



REPOSITORY

2026 CANADIAN PREMIER YEARLING SALE

Participation by Consignors is voluntary.

Submission deadline Monday, August 31 at 12:00 noon.

HOURS

The Repository will be open to veterinarians of prospective buyers as follows:

Monday,	August 31	12:00 noon to 5:00 pm
Tuesday	September 1	8:00 am to 5:00 pm
Wednesday	September 2	8:00 am to close of the sale

VIEWING REQUIREMENTS

- All Repository information will be maintained in the Repository and cannot be removed from that location.
- Any veterinarian wanting to view the Repository information must complete a CTHS form identifying him/herself and the hip number of the horse.
- No copies of Repository information can be made.
- Radiographic viewers in the Repository area are only to be used for review radiographs maintained in the repository.

CONSIGNOR REQUIREMENTS (INCLUDING OWNERS)

- The Consignor will determine the nature and extend of such information and shall be responsible for its accuracy.
- All of the minimum required views must be on file.
- All information must be marked by hip number.
- Consignors are entitled to review a list of persons who have inspected endoscopic videos submitted by or on behalf of the Consignor, including the name of the buyer/client on whose behalf the video was viewed.
- All Repository items must be removed within 24 hours of the sale and can only be released to the authorized agent.

BUYER REQUIREMENTS (INCLUDING AGENTS)

- Buyers are strongly urged to make personal examinations of horses as the Repository information is intended to supplement that process and not to be a substitute.
- No Repository information can be taken from the uploading location.
- In reviewing the information, there can be no collaboration or advice provided by others who are not their client(s).
- The Repository is for use by licensed veterinarians on behalf of their buyer/clients. Access to a Consignor's Repository information may be denied to non-veterinarians.

ACCEPTABLE INFORMATION

1. Radiographs must be taken **no earlier than 22 days of the sale date** (August 11) and uploaded no later than Monday, August 31 at 12:00 noon
2. All digital radiographs must include:
 - hip number of the horse
 - dam
 - last 2 digits of foaling year
 - date of the x-rays
3. All digital radiographs must be submitted in DICOM format and all images for a hip must be included in a single DICOM study.
4. The use of the Repository is voluntary, however, if used, Consignors must submit a minimum of 36 views as listed below.
5. Additional information/material that will be accepted in the Repository includes, but is not limited to, the following veterinary statements describing:
 - any joint surgery known by the Seller or Consignors
 - any impairment of vision or injury to the eye
 - abdominal surgery except surgery to repair a ruptured bladder in a foal
 - endoscopic examinations
 - locomotor ataxia (wobbler syndrome)

CONDITIONS

- CTHS will not review the Repository information and makes no warranty or assurance of any kind concerning its completeness or accuracy.
- Consignor will determine the nature and extent of Repository information and be responsible for its accuracy.
- If Consignors fail to precisely describe a condition known to them, or a warranted condition is not described in the Repository, the Buyer may dispute and possibly rescind the sale.
- The sale will be governed by the Conditions of Sale and the Acknowledgement of Purchase.
- The Repository is intended to be a service available to buyers and Consignors to promote openness and confidence in the sales process.

MINIMUM REQUIRED FILMS FOR SALES REPOSITORY

EACH CARPUS (left & right):

- Lateral/Medial Oblique (30° - 40°) (Dorsolateral 35°, to palmar medial oblique)
- Medial/Lateral Oblique (20° - 30°) (Dorsolateral 25°, to palmar lateral oblique)
- Flexed Lateral (Flexed lateral to medial)

EACH FETLOCK (left & right):

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)
- Standing Lateral (Standing lateral to medial)

HIND:

- AP elevated 15° (Dorsal, 15° elevated, to palmar)
- Medial Oblique (Dorsomedial 30°, 15° to palmar lateral oblique)
- Lateral Oblique (Dorsolateral 30°, 15° to palmar medial oblique)
- Standing Lateral to Medial

Obliques should be elevated slightly to separate the sesamoid and PI interface.

EACH HOCK (left & right):

- Medial/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

EACH STIFLE (left & right):

- Lateral to Medial
- 20° PALMO (Posterior lateral 20° to anterior medial oblique must include medial femoral condyle in it's entirety).
- PA (Posterior/Anterior)

LABELING

Standard markers for radiographic views are always lateral unless there is no lateral aspect, then they are placed anteriorly. For oblique views, the marker is located posteriorly on a (DLPMO) lateral oblique and anteriorly on a (DMPLO) medial oblique. For an AP view, the marker is located laterally and for a lateral view, the marker is located anteriorly.