

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

C Number:	C02686
Cage Range:	All
Date Range:	All
Reasons For Removal:	All
Removal Date Range:	All
Treatment Groups:	All
Study Gender:	Female

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_001

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_002

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Carcinoma
Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:26

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_003

TRT#: 1

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_004

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:26

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_005

TRT#: 1

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Ovary
Uterus

Capsule
Ileum

Hyperplasia, Nos
Amyloid, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_006

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_007

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Inflammation, Interstitial
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_008

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_009

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Salivary gland

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos
Inflammation, Chronic
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

Unspecified
Uterus

Multiple Organs Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_010

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Inflammation, Chronic Focal
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_011

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_012

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Congestion, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_013

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Spleen
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Carcinoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_014

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Unspecified
Uterus

Capsule
Pleura Nos

Hyperplasia, Nos
Fibrosarcoma, Invasive
Cyst, Nos
Fibrosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_015

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_016

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lymph node
Peritoneum

Mesenteric Lymph Node

Inflammation, Nos
Abscess, Nos
Inflammation, Focal
Inflammation, Nos

Spleen

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_017

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Congestion, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_018

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Spleen
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Hemangioma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_019

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_020

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_021

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_022

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Cyst, Nos
Leiomyoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_023

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_024

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Necrosis, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_025

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Spleen
Unspecified

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Atelectasis
Hematopoiesis
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_026

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_027

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_028

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_029

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Hematopoiesis
Cyst, Hemorrhagic
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_030

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_031

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_032

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Spleen

Capsule
Ileum

Hyperplasia, Nos
Papilloma, Nos
Hematopoiesis
Lymphocytosis

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_033

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Heart
Liver
Mammary gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic
Leukemoid Reaction
Adenocarcinoma, Nos
Hematopoiesis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_034

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver

Capsule

Hyperplasia, Nos
Angiectasis
Necrosis, Nos
Cyst, Nos
Cyst, Nos

Ovary
Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_035

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Unspecified
Uterus

Capsule
Mesenteric Lymph Node
Multiple Organs Nos

Hyperplasia, Nos
Congestion, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_036

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Cortex Nos
Capsule

Congestion, Nos
Hyperplasia, Nos
Lymphocytosis
Cyst, Nos

Spleen

Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_037

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Carcinoma
Inflammation, Interstitial
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_038

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node

Capsule
Mesenteric Lymph Node
Mesenteric Lymph Node
Mesenteric Lymph Node

Spleen
Stomach
Uterus

Hyperplasia, Nos
Congestion, Nos
Hemosiderosis
Lymphocytosis
Hemangiosarcoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:26

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_039

TRT#: 1

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_040

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Liver

Capsule
Ileum

Mesenteric Lymph Node

Lymph node
Spleen
Uterus

Hyperplasia, Nos
Inflammation, Granulomatous
Fibrosis
Necrosis, Nos
Congestion, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_041

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule
Cortex Nos

Hyperplasia, Nos
Metamorphosis, Fatty
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_042

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Skin
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_043

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_044

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_045

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_046

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_047

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_048

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_049

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_050

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_051

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_052

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Cortical Adenoma

Hyperplasia, Nos

Ovary

Cyst, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_053

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Hemorrhagic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_054

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_055

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_056

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Thyroid
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Carcinoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:26

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_057

TRT#: 1

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_058

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_059

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Ovary

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_060

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Liver
Lung
Spleen
Uterus

Capsule
Ileum

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Hepatocellular Adenoma
Hemorrhage
Hemangioma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_061

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_062

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Ovary
Spleen
Uterus

Capsule
Mesentery Nos

Hyperplasia, Nos
Necrosis, Fat
Inflammation, Acute
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_063

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_064

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Ovary
Stomach
Unspecified
Uterus

Capsule
Hardarian Gland

Forestomach
Multiple Organs Nos

Hyperplasia, Nos
Adenoma, Nos
Cyst, Hemorrhagic
Squamous Cell Carcinoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_065

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver

Capsule

Hyperplasia, Nos
Cyst, Nos
Fibrosis
Inflammation, Chronic
Inflammation, Interstitial
Cyst, Nos
Cyst, Nos

Lung
Ovary
Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_066

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_067

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary

Cyst, Hemorrhagic
Teratoma, Benign
Hydrometra

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_068

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Liver		Infarct, Nos
Lung		Congestion, Nos
Lymph node	Mesenteric Lymph Node	Inflammation, Nos
Ovary		Cyst, Nos
Pancreas		Inflammation, Acute
Spleen		Hematopoiesis

PRIMARY CAUSE OF DEATH -

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_069

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Eye
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Inflammation, Acute
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_070

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Spleen
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Inflammation, Interstitial
Cyst, Nos
Hematopoiesis
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_071

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Lung		Hemorrhage
Lymph node	Mesenteric Lymph Node	Plasmacytosis
Spleen		Lymphocytosis
Thymus		Lymphocytosis
Uterus		Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_072

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Spleen
Unspecified
Uterus

Multiple Organs Nos

Hematopoiesis
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_073

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hemangiosarcoma
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_074

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hematopoiesis
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_075

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_076

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_077

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_078

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_079

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_080

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Ovary
Spleen
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_081

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_082

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_083

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_084

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen

Capsule

Hyperplasia, Nos
Cyst, Nos
Hematopoiesis
Lymphocytosis
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

Unspecified
Uterus

Multiple Organs Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_085

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_086

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_087

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_088

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_089

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_090

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_091

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lung
Ovary
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Atelectasis
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_092

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule
Cortex Nos

Hyperplasia, Nos
Metamorphosis, Fatty
Adenoma, Nos
Cyst, Nos

Thyroid

Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_093

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pancreas
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_094

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Spleen
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Hemangiosarcoma
Cyst, Nos
Hemangiosarcoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_095

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_096

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_097

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_098

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule
Cortex Nos

Hyperplasia, Nos
Hyperplasia, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:26

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_099

TRT#: 1

DOSE: 0

SEX: Female

DISP: Scheduled Sacrifice

DAY ON TEST:

HISTO:

OBSERVATIONS

Lung

Uterus

Atelectasis

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_100

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Spleen
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_101

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Hematopoiesis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_102

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_103

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Atelectasis

Ovary
Uterus

Pleural Cavity Nos

Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_104

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hepatocellular Adenoma
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_105

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_106

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_107

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_108

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_109

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_110

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_111

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_112

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Congestion, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_113

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Nos
Papillary Cystadenoma, Nos
Cyst, Nos
Polyp, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_114

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_115

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_116

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Atelectasis
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_117

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_119

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_120

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_121

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Atelectasis
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_122

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_123

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_124

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_125

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_126

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_127

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos Lymphoma, Lymphocytic-Malignant Type
Kidney	Capsule	Fibrosis
Liver	Capsule	Fibrosis
Lung		Congestion, Nos
Spleen	Capsule	Fibrosis
Thyroid		Carcinoma, Nos
Uterus		Adenoma, Nos Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_128

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Brain
Uterus

Capsule
Thalamus

Hyperplasia, Nos
Mineralization
Cyst, Nos
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_129

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Lung

Capsule
Ileum

Hyperplasia, Nos
Adenocarcinoma, Nos
Alveolar/Bronchiolar Adenoma
Congestion, Nos
Cyst, Nos
Cyst, Nos

Ovary
Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_130

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pituitary gland

Capsule

Hyperplasia, Nos
Chromophobe Adenoma
Cyst, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_131

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Kidney		Inflammation, Chronic Focal
Ovary		Hemangioma
Spleen		Hematopoiesis
Unspecified	Multiple Organs Nos	Lymphoma, Lymphocytic-Malignant Type
Uterus		Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_132

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_133

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_134

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_135

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_136

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_137

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_138

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_139

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_140

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Liver		Necrosis, Nos
Spleen		Hematopoiesis
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type
Uterus		Leiomyosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:26

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_141

TRT#: 1

DOSE: 0

SEX: Female

DISP: Scheduled Sacrifice

DAY ON TEST:

HISTO:

OBSERVATIONS

Adrenal gland

Spleen

Uterus

Capsule

Hyperplasia, Nos

Lymphoma, Histiocytic-Malignant Type

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_142

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Hyperplasia, Nodular
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_143

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_144

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_145

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Harderian gland
Lung
Uterus

Hardarian Gland

Carcinoma, Nos
Carcinoma, Nos, Metastatic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_146

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen

Capsule

Hyperplasia, Nos
Lymphocytosis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_147

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_148

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Liver		Necrosis, Nos
Ovary		Cyst, Nos
Spleen		Hematopoiesis
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type
Uterus		Cyst, Hemorrhagic
		Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_149

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_150

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_151

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_152

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Necrosis, Nos
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_153

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Cytoplasmic Change, Basophilic
Ovary	Cyst, Nos
Uterus	Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_154

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_155

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hydrometra
Metaplasia, Squamous

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_156

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_157

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Regeneration, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_158

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_159

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Mammary gland

Pheochromocytoma, Malignant
Adenocarcinoma, Nos
Adenoma, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_161

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hepatocellular Adenoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_162

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung
Spleen
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Alveolar/Bronchiolar Adenoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_163

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_164

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_165

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hemorrhage
Hemosiderosis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_166

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_167

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_168

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Parathyroid gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_169

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Unspecified
Uterus

Capsule
Mesenteric Lymph Node
Multiple Organs Nos

Hyperplasia, Nos
Congestion, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_170

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Necrosis, Nos
Cyst, Nos
Hemangioma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_171

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_172

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_174

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_175

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary

Uterus

Capsule

Hyperplasia, Nos
Hematopoiesis
Cyst, Hemorrhagic
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_176

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
	Cortex Nos	Metamorphosis, Fatty
Lymph node	Mesenteric Lymph Node	Congestion, Nos
Ovary		Cyst, Nos
Thyroid		Adenoma, Nos
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type
Uterus		Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_177

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_178

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_179

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_180

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Pancreas
Spleen
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Atrophy, Focal
Hematopoiesis
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_181

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Unspecified
Uterus

Capsule

Hyperplasia, Nos
Hematopoiesis
Fibrosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_182

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Lymphocytosis
Lymphocytosis
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_183

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Nephrosis, Hydro
Carcinoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_184

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule
Cortex Nos

Hyperplasia, Nos
Metamorphosis, Fatty
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

Ovary
Spleen
Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_185

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Lymph node
Unspecified
Uterus

Capsule
Mediastinal Lymph Node
Multiple Organs Nos

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Necrosis, Focal
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_187

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_188

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_189

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Cortex Nos

Metamorphosis, Fatty
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_190

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_191

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_192

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Carcinoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_193

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_194

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Atelectasis
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_195

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Liver		Hepatocellular Adenoma
Ovary		Cyst, Nos
Spleen		Hematopoiesis
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type
Uterus		Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_196

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule
Cortex Nos

Hyperplasia, Nos
Metamorphosis, Fatty
Cyst, Nos
Adenoma, Nos
Cyst, Nos

Ovary

Thyroid

Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_197

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_198

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_199

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_200

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_201

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Mammary gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Necrosis, Nos
Adenocarcinoma, Nos
Hematopoiesis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_202

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_203

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_204

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_205

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_206

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung
Pituitary gland
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Atelectasis
Chromophobe Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_207

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule
Cortex Nos

Hyperplasia, Nos
Metamorphosis, Fatty
Adenoma, Nos
Cyst, Nos

Thyroid

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_208

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_209

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:26

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_210

TRT#: 1

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_211

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Lung		Inflammation, Interstitial
Ovary		Cyst, Nos
Pancreas	Islets	Islet-Cell Adenoma
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type
Uterus		Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_212

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Inflammation, Interstitial
Inflammation, Chronic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_213

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Liver		Fibrosarcoma, Metastatic
Lung		Fibrosarcoma, Metastatic
Ovary		Cyst, Nos
Spleen		Hematopoiesis
Unspecified		Fibrosarcoma

PRIMARY CAUSE OF DEATH -

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_214

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Liver
Uterus

Capsule
Ileum

Hyperplasia, Nos
Leiomyosarcoma
Leiomyosarcoma, Metastatic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_215

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_216

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Alveolar/Bronchiolar Carcinoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_217

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

Unspecified

Hemangiosarcoma

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_218

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_219

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Lymph node
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Atelectasis
Congestion, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_220

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_221

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung
Ovary

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Atelectasis
Cyst, Nos
Hemangioma
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

Unspecified
Uterus

Multiple Organs Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_222

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pancreas

Capsule

Hyperplasia, Nos
Atrophy, Focal
Cyst, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_223

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_225

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_226

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_227

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_228

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Osteosarcoma, Metastatic
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_229

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hematopoiesis
Cyst, Nos
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_230

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:26

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_231

TRT#: 1

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_232

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:26
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_233

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_234

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_235

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_236

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Spleen

Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_237

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Ovary
Spleen
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_238

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Ovary

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Hemorrhagic
Cyst, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_239

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Cortical Adenoma

Hyperplasia, Nos

Spleen

Hemangiosarcoma

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_240

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Spleen
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_241

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Nasal cavity
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Hemorrhage
Cyst, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_242

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_243

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Nasal cavity
Ovary
Uterus

Capsule

Hyperplasia, Nos
Hemorrhage
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_244

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Hemorrhage
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_245

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hemangioma
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_246

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Thyroid
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Cyst, Hemorrhagic
Adenoma, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_247

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_248

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_249

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_250

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Large
Uterus

Capsule
Large Intestine, Colon

Hyperplasia, Nos
Leiomyosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_251

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lung
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Alveolar/Bronchiolar Adenoma
Cyst, Hemorrhagic
Hematopoiesis
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_252

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Unspecified

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Inflammation, Interstitial
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_253

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Unspecified
Uterus

Capsule
Ileum
Multiple Organs Nos

Hyperplasia, Nos
Diverticulum
Lymphoma, Histiocytic-Malignant Type
Carcinoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_254

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Lymphocytosis
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_255

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_256

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Unspecified

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_257

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_258

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:27

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_259

TRT#: 1

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_260

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Hemorrhage
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_261

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_262

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Nos
Thrombosis, Nos
Hematopoiesis
Cyst, Nos

Spleen
Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_263

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_264

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_265

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule
Cortex Nos

Hyperplasia, Nos
Metamorphosis, Fatty
Chromophobe Adenoma
Cyst, Nos

Pituitary gland

Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_266

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_267

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_268

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_269

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung
Ovary
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Inflammation, Chronic Focal
Atelectasis
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_270

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_271

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_273

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_274

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_275

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Hemorrhage
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_276

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hemangiosarcoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_277

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node

Capsule
Mesenteric Lymph Node
Mesenteric Lymph Node

Hyperplasia, Nos
Hemorrhage
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_278

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_279

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Thyroid
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Adenoma, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_280

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Fibrosis, Focal

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_281

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_282

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Mammary gland
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Hyperplasia, Lymphoid
Adenocarcinoma, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_283

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Lymph node
Skin
Spleen
Unspecified

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Atelectasis
Congestion, Nos
Edema, Nos
Hematopoiesis
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_284

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Mammary gland
Ovary
Pituitary gland
Uterus

Capsule

Hyperplasia, Nos
Galactocele
Cyst, Nos
Chromophobe Carcinoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_285

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_286

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_287

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_289

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:27

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_290

TRT#: 1

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:27

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_291

TRT#: 1

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Natural Death

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Lung

Congestion, Nos

Uterus

Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_292

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:27

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_293

TRT#: 1

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_294

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Lung		Hemorrhage
Ovary		Cyst, Nos
Trachea		Hemorrhage
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type
Uterus		Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_295

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Leiomyosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_296

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_297

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Inflammation, Chronic Focal
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_298

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pituitary gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Chromophobe Adenoma
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_299

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_300

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Hematopoiesis
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_301

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_302

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_303

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pancreas
Unspecified
Uterus

Capsule
Islets
Multiple Organs Nos

Hyperplasia, Nos
Islet-Cell Carcinoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_304

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Heart
Kidney
Lung

Uterus

Capsule
Atrium

Hyperplasia, Nos
Thrombus, Mural
Inflammation, Chronic Focal
Alveolar/Bronchiolar Adenoma
Hemorrhage
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_305

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_306

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_307

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_308

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_309

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Unspecified
Uterus

Capsule

Hyperplasia, Nos
Hematopoiesis
Fibrosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_310

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_311

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_312

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_313

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_314

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Lymphoma, Lymphocytic-Malignant Type
Cyst, Hemorrhagic
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_315

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_316

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_317

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_318

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Hemorrhagic
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_319

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Carcinoma
Carcinoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_320

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_321

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos
Hemangiosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_322

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_323

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_324

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_325

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Hepatocellular Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_326

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:27

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_327

TRT#: 1

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Ovary

Cyst, Nos

Spleen

Lymphoma, Histiocytic-Malignant Type

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_328

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_329

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Atelectasis
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_330

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Mammary gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Adenocarcinoma, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_331

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Hemangiosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_332

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Thyroid
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Adenoma, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_333

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_334

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_335

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_336

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos
Sarcoma, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_337

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Spleen
Thymus
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Lymphocytosis
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_338

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Liver
Lung
Ovary
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Inflammation, Chronic Focal
Hepatocellular Adenoma
Atelectasis
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_339

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary
Uterus

Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_340

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Thyroid
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Adenoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_341

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_342

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_343

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_344

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_345

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pancreas
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_346

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_347

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Hemangiosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_348

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_349

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_350

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_351

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_352

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:27

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_353

TRT#: 1

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_354

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_355

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Hematopoiesis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_356

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_357

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Carcinoma, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_358

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_359

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Bone
Harderian gland
Ovary
Uterus

Capsule
Sternum
Hardarian Gland

Hyperplasia, Nos
Hemangiosarcoma, Metastatic
Adenoma, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_361

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pituitary gland
Spleen
Unspecified

Capsule

Hyperplasia, Nos
Chromophobe Adenoma
Hematopoiesis
Fibrosarcoma
Lymphoma, Lymphocytic-Malignant Type

Multiple Organs Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_362

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_363

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_364

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_365

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Necrosis, Nos
Cyst, Nos
Cyst, Nos
Hydrometra
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_366

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Ovary
Unspecified
Uterus

Capsule
Hardarian Gland

Multiple Organs Nos

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_367

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

Spleen
Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_368

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_369

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Kidney		Inflammation, Chronic Focal
Lymph node	Mesenteric Lymph Node	Inflammation, Nos
Uterus		Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_370

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_371

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Liver
Lung
Ovary

Spleen
Unspecified

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Necrosis, Nos
Osteosarcoma, Metastatic
Cyst, Hemorrhagic
Cyst, Nos
Hematopoiesis
Osteosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_372

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_373

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lung
Ovary

Capsule

Hyperplasia, Nos
Infarct, Nos
Hemorrhage
Cyst, Hemorrhagic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_374

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_375

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_376

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Necrosis, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_377

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_378

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_379

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hepatocellular Adenoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_380

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_381

TRT#: 1
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_382

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_383

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_384

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_385

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_386

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hepatocellular Adenoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_387

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_388

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Ovary
Uterus

Capsule
Thymic Lymph Node

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_389

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_390

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_391

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_392

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_393

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Necrosis, Nos
Cyst, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_394

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_395

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_396

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Spleen
Unspecified

Multiple Organs Nos

Hematopoiesis
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_397

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_398

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Ovary
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_399

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_400

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_401

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Pituitary gland

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Congestion, Nos
Chromophobe Adenoma
Cyst, Hemorrhagic
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_402

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lung
Spleen

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Hemorrhage
Hematopoiesis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_403

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_404

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Unspecified

Multiple Organs Nos

Fibrosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_405

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_406

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Unspecified
Uterus

Capsule
Harderian Gland
Multiple Organs Nos

Hyperplasia, Nos
Adenoma, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:27

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_407

TRT#: 1

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_408

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Ovary
Pituitary gland
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Congestion, Nos
Cyst, Nos
Chromophobe Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_409

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_410

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_411

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_412

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Thyroid
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Adenoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_413

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_414

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_415

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Inflammation, Interstitial
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_416

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Congestion, Nos
Leiomyoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_417

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_418

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_419

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_420

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_421

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_422

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Unspecified

Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Hematopoiesis
Fibrosarcoma
Fibrosarcoma, Metastatic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_423

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung
Unspecified

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Inflammation, Chronic Focal
Alveolar/Bronchiolar Adenoma
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_424

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_425

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_426

TRT#: 1
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_427

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Unspecified

Cortex Nos

Hyperplasia, Nos

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_428

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_429

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_430

TRT#: 1
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_451

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Carcinoma
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_452

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_453

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_454

TRT#: 2
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_455

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_457

TRT#: 2
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Heart		Necrosis, Focal
Liver		Necrosis, Nos
Ovary		Cyst, Hemorrhagic
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_458

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_459

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_460

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:27

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_462

TRT#: 2

DOSE: 0

SEX: Female

DISP: Scheduled Sacrifice

DAY ON TEST:

HISTO:

OBSERVATIONS

Ovary

Uterus

Cyst, Nos

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_463

TRT#: 2
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Mammary gland
Spleen

Capsule

Hyperplasia, Nos
Adenocarcinoma, Nos, Metastatic
Adenocarcinoma, Nos
Hematopoiesis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_464

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Unspecified
Uterus

Capsule
Shoulder

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Fibrosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_465

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_466

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_467

TRT#: 2
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_468

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_469

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_470

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Carcinoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_471

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_472

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Carcinoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_473

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Kidney
Uterus

Capsule
Mesentery Nos

Hyperplasia, Nos
Inflammation, Granulomatous
Inflammation, Chronic Focal
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_474

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_475

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:27

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_476

TRT#: 2

DOSE: 0

SEX: Female

DISP: Natural Death

DAY ON TEST:

HISTO:

OBSERVATIONS

Adrenal gland

Liver

Thyroid

Pheochromocytoma

Metamorphosis, Fatty

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_477

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_478

TRT#: 2
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_480

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_481

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Hepatocellular Carcinoma
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_482

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_483

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hemangiosarcoma
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_484

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule

Hyperplasia, Nos
Fibrosarcoma

Uterus

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_485

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_486

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_487

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_488

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Spleen
Unspecified

Capsule
Ileum
Multiple Organs Nos

Hyperplasia, Nos
Ulcer, Nos
Hematopoiesis
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_489

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Ovary
Skin
Unspecified
Uterus

Capsule
Hardarian Gland

Multiple Organs Nos

Hyperplasia, Nos
Adenoma, Nos
Cyst, Hemorrhagic
Edema, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Hemorrhagic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_490

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_491

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_492

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_493

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_494

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos
Hematopoiesis
Cyst, Nos

Spleen
Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_495

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Thyroid
Uterus

Capsule

Hyperplasia, Nos
Hemorrhage
Cyst, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_496

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos
Inflammation, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_497

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_498

TRT#: 2
DOSE: 0

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Cyst, Nos Hepatocellular Carcinoma Metamorphosis, Fatty
Ovary	Cyst, Nos
Spleen	Hematopoiesis
Uterus	Cyst, Hemorrhagic

PRIMARY CAUSE OF DEATH -

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_499

TRT#: 2
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Metaplasia, Osseous
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_500

TRT#: 2
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lung
Unspecified

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Necrosis, Nos
Hemorrhage
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_501

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_502

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_503

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_504

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_505

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_506

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_507

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Alveolar Macrophages
Alveolar/Bronchiolar Carcinoma
Bronchopneumonia, Acute

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_508

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_509

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_510

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Large
Uterus

Capsule
Large Intestine, Colon

Hyperplasia, Nos
Leiomyosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_511

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_512

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Unspecified

Capsule

Multiple Organs Nos
Multiple Organs Nos

Hyperplasia, Nos
Hematopoiesis
Fibrosarcoma
Fibrosarcoma, Metastatic
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_513

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_514

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_515

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_516

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_517

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Ovary
Spleen
Unspecified

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Hematopoiesis
Hemangiosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_518

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Leiomyosarcoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_519

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Hematopoiesis
Hemorrhage
Hydrometra
Inflammation, Nos
Ulcer, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_520

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_521

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_522

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Mast-Cell Sarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_523

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_524

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_525

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_526

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_527

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_528

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pituitary gland
Uterus

Capsule

Hyperplasia, Nos
Chromophobe Carcinoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_529

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_530

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Carcinoma, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_531

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_532

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_533

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_534

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_535

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_536

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_537

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_538

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_540

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_541

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_542

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver

Capsule

Hyperplasia, Nos
Ectopia
Inflammation, Chronic

Lymph node
Ovary
Spleen
Uterus

Mesenteric Lymph Node

Lymphocytosis
Cyst, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_543

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_544

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_545

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Metamorphosis, Fatty
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_546

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Unspecified
Uterus

Capsule

Hyperplasia, Nos
Hematopoiesis
Fibrosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_548

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_550

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_552

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_553

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Hemorrhage
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_554

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_555

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Unspecified

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_556

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_557

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:27
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_558

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_559

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_560

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_561

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Carcinoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_562

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Unspecified

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Cyst, Hemorrhagic
Hematopoiesis
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_563

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_564

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_565

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_566

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Metaplasia, Osseous
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_567

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_568

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_569

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_570

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

Unspecified

Multiple Organs Nos

Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_571

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_572

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_573

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_574

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Uterus

Capsule
Mesentery Nos

Hyperplasia, Nos
Necrosis, Fat
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_575

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_576

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_577

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Blood vessel
Kidney
Uterus

Capsule
Pulmonary Artery Nos

Hyperplasia, Nos
Sarcoma, Nos, Metastatic
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_578

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Eye
Uterus

Capsule

Hyperplasia, Nos
Phthisis Bulbi
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:28

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_579

TRT#: 3

SEX: Female

DAY ON TEST:

DOSE: 200 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Spleen

Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_580

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_581

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Stomach
Uterus

Capsule

Forestomach

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos
Squamous Cell Papilloma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_582

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:28

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_583

TRT#: 3

SEX: Female

DAY ON TEST:

DOSE: 200 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_584

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Mammary gland
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Adenocarcinoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_585

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_587

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Atelectasis
Congestion, Nos
Cyst, Nos
Cyst, Nos

Ovary
Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_588

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_589

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Necrosis, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_590

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Skin
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Edema, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_591

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Stomach
Uterus

Capsule
Forestomach

Hyperplasia, Nos
Squamous Cell Carcinoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_592

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_593

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_594

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Atelectasis
Congestion, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_595

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_596

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_597

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_598

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hematopoiesis
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_600

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_601

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_602

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_603

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Granulosa-Cell Tumor
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_604

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_605

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Carcinoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_606

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_607

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_608

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_609

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary

Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Carcinoma
Cyst, Nos
Necrosis, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_610

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_611

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung
Ovary
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_612

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_613

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node

Capsule
Mesenteric Lymph Node
Mesenteric Lymph Node

Spleen
Unspecified

Multiple Organs Nos

Uterus

Hyperplasia, Nos
Cyst, Hemorrhagic
Lymphocytosis
Hematopoiesis
Fibrosarcoma
Fibrosarcoma, Metastatic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_614

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_615

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_616

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Skin
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Edema, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Hemorrhagic
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_618

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_619

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_620

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_621

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Lung
Lymph node
Uterus

Capsule
Hardarian Gland

Mesenteric Lymph Node

Hyperplasia, Nos
Adenoma, Nos
Atelectasis
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_622

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_623

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Lung
Nasal cavity
Ovary
Uterus

Hardarian Gland

Pheochromocytoma
Adenoma, Nos
Hemorrhage
Hemorrhage
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_624

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_625

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Cytoplasmic Change, Eosinophilic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_626

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver

Capsule

Hyperplasia, Nos
Clear-Cell Change
Cyst, Nos

Unspecified
Uterus

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_627

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_628

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_629

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_630

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_631

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_632

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_633

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_634

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Hemangioma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_635

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule
Cortex Nos
Cortex Nos

Hyperplasia, Nos
Hyperplasia, Nos
Metamorphosis, Fatty
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_636

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_637

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Mammary gland

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Galactocele

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_638

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pituitary gland
Spleen
Unspecified
Uterus

Capsule

Hyperplasia, Nos
Chromophobe Adenoma
Hematopoiesis
Fibrosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_639

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_640

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Large
Spleen
Uterus

Capsule
Large Intestine, Colon

Hyperplasia, Nos
Leiomyosarcoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_642

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_643

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_644

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_645

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Kidney		Necrosis, Nos
Liver		Necrosis, Nos
Ovary		Thrombosis, Nos
Spleen		Hematopoiesis
Uterus		Cyst, Nos
		Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_646

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_647

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_648

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lymph node
Mammary gland
Uterus

Capsule

Mesenteric Lymph Node

Hyperplasia, Nos
Inflammation, Chronic Focal
Lymphoma, Histiocytic-Malignant Type
Adenocarcinoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_649

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_650

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Cytoplasmic Change, Eosinophilic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_651

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver

Capsule

Hyperplasia, Nos
Inflammation, Chronic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_652

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Leiomyosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_653

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Thyroid
Unspecified

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Hematopoiesis
Cyst, Ultimobranchial
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_654

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_655

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_656

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_657

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_658

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Nephrosis, Hydro
Lymphoma, Histiocytic-Malignant Type
Carcinoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_659

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Leiomyosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_660

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_661

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_662

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_663

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_664

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_665

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_666

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lung
Uterus

Capsule

Hyperplasia, Nos
Necrosis, Nos
Congestion, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_667

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_668

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_669

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_670

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Liver
Unspecified
Uterus

Capsule
Hardarian Gland

Multiple Organs Nos

Hyperplasia, Nos
Adenoma, Nos
Necrosis, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_671

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Alveolar/Bronchiolar Carcinoma
Cyst, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_672

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Uterus

Capsule
Ileum

Hyperplasia, Nos
Amyloidosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_673

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Spleen
Uterus

Hemangiosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_674

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_675

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Pancreas
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:28

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_676

TRT#: 3

SEX: Female

DAY ON TEST:

DOSE: 200 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_677

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Interstitial
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_678

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Cortex Nos
Capsule

Cyst, Nos
Hyperplasia, Nos

Ovary

Cyst, Nos

Unspecified

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_679

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Spleen
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_680

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_681

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Mineralization
Cyst, Nos
Leiomyosarcoma

Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_682

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Pancreas
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_683

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_685

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lung Alveolar/Bronchiolar Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_686

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Brain
Lung
Ovary
Pituitary gland
Uterus

Capsule

Hyperplasia, Nos
Atrophy, Pressure
Inflammation, Interstitial
Cyst, Nos
Chromophobe Carcinoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_687

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hematopoiesis
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_688

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Congestion, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_689

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pituitary gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Chromophobe Adenoma
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_690

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Cortical Adenoma

Hyperplasia, Nos

Ovary

Cyst, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_691

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Alveolar/Bronchiolar Carcinoma
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_692

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_693

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_694

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_695

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_696

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_697

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_698

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_699

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Mammary gland

Capsule

Hyperplasia, Nos
Congestion, Nos
Adenocarcinoma, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_700

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Hydrometra
Leiomyosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_701

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_702

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Ovary

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Congestion, Nos
Cyst, Hemorrhagic
Cyst, Nos
Hematopoiesis
Cyst, Hemorrhagic

Spleen
Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_704

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_705

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Stomach
Uterus

Capsule
Forestomach

Hyperplasia, Nos
Squamous Cell Carcinoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_706

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_707

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lymph node
Uterus

Capsule

Mesenteric Lymph Node

Hyperplasia, Nos
Inflammation, Chronic Focal
Necrosis, Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_708

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_709

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Kidney		Inflammation, Chronic Focal
Liver		Necrosis, Nos
Spleen		Hematopoiesis
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type
Uterus		Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_710

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_711

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Large
Unspecified
Uterus

Capsule
Large Intestine, Colon
Multiple Organs Nos

Hyperplasia, Nos
Parasitism
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_712

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver

Capsule

Hyperplasia, Nos
Leukemoid Reaction
Necrosis, Nos
Hematopoiesis
Cyst, Nos

Spleen
Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_713

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule
Cortex Nos

Hyperplasia, Nos
Hyperplasia, Nos

Ovary

Cyst, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_715

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_716

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_717

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_718

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_719

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_720

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Unspecified

Cortex Nos

Metamorphosis, Fatty

Uterus

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type

Cyst, Nos

Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_721

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Stomach

Cortex Nos

Metamorphosis, Fatty

Uterus

Forestomach

Squamous Cell Carcinoma

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_722

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Cyst, Hemorrhagic
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_723

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_724

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_725

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_726

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule

Hyperplasia, Nos
Adenosquamous Carcinoma
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

Uterus

Multiple Organs Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_727

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_728

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Spleen
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Hemorrhage
Hematopoiesis
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_729

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_730

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_731

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Plasmacytosis
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_732

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Spleen
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_733

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Mammary gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Adenocarcinoma, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_734

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pituitary gland
Uterus

Capsule

Hyperplasia, Nos
Chromophobe Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_735

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Unspecified

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_736

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Pituitary gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Chromophobe Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_737

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_738

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_739

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_740

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_741

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_742

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_743

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_744

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_745

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_746

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_747

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_748

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_749

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_750

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Nephropathy
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_751

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Hemosiderosis

Pancreas
Uterus

Islets

Islet-Cell Carcinoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_752

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_753

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Kidney
Ovary
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Inflammation, Chronic Focal
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_754

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Unspecified

Uterus

Capsule
Multiple Organs Nos

Cortical Adenoma
Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_755

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_756

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hematopoiesis
Lymphoma, Lymphocytic-Malignant Type
Cyst, Hemorrhagic
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_757

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_758

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_759

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_760

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_761

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_762

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Inflammation, Acute

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_763

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_764

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_765

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_766

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Ovary
Unspecified
Uterus

Capsule
Hardarian Gland

Multiple Organs Nos

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_767

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Hemorrhagic
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_768

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_769

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_770

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_771

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_772

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Congestion, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_773

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_774

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_775

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_776

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Pancreas

Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos
Atrophy, Focal
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_777

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Unspecified
Uterus

Capsule
Harderian Gland
Multiple Organs Nos

Hyperplasia, Nos
Adenoma, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_778

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_779

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_781

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Liver
Lymph node
Uterus

Capsule

Mesenteric Lymph Node

Hyperplasia, Nos
Inflammation, Chronic Focal
Hepatocellular Carcinoma
Congestion, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_782

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_783

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_784

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Thyroid
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Adenoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_785

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Spleen

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Teratoma, Malignant
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_786

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Hemangioma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_787

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Liver		Leukemoid Reaction
Lung		Atelectasis
Lymph node	Mesenteric Lymph Node	Hyperplasia, Reticulum Cell
Ovary		Leiomyosarcoma
Spleen		Hematopoiesis
Uterus		Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_788

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_789

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_790

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hemangiosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_791

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_792

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Spleen
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Accessory Structure
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_793

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_794

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_795

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Spleen
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_796

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Cortical Adenoma

Lung

Unspecified

Uterus

Multiple Organs Nos

Hyperplasia, Nos

Atelectasis

Lymphoma, Histiocytic-Malignant Type

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_797

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver

Capsule

Hyperplasia, Nos
Angiectasis
Necrosis, Nos
Hematopoiesis
Ulcer, Nos
Cyst, Nos
Inflammation, Nos
Polyp, Nos

Spleen
Stomach
Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_798

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos
Pheochromocytoma
Congestion, Nos

Lymph node

Mesenteric Lymph Node

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_799

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_800

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_801

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_802

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_803

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_804

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Spleen
Uterus

Capsule
Ileum, Ileum

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Hematopoiesis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_805

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_806

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Pancreas

Uterus

Capsule

Hyperplasia, Nos
Atelectasis
Cyst, Nos
Necrosis, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_807

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Interstitial
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_808

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Ovary

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Lymphocytosis
Cyst, Nos
Hemosiderosis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_809

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Thymus
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_810

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Eye
Liver
Lung
Spleen
Uterus

Capsule
Lacrimal Gland

Hyperplasia, Nos
Inflammation, Chronic
Inflammation, Chronic
Alveolar/Bronchiolar Adenoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_811

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_812

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Large
Kidney
Lung
Unspecified
Urinary bladder
Uterus

Capsule
Rectum

Multiple Organs Nos

Hyperplasia, Nos
Hemangiosarcoma
Inflammation, Chronic Focal
Atelectasis
Lymphoma, Lymphocytic-Malignant Type
Lymphocytosis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_813

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_815

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Accidentally Killed

DAY ON TEST:
HISTO:

OBSERVATIONS

Lung

Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_816

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Hemorrhagic
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_817

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Cortical Adenoma
Hyperplasia, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_818

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Spleen
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Congestion, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_819

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_820

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Lymph node
Ovary
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Hemorrhage
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_821

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_822

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_823

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_824

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_825

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hematopoiesis
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_826

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_827

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

Spleen
Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_828

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_829

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lung
Unspecified

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Hepatocellular Adenoma
Atelectasis
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_830

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_831

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Pituitary gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Chromophobe Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_832

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Hemorrhage
Cyst, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_833

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_834

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_835

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_836

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_837

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Cortical Adenoma

Hyperplasia, Nos

Liver

Hepatocellular Carcinoma

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_839

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Nos
Hemosiderosis
Inflammation, Acute
Chromophobe Adenoma
Lymphoma, Histiocytic-Malignant Type
Hydrometra

Pituitary gland
Unspecified
Uterus

Multiple Organs Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_840

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_841

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_843

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_844

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_845

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_846

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_847

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lung
Unspecified

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Necrosis, Nos
Atelectasis
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_848

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Pituitary gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Chromophobe Adenoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_849

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Ovary
Uterus

Capsule
Ileum

Hyperplasia, Nos
Amyloidosis
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_850

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Heart
Intestine Large
Unspecified

Capsule
Atrium
Large Intestine, Colon
Multiple Organs Nos

Hyperplasia, Nos
Thrombus, Mural
Parasitism
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_851

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_852

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Kidney
Liver
Lung
Skin
Unspecified
Uterus

Capsule
Hardarian Gland

Multiple Organs Nos

Cervix Uteri

Hyperplasia, Nos
Carcinoma, Nos
Degeneration, Hyaline
Necrosis, Nos
Carcinoma, Nos, Metastatic
Edema, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Leiomyosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_853

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Ovary
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Plasmacytosis
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_854

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Inflammation, Chronic Focal
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_855

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos
Pheochromocytoma
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_856

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_857

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Ovary
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_858

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_859

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_860

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_861

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Cortical Adenoma
Hyperplasia, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_863

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_864

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Hematopoiesis
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_865

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_866

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Lung
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:28
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_867

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_868

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Harderian gland
Uterus

Hardarian Gland

Adenoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_869

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_870

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Spleen
Unspecified
Uterus

Capsule

Hyperplasia, Nos
Fibrosarcoma, Metastatic
Hematopoiesis
Fibrosarcoma
Cyst, Hemorrhagic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_871

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_872

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Lung
Ovary
Pituitary gland
Unspecified
Uterus

Capsule
Intestinal Villus, Ileum

Multiple Organs Nos

Hyperplasia, Nos
Adenoma, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Chromophobe Adenoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_873

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_874

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Mammary gland
Ovary

Uterus

Capsule

Hyperplasia, Nos
Inflammation, Interstitial
Adenocarcinoma, Nos
Cyst, Hemorrhagic
Cyst, Nos
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_875

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Spleen

Capsule

Hyperplasia, Nos
Necrosis, Nos
Hemosiderosis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_876

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_877

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Lymph node

Capsule
Harderian Gland
Mandibular Lymph Node

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_878

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_879

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_880

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Pancreas
Peritoneum
Spleen

Capsule

Hyperplasia, Nos
Cyst, Nos
Inflammation, Acute
Inflammation, Acute
Hematopoiesis

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_881

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lung	Alveolar/Bronchiolar Adenoma
Uterus	Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_882

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung

Capsule

Hyperplasia, Nos
Nephropathy
Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_883

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_884

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hemangiosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_885

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lung
Uterus

Capsule

Hyperplasia, Nos
Necrosis, Nos
Inflammation, Interstitial
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_886

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_887

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_888

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Ovary

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Congestion, Nos
Congestion, Nos
Cyst, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_889

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_890

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_891

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Congestion, Nos
Papillary Cystadenoma, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

Unspecified
Uterus

Multiple Organs Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_894

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pituitary gland
Spleen
Thyroid
Uterus

Capsule
Intermedia

Hyperplasia, Nos
Adenoma, Nos
Lymphoma, Histiocytic-Malignant Type
Carcinoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_895

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_896

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lymph node
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Hepatocellular Adenoma
Plasmacytosis
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_897

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_898

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Pituitary gland
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Carcinoma
Cyst, Nos
Chromophobe Carcinoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_899

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Papillary Adenocarcinoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_900

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_901

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_902

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_903

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_904

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_905

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_906

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_907

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Large
Uterus

Capsule
Large Intestine, Colon

Hyperplasia, Nos
Leiomyosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_908

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Cortical Adenoma

Hyperplasia, Nos

Lung

Alveolar/Bronchiolar Adenoma

Spleen

Hemangioma

Thyroid

Adenoma, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_910

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_911

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Kidney		Pigmentation, Nos
Ovary		Teratoma, Malignant
Pancreas		Atrophy, Focal
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_912

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_913

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_914

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Cervix Uteri

Hyperplasia, Nos
Cyst, Nos
Leiomyosarcoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_915

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_916

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_917

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_918

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_919

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_920

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Atelectasis
Cyst, Hemorrhagic
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_921

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_922

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Necrosis, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_923

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary		Cyst, Nos
Unspecified	Multiple Organs Nos	Lymphoma, Lymphocytic-Malignant Type
Uterus		Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_924

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Eye

Capsule

Hyperplasia, Nos
Inflammation, Granulomatous
Phthisis Bulbi

Harderian gland
Lung
Ovary
Spleen
Uterus

Hardarian Gland

Adenoma, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_925

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_926

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Nephrosis, Hydro
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_927

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_928

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Liver
Lung
Spleen

Capsule
Ileum

Hyperplasia, Nos
Amyloidosis
Hepatocellular Carcinoma
Hepatocellular Carcinoma, Metastatic
Hemangiosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_929

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Thyroid
Uterus

Capsule

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_930

TRT#: 3
DOSE: 200 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_001

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_002

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Thyroid
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Adenoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_003

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_004

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hemangiosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_005

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Lymph node
Ovary
Uterus

Capsule
Harderian Gland
Mesenteric Lymph Node

Hyperplasia, Nos
Adenoma, Nos
Congestion, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_006

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_007

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_008

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Lymph node
Spleen
Unspecified
Uterus

Capsule

Mediastinal Lymph Node

Hyperplasia, Nos
Fibrosarcoma, Metastatic
Fibrosarcoma, Metastatic
Hematopoiesis
Fibrosarcoma
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_009

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_00A

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_010

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hepatocellular Adenoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_011

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Lung
Spleen
Unspecified
Uterus

Capsule
Ileum

Multiple Organs Nos

Hyperplasia, Nos
Ulcer, Nos
Inflammation, Interstitial
Hematopoiesis
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_012

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Unspecified
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hematopoiesis
Fibrosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_013

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Liver

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Hepatocellular Carcinoma
Infarct, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_014

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Spleen
Uterus

Capsule

Hyperplasia, Nos
Leukemoid Reaction
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_015

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_018

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Unspecified
Uterus

Capsule
Harderian Gland
Multiple Organs Nos

Hyperplasia, Nos
Adenoma, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_019

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_020

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Inflammation, Chronic Focal
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_021

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_022

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Pancreas
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_023

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_024

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_025

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule

Hyperplasia, Nos
Thrombosis, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_026

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_027

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Large
Uterus

Capsule
Large Intestine, Colon

Hyperplasia, Nos
Parasitism
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_028

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lymph node

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Inflammation, Acute Focal
Plasmacytosis

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_030

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Hemorrhage
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_031

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_033

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_035

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Liver		Hemangiosarcoma
Ovary		Cyst, Nos
Spleen		Hemangiosarcoma
Uterus		Cyst, Nos

PRIMARY CAUSE OF DEATH -

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_036

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_037

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_038

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver

Capsule

Hyperplasia, Nos
Cyst, Nos
Hemangioma
Necrosis, Nos
Cyst, Nos
Hematopoiesis
Lymphoma, Histiocytic-Malignant Type

Ovary
Spleen

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_039

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 4_040

TRT#: 4

SEX: Female

DAY ON TEST:

DOSE: 400 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Lung

Alveolar/Bronchiolar Adenoma

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_041

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_042

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Peritoneum
Uterus

Capsule

Hyperplasia, Nos
Necrosis, Nos
Steatitis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_043

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Ovary
Unspecified

Capsule
Hardarian Gland
Multiple Organs Nos

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_044

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Hemangiosarcoma
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_045

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_046

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Skin
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Edema, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_047

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Unspecified

Cortex Nos

Congestion, Nos
Atelectasis
Hemangiosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_048

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hemangioma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_049

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_050

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_051

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Spleen
Thyroid
Unspecified
Uterus

Capsule

Hyperplasia, Nos
Leiomyosarcoma, Metastatic
Hematopoiesis
Adenoma, Nos
Leiomyosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_052

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_053

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_054

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_056

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
	Cortex Nos	Inflammation, Acute Focal
Intestine Small	Ileum	Ulcer, Nos
Kidney		Inflammation, Acute Focal
Lymph node		Hematopoiesis
	Mesenteric Lymph Node	Necrosis, Focal
		Plasmacytosis
Ovary		Cyst, Nos
Pancreas		Inflammation, Acute Focal
Spleen		Hematopoiesis
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type
Uterus		Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 4_057

TRT#: 4

SEX: Female

DAY ON TEST:

DOSE: 400 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Ovary

Cyst, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_059

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_060

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Mammary gland
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Adenocarcinoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_061

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_062

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Kidney
Liver
Ovary
Uterus

Capsule
Ileum

Hyperplasia, Nos
Ulcer, Nos
Inflammation, Chronic Focal
Cytoplasmic Change, Eosinophilic
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_063

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hemorrhage
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_064

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_065

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_066

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Alveolar/Bronchiolar Carcinoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_067

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_068

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Large
Liver

Capsule
Large Intestine, Colon

Hyperplasia, Nos
Parasitism
Angiectasis
Necrosis, Nos
Hematopoiesis
Cyst, Nos

Spleen
Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_069

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Unspecified
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Fibrosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_070

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Thyroid
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_071

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Cortex Nos	Amyloidosis
	Capsule	Hyperplasia, Nos
Intestine Small	Ileum	Amyloidosis
Kidney	Glomerulus	Amyloidosis
Lung		Atelectasis
		Fibrosarcoma, Metastatic
Lymph node	Mesenteric Lymph Node	Lymphoma, Histiocytic-Malignant Type
Spleen		Hematopoiesis
Unspecified		Fibrosarcoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_072

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_073

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Spleen
Unspecified
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Plasmacytosis
Hyperplasia, Lymphoid
Fibrosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_074

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Kidney
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_075

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_076

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_077

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Spleen
Uterus

Capsule

Hyperplasia, Nos
Metamorphosis, Fatty
Hematopoiesis
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_078

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_079

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pituitary gland

Capsule

Hyperplasia, Nos
Chromophobe Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_080

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney

Capsule

Hyperplasia, Nos
Degeneration, Hyaline
Inflammation, Chronic Focal
Hematopoiesis
Lymphoma, Histiocytic-Malignant Type

Spleen
Unspecified

Multiple Organs Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_081

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_082

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Large
Uterus

Capsule
Large Intestine, Colon

Hyperplasia, Nos
Parasitism
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_083

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lung

Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_084

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Mammary gland
Spleen

Capsule

Hyperplasia, Nos
Leukemoid Reaction
Adenocarcinoma, Nos
Hematopoiesis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_085

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_086

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_087

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_088

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Kidney		Degeneration, Hyaline
Spleen		Hematopoiesis
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_089

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_090

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_091

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pancreas

Capsule

Hyperplasia, Nos
Cyst, Nos
Fibrosis
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_092

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Harderian gland
Liver
Uterus

Hardarian Gland

Adenoma, Nos
Necrosis, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 4_093

TRT#: 4

SEX: Female

DAY ON TEST:

DOSE: 400 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Spleen

Hemangiosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_095

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Unspecified

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Hematopoiesis
Fibrosarcoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_096

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_097

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung
Spleen
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Atelectasis
Hemangiosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_099

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 4_100

TRT#: 4

SEX: Female

DAY ON TEST:

DOSE: 400 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Kidney
Lung
Ovary

Spleen
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Inflammation, Chronic Focal
Alveolar/Bronchiolar Adenoma
Cyst, Hemorrhagic
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_951

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_952

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Unspecified
Uterus

Capsule
Harderian Gland
Multiple Organs Nos

Hyperplasia, Nos
Carcinoma, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_953

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Ovary
Unspecified
Uterus

Capsule
Hardarian Gland

Multiple Organs Nos

Hyperplasia, Nos
Adenoma, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_954

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_956

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung
Ovary
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Inflammation, Chronic Focal
Atelectasis
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_957

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_958

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_959

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_960

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Papillary Cystadenoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_961

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver
Unspecified

Multiple Organs Nos

Uterus

Hepatocellular Adenoma
Lipoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_962

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_963

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_964

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_965

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Lung
Uterus

Capsule
Ileum

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Alveolar/Bronchiolar Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_966

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Kidney
Uterus

Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_967

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Spleen
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_968

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_969

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Cytoplasmic Change, Eosinophilic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_972

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_973

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_974

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lymph node
Mammary gland
Uterus

Capsule

Mesenteric Lymph Node

Hyperplasia, Nos
Hepatocellular Adenoma
Congestion, Nos
Adenocarcinoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_975

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hemangiosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_976

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Thyroid
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Adenoma
Cyst, Nos
Adenoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_977

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node

Capsule
Mesenteric Lymph Node
Mesenteric Lymph Node

Hyperplasia, Nos
Fibrosis
Metamorphosis, Fatty
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_978

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

Unspecified
Uterus

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type
Hemangioma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 4_979

TRT#: 4

SEX: Female

DAY ON TEST:

DOSE: 400 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Ovary

Cyst, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_980

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_981

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Harderian gland
Ovary

Hardarian Gland

Adenoma, Nos
Cyst, Hemorrhagic
Cyst, Nos

Unspecified
Uterus

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_982

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Nos
Hemangioma
Cyst, Nos
Hemangioma

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_983

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney

Capsule

Ovary

Uterus

Hyperplasia, Nos
Inflammation, Chronic Focal
Lymphoma, Lymphocytic-Malignant Type
Cyst, Hemorrhagic
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_984

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Carcinoma
Inflammation, Interstitial
Congestion, Nos

Spleen

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_985

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver

Capsule

Hyperplasia, Nos
Cyst, Nos
Necrosis, Nos

Lung
Lymph node
Uterus

Mandibular Lymph Node

Congestion, Nos
Inflammation, Chronic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_986

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Carcinoma
Hemorrhage
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

Spleen
Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_987

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_988

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Nephrosis, Hydro
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_989

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_990

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Large
Unspecified
Uterus

Capsule
Large Intestine, Colon
Multiple Organs Nos

Hyperplasia, Nos
Parasitism
Lymphoma, Histiocytic-Malignant Type
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_991

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Spleen
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_992

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_993

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Lymph node
Ovary

Capsule
Harderian Gland
Mesenteric Lymph Node

Hyperplasia, Nos
Adenoma, Nos
Congestion, Nos
Cyst, Hemorrhagic
Cyst, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_994

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Hemangioma
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_995

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Hemorrhage
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_996

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_997

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_998

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 4_999

TRT#: 4
DOSE: 400 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_121

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Harderian gland
Liver
Ovary
Uterus

Capsule
Hardarian Gland

Hyperplasia, Nos
Adenoma, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_122

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_123

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_124

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_125

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lung
Mammary gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Leukemoid Reaction
Adenocarcinoma, Nos, Metastatic
Adenocarcinoma, Nos
Hematopoiesis
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_128

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_129

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_130

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_131

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_132

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_133

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung
Ovary
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Cyst, Nos
Hemangioma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_134

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Ovary
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_135

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_136

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule
Cortex Nos

Hyperplasia, Nos
Hypertrophy, Nos
Nephrosis, Hydro
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Infarct, Nos

Kidney
Lymph node
Uterus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_138

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_139

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_140

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pancreas

Capsule

Hyperplasia, Nos
Cyst, Nos
Fibrosis
Cyst, Hemorrhagic
Cyst, Nos

Uterus

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_141

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_142

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Necrosis, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_143

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_144

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_145

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_146

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Spleen
Unspecified
Uterus

Capsule
Ileum
Multiple Organs Nos

Hyperplasia, Nos
Ulcer, Nos
Hematopoiesis
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_148

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Hemorrhage

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_149

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Unspecified
Uterus

Multiple Organs Nos

Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_150

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_151

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_152

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Intestine Small
Kidney
Uterus

Capsule
Ileum

Hyperplasia, Nos
Amyloidosis
Hyperplasia, Tubular Cell
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_153

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung
Ovary
Uterus

Capsule

Hyperplasia, Nos
Tubular-Cell Adenoma
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_154

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Liver		Hemangiosarcoma
Lung		Alveolar/Bronchiolar Carcinoma
Ovary		Cyst, Hemorrhagic
		Cyst, Nos
Spleen		Hematopoiesis
Uterus		Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 5_157

TRT#: 5

SEX: Female

DAY ON TEST:

DOSE: 900 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_158

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_159

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule
Portal Tract

Hyperplasia, Nos
Fibrosis, Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_160

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_161

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_162

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Hemorrhage
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_163

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Uterus

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_164

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 5_165

TRT#: 5

SEX: Female

DAY ON TEST:

DOSE: 900 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Lung

Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_166

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 5_167

TRT#: 5

SEX: Female

DAY ON TEST:

DOSE: 900 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Lung

Hemorrhage

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_168

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 5_169

TRT#: 5
DOSE: 900 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland	Capsule	Hyperplasia, Nos
Brain		Hemosiderosis
Liver		Lymphoma, Histiocytic-Malignant Type
		Necrosis, Nos
Ovary		Cyst, Nos
Pancreas		Cyst, Nos
Spleen		Hematopoiesis

PRIMARY CAUSE OF DEATH -

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 5_170

TRT#: 5

SEX: Female

DAY ON TEST:

DOSE: 900 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_191

TRT#: 6

SEX: Female

DAY ON TEST:

DOSE: 1800 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland
Thyroid
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_192

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_193

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_194

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Thyroid
Uterus

Capsule

Hyperplasia, Nos
Hemorrhage
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_195

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Capsule

Hyperplasia, Nos
Cytoplasmic Change, Eosinophilic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 6_196

TRT#: 6

SEX: Female

DAY ON TEST:

DOSE: 1800 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Bone marrow

Fibrosis, Myelo

Spleen

Hemosiderosis

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 6_197

TRT#: 6

SEX: Female

DAY ON TEST:

DOSE: 1800 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Lung

Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_198

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_199

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_200

TRT#: 6

SEX: Female

DAY ON TEST:

DOSE: 1800 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_201

TRT#: 6

SEX: Female

DAY ON TEST:

DOSE: 1800 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland
Kidney
Lung

Capsule

Hyperplasia, Nos
Inflammation, Chronic Focal
Alveolar/Bronchiolar Carcinoma
Inflammation, Interstitial
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

Unspecified
Uterus

Multiple Organs Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_202

TRT#: 6

SEX: Female

DAY ON TEST:

DOSE: 1800 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_203

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary

Uterus

Capsule

Hyperplasia, Nos
Hyperplasia, Nodular
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_204

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_205

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_206

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_207

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Spleen
Uterus

Capsule

Hyperplasia, Nos
Alveolar/Bronchiolar Adenoma
Hemangioma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_208

TRT#: 6

SEX: Female

DAY ON TEST:

DOSE: 1800 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland
Lymph node
Pituitary gland
Uterus

Capsule
Mesenteric Lymph Node

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Chromophobe Adenoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_209

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_210

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Nasal cavity
Spleen
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Hemorrhage
Hematopoiesis
Hemangiosarcoma
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_211

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_212

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_214

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Mammary gland

Capsule

Hyperplasia, Nos
Adenocarcinoma, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 6_215

TRT#: 6

SEX: Female

DAY ON TEST:

DOSE: 1800 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Lung

Hemorrhage

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_217

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_218

TRT#: 6

SEX: Female

DAY ON TEST:

DOSE: 1800 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland
Liver
Ovary
Unspecified
Uterus

Capsule

Multiple Organs Nos

Hyperplasia, Nos
Metamorphosis, Fatty
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos
Hydrometra

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_219

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_220

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified
Uterus

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Lymphocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_221

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lung
Ovary
Uterus

Capsule

Hyperplasia, Nos
Metamorphosis, Fatty
Alveolar/Bronchiolar Adenoma
Cyst, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_222

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_223

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_224

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Ovary
Salivary gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Fibrosis
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_225

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 6_226

TRT#: 6

SEX: Female

DAY ON TEST:

DOSE: 1800 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Lung

Alveolar/Bronchiolar Carcinoma

Inflammation, Interstitial

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 6_227

TRT#: 6

SEX: Female

DAY ON TEST:

DOSE: 1800 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Capsule

Hyperplasia, Nos

Liver

Hemangiosarcoma

Pituitary gland

Chromophobe Adenoma

Uterus

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_229

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Pituitary gland
Uterus

Capsule

Hyperplasia, Nos
Chromophobe Adenoma
Cyst, Nos
Leiomyoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_231

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung

Capsule

Hyperplasia, Nos
Hemorrhage

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_232

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Mammary gland
Thyroid

Pheochromocytoma
Degeneration, Hydropic
Adenoma, Nos
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_233

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Unspecified

Capsule
Multiple Organs Nos

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_234

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Spleen
Uterus

Capsule

Hyperplasia, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_236

TRT#: 6

SEX: Female

DAY ON TEST:

DOSE: 1800 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland
Liver
Lung
Spleen
Uterus

Capsule

Hyperplasia, Nos
Hepatocellular Carcinoma
Congestion, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_237

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Nos
Polyp, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_239

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Lung
Ovary
Spleen
Uterus

Capsule

Hyperplasia, Nos
Hemorrhage
Cyst, Nos
Lymphoma, Histiocytic-Malignant Type
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 6_240

TRT#: 6
DOSE: 1800 PPM

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Uterus

Capsule

Hyperplasia, Nos
Cyst, Hemorrhagic
Cyst, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_001

TRT#: 7
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary

Inflammation, Nos

Uterus

Endometrium

Inflammation, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:29

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 7_002

TRT#: 7

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Uterus

Endometrium

Inflammation, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_003

TRT#: 7
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Uterus

Endometrium

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_004

TRT#: 7
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary
Uterus

Endometrium

Cyst, Nos
Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_005

TRT#: 7
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary
Uterus

Endometrium

Cyst, Nos
Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_006

TRT#: 7
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lymph node	Mesenteric Lymph Node	Inflammation, Nos
Ovary		Inflammation, Nos
Uterus	Endometrium	Inflammation, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_007

TRT#: 7
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary
Uterus

Endometrium

Cyst, Nos
Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_008

TRT#: 7
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Uterus

Endometrium

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_009

TRT#: 7
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Lymph node	Mesenteric Lymph Node
Ovary	
Peritoneum	
Uterus	

Adenocarcinoma, Nos, Metastatic
Endometrial Stromal Sarcoma, Metastatic
Endometrial Stromal Sarcoma, Metastatic
Adenocarcinoma, Nos
Endometrial Stromal Sarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:29
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_010

TRT#: 7
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Uterus

Endometrium

Inflammation, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_011

TRT#: 7
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Uterus

Endometrium

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_012

TRT#: 7
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Intestine Large
Ovary
Uterus

Large Intestine, Colon
Endometrium

Nematodiasis
Cyst, Nos
Inflammation, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_013

TRT#: 7
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Stomach

Hyperkeratosis

Uterus

Endometrium

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_014

TRT#: 7
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Bile Duct	Hyperplasia, Nos
Stomach		Hyperkeratosis
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_015

TRT#: 7
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Uterus

Endometrium

Inflammation, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_016

TRT#: 7
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Pancreas
Stomach
Uterus

Endometrium

Cyst, Nos
Inflammation, Nos
Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_018

TRT#: 7
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary

Cyst, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:30

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 7_019

TRT#: 7

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Natural Death

HISTO:

OBSERVATIONS

Heart

Myocardium Nos

Fibrosis

Lung

Pneumonia, Chronic Murine

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 7_020

TRT#: 7
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary

Teratoma, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_001

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lung		Alveolar/Bronchiolar Adenoma
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_002

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lymph node
Uterus

Endometrium

Hyperplasia, Lymphoid
Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_003

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Spleen

Uterus

Endometrium

Hematopoiesis

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_004

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary

Uterus

Endometrium

Cyst, Follicular Nos

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_005

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Uterus

Endometrium

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_006

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary

Uterus

Endometrium

Cyst, Follicular Nos

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_007

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Spleen

Uterus

Endometrium

Hematopoiesis

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_008

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary

Cyst, Follicular Nos
Inflammation, Suppurative

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:30

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 8_009

TRT#: 8

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Uterus

Endometrium

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_011

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary

Uterus

Endometrium

Cyst, Follicular Nos

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_012

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Uterus

Endometrium

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_013

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Blood vessel
Uterus

Coronary Artery Nos
Endometrium

Inflammation, Chronic
Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_014

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary		Inflammation, Suppurative
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_015

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary		Inflammation, Suppurative
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_016

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Uterus

Endometrium

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_017

TRT#: 8
DOSE: 0

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lung		Bronchopneumonia, Acute
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:30

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 8_018

TRT#: 8

SEX: Female

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Lung

Bronchopneumonia, Acute

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 8_019

TRT#: 8
DOSE: 0

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Pituitary gland
Uterus

Endometrium

Chromophobe Carcinoma
Inflammation, Acute

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_001

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_002

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_003

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Ovary		Cyst, Nos
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_004

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Lung		Hyperplasia, Alveolar Epithelium
Lymph node	Cervical Lymph Node Nos	Hyperplasia, Lymphoid
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_005

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver
Nerve, peripheral

Trigeminal Nerve Nos

Hepatocellular Carcinoma
Inflammation, Granulomatous

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_006

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hyperplasia, Nodular
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_007

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hyperplasia, Nodular
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_008

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_009

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Cortex Nos

Endometrium

Hyperplasia, Nodular
Hepatocellular Carcinoma
Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_011

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Lung	Sarcoma, Granulocytic
Spleen	Sarcoma, Granulocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_012

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hyperplasia, Nodular
		Necrosis, Focal
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_013

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Ovary	Cyst, Nos

PRIMARY CAUSE OF DEATH -

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_014

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_015

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_016

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_017

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_019

TRT#: 9

SEX: Female

DAY ON TEST:

DOSE: 200.0 MG/KG

DISP: Natural Death

HISTO:

OBSERVATIONS

Liver

Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_021

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hyperplasia, Nodular
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_022

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_023

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Ovary		Cyst, Nos
Uterus	Fallopian Tube	Inflammation, Suppurative

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_024

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_025

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hyperplasia, Nodular
Ovary		Cyst, Nos
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_026

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Thyroid		Hyperplasia, Follicular Cell
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_027

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_028

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Ovary		Cyst, Nos
Unspecified	Multiple Organs Nos	Hyperplasia, Lymphoid
Uterus	Endometrium	Hyperplasia, Cystic
	Fallopian Tube	Inflammation, Suppurative

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_029

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver

Necrosis, Focal

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_030

TRT#: 9

SEX: Female

DAY ON TEST:

DOSE: 200.0 MG/KG

DISP: Natural Death

HISTO:

OBSERVATIONS

Liver

Sarcoma, Granulocytic

Lung

Sarcoma, Granulocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_031

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver
Unspecified

Multiple Organs Nos

Hepatocellular Carcinoma
Lymphoma, Lymphocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_032

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_033

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_034

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver
Hepatocellular Carcinoma
Necrosis, Focal

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_035

TRT#: 9

SEX: Female

DAY ON TEST:

DOSE: 200.0 MG/KG

DISP: Natural Death

HISTO:

OBSERVATIONS

Liver

Hepatocellular Carcinoma

Unspecified

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_036

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Lung	Abscess, Nos

PRIMARY CAUSE OF DEATH -

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_039

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma Necrosis, Focal
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_040

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hyperplasia, Nodular

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_041

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Lung	Bronchiole	Hyperplasia, Epithelial

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_042

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Ovary		Cyst, Nos
Thyroid		Hyperplasia, Follicular Cell
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_043

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Liver
Uterus

Cortex Nos

Endometrium

Hyperplasia, Focal
Hepatocellular Carcinoma
Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_044

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Skin		Cyst, Epidermal Inclusion
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_045

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Vagina	Inflammation, Suppurative

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_046

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_047

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver
Unspecified

Multiple Organs Nos

Hepatocellular Carcinoma
Lymphoma, Undifferentiated-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_048

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_049

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
Uterus	Endometrium	Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 9_050

TRT#: 9
DOSE: 200.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Lung	Alveolar/Bronchiolar Adenoma

PRIMARY CAUSE OF DEATH -

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_001

TRT#: 10

SEX: Female

DAY ON TEST:

DOSE: 400.0 MG/KG

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Liver

Hepatocellular Carcinoma

Lung

Bronchopneumonia, Acute

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_002

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:30

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 10_003

TRT#: 10

SEX: Female

DAY ON TEST:

DOSE: 400.0 MG/KG

DISP: Natural Death

HISTO:

OBSERVATIONS

Liver

Hepatocellular Carcinoma

Lung

Bronchopneumonia, Acute

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:30

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 10_004

TRT#: 10

SEX: Female

DAY ON TEST:

DOSE: 400.0 MG/KG

DISP: Natural Death

HISTO:

OBSERVATIONS

Liver

Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_008

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_009

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_011

TRT#: 10

SEX: Female

DAY ON TEST:

DOSE: 400.0 MG/KG

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Liver

Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_012

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Heart	Atrium	Thrombosis, Nos
Liver		Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_013

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_014

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_015

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Heart	Atrium	Thrombosis, Nos
Liver		Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_016

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_017

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Heart	Atrium	Thrombosis, Nos
Liver		Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_018

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Heart	Atrium	Thrombosis, Nos
Liver		Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_021

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Ovary	Cyst, Follicular Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_022

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
	Caudate Lobe	Necrosis, Nos
Lymph node		Hyperplasia, Lymphoid
Thyroid		Hyperplasia, Epithelial
Uterus		Inflammation, Acute

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_023

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Heart	Atrium	Thrombosis, Nos
Liver		Hepatocellular Carcinoma
Lung		Bronchopneumonia, Acute

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_024

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Lung	Bronchopneumonia, Acute

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_025

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Lung	Bronchopneumonia, Acute
Trachea	Inflammation, Acute

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_026

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hyperplasia, Nodular
Lung	Bronchopneumonia, Acute

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_027

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Heart	Atrium	Thrombosis, Nos
Liver		Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_028

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Uterus	Inflammation, Suppurative

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_029

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Heart	Atrium	Thrombosis, Nos
Liver		Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_031

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Ovary	Cyst, Follicular Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_032

TRT#: 10

SEX: Female

DAY ON TEST:

DOSE: 400.0 MG/KG

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Spleen	Hematopoiesis

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_033

TRT#: 10

SEX: Female

DAY ON TEST:

DOSE: 400.0 MG/KG

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Liver

Lung

Pheochromocytoma

Hepatocellular Carcinoma

Bronchopneumonia, Acute

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_034

TRT#: 10

SEX: Female

DAY ON TEST:

DOSE: 400.0 MG/KG

DISP: Natural Death

HISTO:

OBSERVATIONS

Liver

Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_035

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Uterus	Inflammation, Acute

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_036

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Heart	Atrium	Thrombosis, Nos
Liver		Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_037

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Heart	Atrium	Thrombosis, Nos
Liver		Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_038

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Lung	Hepatocellular Carcinoma, Metastatic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_039

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_040

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:30

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 10_041

TRT#: 10

SEX: Female

DAY ON TEST:

DOSE: 400.0 MG/KG

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Liver

Hepatocellular Carcinoma

Ovary

Cyst, Follicular Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_042

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver		Hepatocellular Carcinoma
	Caudate Lobe	Necrosis, Nos
Spleen		Hematopoiesis
Trachea		Inflammation, Acute

PRIMARY CAUSE OF DEATH

-

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_043

TRT#: 10

SEX: Female

DAY ON TEST:

DOSE: 400.0 MG/KG

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Liver

Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_044

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Spleen	Hyperplasia, Lymphoid

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_045

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Lung	Bronchopneumonia Suppurative

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686

Test Type: Long-Term

Route: Gavage

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Chloroform

CAS Number: 67-66-3

Date Report Requested: 10/26/2014

Time Report Requested: 11:09:30

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 10_047

TRT#: 10

SEX: Female

DAY ON TEST:

DOSE: 400.0 MG/KG

DISP: Natural Death

HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Trachea	Inflammation, Acute

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C02686
Test Type: Long-Term
Route: Gavage
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Chloroform
CAS Number: 67-66-3

Date Report Requested: 10/26/2014
Time Report Requested: 11:09:30
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 10_049

TRT#: 10
DOSE: 400.0 MG/KG

SEX: Female
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver	Hepatocellular Carcinoma
Lung	Hepatocellular Carcinoma, Metastatic

PRIMARY CAUSE OF DEATH

-

**** END OF REPORT ****