

Experiment Number: 99017-01

Test Type: 14-DAY

Route: RESPIRATORY EXPOSURE WHOLE BODY

Species/Strain: Rat/F 344/N

E05: CLINICAL OBSERVATIONS SUMMARY

Test Compound: Diethylamine

CAS Number: 109-89-7

Date Report Requested: 10/21/2014

Time Report Requested: 17:31:58

First Dose M/F: NA / NA

Lab: BNW

C Number:	C99017
Lock Date:	07/22/2003
Cage Range:	All
Date Range:	All
Reasons For Removal:	All
Removal Date Range:	All
Treatment Groups:	All
Study Gender:	Both
PWG Approval Date	NONE

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SEX :MALE WEEK: 3

OBSERVATIONS	CONTROL		31 PPM		62.5 PPM		125 PPM	
	CURRENT*	TOTAL+	CURRENT*	TOTAL+	CURRENT*	TOTAL+	CURRENT*	TOTAL+
Abnormal Breathing	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5
Eye Abnormality	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5
Lethargic	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5
Nasal/Eye Discharge	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5
Thin	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5

* ANIMALS WITH OBSERVATION IN CURRENT PERIOD / TOTAL ANIMALS OBSERVED IN CURRENT PERIOD (WITHIN 7 DAYS OF RUN DATE)

+ ROW 1 = CUMULATIVE NO. OF ANIMALS WITH OBSERVATION / TOTAL ANIMALS STARTED ON STUDY

ROW 2 = DAY OF ONSET

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SEX :MALE WEEK: 3

OBSERVATIONS	250 PPM		500 PPM	
	CURRENT*	TOTAL+	CURRENT*	TOTAL+
Abnormal Breathing	0 / 0	5 / 5 DAY 5	0 / 0	5 / 5 DAY 1
Eye Abnormality	0 / 0	0 / 5	0 / 0	4 / 5 DAY 3
Lethargic	0 / 0	5 / 5 DAY 1	0 / 0	5 / 5 DAY 1
Nasal/Eye Discharge	0 / 0	5 / 5 DAY 3	0 / 0	5 / 5 DAY 1
Thin	0 / 0	5 / 5 DAY 8	0 / 0	5 / 5 DAY 3

END OF MALE DATA

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SEX :FEMALE WEEK: 3

OBSERVATIONS	CONTROL		31 PPM		62.5 PPM		125 PPM	
	CURRENT*	TOTAL+	CURRENT*	TOTAL+	CURRENT*	TOTAL+	CURRENT*	TOTAL+
Abnormal Breathing	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5
Eye Abnormality	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5
Lethargic	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5
Nasal/Eye Discharge	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	1 / 5 DAY 2
Thin	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5	0 / 0	0 / 5

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SEX :FEMALE

WEEK: 3

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	CURRENT*	TOTAL+	CURRENT*	TOTAL+
Abnormal Breathing	0 / 0	5 / 5 DAY 4	0 / 0	5 / 5 DAY 1
Eye Abnormality	0 / 0	0 / 5	0 / 0	4 / 5 DAY 3
Lethargic	0 / 0	5 / 5 DAY 1	0 / 0	5 / 5 DAY 1
Nasal/Eye Discharge	0 / 0	5 / 5 DAY 3	0 / 0	5 / 5 DAY 1
Thin	0 / 0	5 / 5 DAY 8	0 / 0	5 / 5 DAY 3

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