



4747 SW 60<sup>th</sup> Avenue  
 Ocala, Florida 34474  
 Tel: (352) 237-6151  
 Fax (352) 237-0629  
 E-mail: [PSEH@petersonsmith.com](mailto:PSEH@petersonsmith.com)

P.M. Matthews, DVM  
 J.K. Hahn, DVM  
 D.E. Slone, DVM, DACVS  
 W.B. Russell, DVM  
 F.E. Hughes, DVM, DACVS  
 C.K. Clark, DVM, DACVIM  
 T.M. Lynch, DVM, DACVS  
 N.R. Mitts, DVM  
 K.R. Meeks, DVM

J.L. Peterson, DVM  
 A.B. Riggs, DVM  
 R.D. Rood, DVM  
 A.S. Cayot, DVM  
 T.M. Thacker, DVM  
 E.A. Evans, DVM  
 L. F. Cadena, DVM  
 R.M. McFarlin, DVM

*A Tradition of Leadership and Excellence in Equine Medicine*

**RADIOGRAPHIC INTERPRETATION**

|           |                        |       |            |
|-----------|------------------------|-------|------------|
| NAME      | CITY SIREN 19          | DATE  | 2SEP20     |
| CONSIGNOR | WOODFORD THOROUGHBREDS | HIP # | K2009-2508 |
| DVM       | NR MITTS               | SITES | REPOSITORY |

The clinically significant radiographic findings\* are listed below:

|                    |                                |
|--------------------|--------------------------------|
| Left fore fetlock  | NSA                            |
| Right fore fetlock | NSA                            |
| Left knee          | NSA                            |
| Right knee         | NSA                            |
| Left hind fetlock  | NSA                            |
| Right hind fetlock | NSA                            |
| Left hock          | NSA                            |
| Right hock         | NSA                            |
| Left stifle        | NSA                            |
| Right stifle       | NSA                            |
| study provider     | Russell Equine Sports Medicine |
|                    |                                |
| Read by            | Nathan R. Mitts                |
| Signature          | <i>NATHAN R. MITTS</i>         |

\* NSA = no significant abnormalities

These radiographs were taken as a survey of the most common sites for a lesion. They are not, nor are they meant to be a complete examination of the joints taken. They will identify approximately 90% of the common lesions. To identify the remaining infrequent lesions or to provide complete coverage of all joints would require many more views. These survey views usually represent the best combination of coverage and economics.