	R Stifle_CaLCrMO
should include medial femoral condyle in its entirety)	L Stifle_PA	R Stifle_PA
PA (posterior/anterior)		566_17.