

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:47
First Dose M/F: NA / NA
Lab: NA

| | |
|-----------------------------|--------|
| C Number: | C50395 |
| Cage Range: | All |
| Date Range: | All |
| Reasons For Removal: | All |
| Removal Date Range: | All |
| Treatment Groups: | All |
| Study Gender: | Male |

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:47
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_001

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Skin

Basal-Cell Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:47
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_002

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Lung

Alveolar/Bronchiolar Adenoma

Unspecified

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:47
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_003

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Pheochromocytoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:47
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_004

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Unspecified

Multiple Organs Nos

Lymphoma, Mixed-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_005

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Lung

Perivasculitis

Lymph node

Abdominal Lymph Node

Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_006

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_007

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------|
| Brain | | Calcification, Focal |
| Liver | | Hepatocellular Carcinoma |
| Lung | | Perivasculitis |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| Testis | | Atrophy, Focal |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_008

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------|
| Brain | | Calcification, Focal |
| Liver | | Hepatocellular Carcinoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_010

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Intestine Large

Lung

Lymph node

Colon

Bronchus

Mesenteric Lymph Node

Calcification, Focal

Parasitism

Inflammation, Nos

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_011

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_012

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Lymph node

Mesenteric Lymph Node

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum

CAS Number: 9000-30-0

Date Report Requested: 10/26/2014

Time Report Requested: 15:05:48

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_013

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Stomach

Mucosa

Forestomach

Calcification, Focal

Atypia, Nos

Squamous Cell Papilloma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_014

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|---------|--------|--------------------------|
| Brain | | Calcification, Focal |
| Liver | | Hepatocellular Carcinoma |
| Stomach | Mucosa | Atypia, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_015

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain
Intestine Small
Lung

Jejunum

Calcification, Focal
Lymphoma, Histiocytic-Malignant Type
Alveolar/Bronchiolar Adenoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_017

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Pancreas
Urinary bladder

Islets

Islet-Cell Adenoma
Hemangiosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_018

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Harderian gland

Hardarian Gland

Adenoma, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_019

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|-------------|-----------------------|--------------------------------|
| Brain | | Calcification, Focal |
| Lymph node | Mesenteric Lymph Node | Lymphoma, Mixed-Malignant Type |
| Spleen | | Hematopoiesis |
| Unspecified | Abdomen | Fibrosarcoma |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_020

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------------|
| Brain | | Calcification, Focal |
| Lung | | Alveolar/Bronchiolar Adenoma |
| | | Alveolar/Bronchiolar Carcinoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_021

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------------------|
| Brain | | Calcification, Focal |
| Lymph node | Mesenteric Lymph Node | Lymphoma, Lymphocytic-Malignant Type |
| Stomach | Mucosa | Atypia, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_022

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Lung

Lymph node

Mesenteric Lymph Node

Perivasculitis

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_023

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|------------------------|
| Brain | | Calcification, Focal |
| Liver | | Hepatocellular Adenoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| Stomach | | Hyperkeratosis |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_024

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | |
|--------|------------------------------|
| Brain | Calcification, Focal |
| Kidney | Amyloidosis |
| Lung | Alveolar/Bronchiolar Adenoma |
| Testis | Amyloidosis |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_025

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_026

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_027

TRT#: 1
DOSE: 50000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-------------|---------------------|--------------------------------------|
| Brain | | Calcification, Focal |
| Unspecified | Multiple Organs Nos | Lymphoma, Lymphocytic-Malignant Type |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_029

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Unspecified

Multiple Organs Nos

Lymphoma, Nos-Malignant

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_030

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Lymph node

Mesenteric Lymph Node

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_031

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain
Thyroid

Calcification, Focal
Follicular-Cell Adenoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_032

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_033

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|----------|-------------------|----------------------------------|
| Brain | | Calcification, Focal |
| Lung | | Alveolar/Bronchiolar Adenoma |
| Prostate | Prostatic Urethra | Calculus, Unknown Gross Or Micro |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_034

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

| | | |
|---------|-------------|--------------------------------|
| Brain | | Calcification, Focal |
| Lung | | Alveolar/Bronchiolar Carcinoma |
| Stomach | Forestomach | Hyperplasia, Basal Cell |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_035

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Lymph node

Mesenteric Lymph Node

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_036

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Lymph node

Mesenteric Lymph Node

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_037

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------|
| Liver | | Hepatocellular Carcinoma |
| Lung | Bronchus | Inflammation, Nos |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_038

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | |
|--------|--------------------------------|
| Brain | Calcification, Focal |
| Spleen | Lymphoma, Mixed-Malignant Type |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_039

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Unspecified

Multiple Organs Nos

Lymphoma, Nos-Malignant

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_040

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Liver

Hepatocellular Carcinoma

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum

CAS Number: 9000-30-0

Date Report Requested: 10/26/2014

Time Report Requested: 15:05:48

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_041

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Unspecified

Groin

Abscess, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_042

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Unspecified

Multiple Organs Nos

Lymphoma, Nos-Malignant

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_043

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|---------|--------|------------------------------|
| Brain | | Calcification, Focal |
| Lung | | Alveolar/Bronchiolar Adenoma |
| Spleen | | Hematopoiesis |
| Stomach | Mucosa | Metaplasia, Squamous |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_044

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|------------------------------|
| Brain | | Calcification, Focal |
| Lung | | Alveolar/Bronchiolar Adenoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_045

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Lymph node

Mesenteric Lymph Node

Congestion, Nos

Stomach

Forestomach

Hyperkeratosis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_046

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Lymph node

Mesenteric Lymph Node

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_047

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Liver

Hepatocellular Carcinoma

Lung

Hepatocellular Carcinoma, Metastatic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_048

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|----------------|-----------------------|-------------------------------|
| Brain | | Calcification, Focal |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| Salivary gland | | Inflammation, Chronic Focal |
| Skin | | Epithelial Tumor, Nos, Benign |
| Stomach | | Hyperplasia, Basal Cell |
| Unspecified | Abdominal Cavity | Necrosis, Fat |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 1_050

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------------------|
| Brain | | Calcification, Focal |
| Lymph node | Mesenteric Lymph Node | Lymphoma, Lymphocytic-Malignant Type |
| Pancreas | Islets | Hyperplasia, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_002

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Lymph node

Mesenteric Lymph Node

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_003

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|-----------------------|
| Brain | | Calcification, Focal |
| Kidney | | Pyelonephritis, Focal |
| Liver | Bile Duct | Dilatation, Nos |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_004

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|----------------------|
| Brain | | Calcification, Focal |
| Liver | Bile Duct | Dilatation, Nos |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_005

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Brain
Lymph node

Mesenteric Lymph Node

Calcification, Focal
Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_006

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|-----------------------------|
| Brain | | Calcification, Focal |
| Kidney | Tubule | Regeneration, Nos |
| Liver | | Hepatocellular Adenoma |
| Lymph node | Mesenteric Lymph Node | Inflammation, Acute/Chronic |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_007

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-------------|---------------------|--------------------------------------|
| Brain | | Calcification, Focal |
| Liver | | Hepatocellular Adenoma |
| Unspecified | Multiple Organs Nos | Lymphoma, Lymphocytic-Malignant Type |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_008

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Brain
Lung
Urinary bladder

Bronchus

Calcification, Focal
Inflammation, Nos
Inflammation, Chronic

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_009

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Lymph node

Mesenteric Lymph Node

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_010

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver
Unspecified

Necrosis, Focal
Fibrosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_011

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Brain
Lung
Lymph node
Penis
Seminal vesicle

Calcification, Focal
Alveolar/Bronchiolar Adenoma
Lymphoma, Histiocytic-Malignant Type
Inflammation, Chronic
Fibrosis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_012

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-----------------|---------------------|--------------------------------|
| Brain | | Calcification, Focal |
| Lung | | Alveolar/Bronchiolar Adenoma |
| Seminal vesicle | | Atrophy, Nos |
| Stomach | Forestomach | Acanthosis |
| Unspecified | Multiple Organs Nos | Lymphoma, Mixed-Malignant Type |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_013

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | |
|--------|-----------------------------|
| Brain | Calcification, Focal |
| Kidney | Inflammation, Chronic Focal |
| Liver | Hepatocellular Adenoma |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_014

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Lymph node

Mesenteric Lymph Node

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_015

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|-------------------------|
| Liver | | Necrosis, Focal |
| Lymph node | Mesenteric Lymph Node | Inflammation, Chronic |
| Stomach | Forestomach | Squamous Cell Papilloma |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_016

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|-----------------------------|
| Kidney | | Pyelonephritis, Focal |
| Liver | | Inflammation, Acute/Chronic |
| Lymph node | Mesenteric Lymph Node | Inflammation, Chronic |
| Pancreas | Acinus | Atrophy, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_017

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-----------------|---------------------|--------------------------------------|
| Brain | | Calcification, Focal |
| Pituitary gland | | Adenoma, Nos |
| Skin | | Ulcer, Nos |
| Stomach | Mucosa | Ectopia |
| Unspecified | Multiple Organs Nos | Lymphoma, Lymphocytic-Malignant Type |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_018

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------|
| Liver | | Hepatocellular Carcinoma |
| Lung | | Perivasculitis |
| Lymph node | Mesenteric Lymph Node | Hyperplasia, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_019

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | |
|-------------|--------------------------|
| Liver | Hepatocellular Carcinoma |
| | Necrosis, Focal |
| Lymph node | Necrosis, Nos |
| Spleen | Hematopoiesis |
| Unspecified | Fibrosarcoma |

PRIMARY CAUSE OF DEATH -

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_020

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-------------|---------|----------------------|
| Brain | | Calcification, Focal |
| Lung | | Perivasculitis |
| Unspecified | Abdomen | Fibrosarcoma |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_021

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lymph node
Seminal vesicle

Mesenteric Lymph Node

Congestion, Nos
Fibrosis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_022

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Liver
Thyroid

Clear-Cell Change
Follicular-Cell Adenoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_023

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|-------------|-----------------------|----------------------|
| Brain | | Calcification, Focal |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| Spleen | | Hematopoiesis |
| Unspecified | | Fibrosarcoma |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_024

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Gall bladder

Liver

Lymph node

Mesenteric Lymph Node

Inflammation, Chronic

Hepatocellular Carcinoma

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_025

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Intestine Large
Liver
Peritoneum
Preputial gland
Unspecified

Colon

Multiple Organs Nos

Parasitism
Hepatocellular Carcinoma
Hepatocellular Carcinoma, Metastatic
Abscess, Nos
Lymphoma, Mixed-Malignant Type

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_026

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Lymph node

Mesenteric Lymph Node

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_027

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Lymph node

Mesenteric Lymph Node

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_028

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-------------|-----------------------|----------------------|
| Brain | | Calcification, Focal |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| Unspecified | Back | Angiosarcoma |
| | Back | Fibroma |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_029

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Stomach
Unspecified

Multiple Organs Nos

Hyperkeratosis
Lymphoma, Histiocytic-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_030

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-------------|---------------------|-------------------------|
| Brain | | Calcification, Focal |
| Unspecified | Multiple Organs Nos | Lymphoma, Nos-Malignant |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_031

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Brain
Liver
Lung
Preputial gland
Prostate
Urinary bladder

Prostatic Urethra

Cyst, Nos
Calcification, Focal
Hepatocellular Adenoma
Alveolar/Bronchiolar Adenoma
Adenoma, Nos
Calculus, Unknown Gross Or Micro
Calculus, Unknown Gross Or Micro

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_032

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Brain
Stomach

Calcification, Focal
Acanthosis

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_033

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland
Brain
Liver
Lung
Lymph node

Medulla

Mesenteric Lymph Node

Hyperplasia, Nos
Calcification, Focal
Hepatocellular Adenoma
Alveolar/Bronchiolar Carcinoma
Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_034

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Lymph node

Mesenteric Lymph Node

Congestion, Nos

Spleen

Hematopoiesis

Stomach

Cyst, Epidermal Inclusion

Unspecified

Fibrosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_035

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------------|
| Brain | | Calcification, Focal |
| Ear | | Squamous Cell Carcinoma |
| Kidney | | Calcification, Focal |
| Liver | | Hepatocellular Carcinoma |
| Lung | | Alveolar/Bronchiolar Carcinoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_036

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver
Unspecified

Bile Duct
Multiple Organs Nos

Cyst, Nos
Lymphoma, Mixed-Malignant Type

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_037

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Spleen
Unspecified

Hematopoiesis
Leiomyosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_038

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Unspecified

Fibrosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_039

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-------------|---------------------|--------------------------------------|
| Brain | | Calcification, Focal |
| Liver | | Hepatocellular Adenoma |
| Unspecified | Multiple Organs Nos | Lymphoma, Histiocytic-Malignant Type |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_040

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|----------------------|
| Brain | | Calcification, Focal |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| Stomach | Mucosa | Metaplasia, Squamous |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum

CAS Number: 9000-30-0

Date Report Requested: 10/26/2014

Time Report Requested: 15:05:48

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_041

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain

Calcification, Focal

Heart

Perivasculitis

Lung

Perivasculitis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_042

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-----------------|-----------------------|------------------------------|
| Brain | | Calcification, Focal |
| Harderian gland | Hardarian Gland | Adenoma, Nos |
| Lung | | Alveolar/Bronchiolar Adenoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| Pancreas | Islets | Hyperplasia, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_043

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver
Metamorphosis, Fatty
Necrosis, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_044

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lymph node
Skin

Mesenteric Lymph Node

Congestion, Nos
Epithelial Tumor, Nos, Benign

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_045

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain
Stomach

Calcification, Focal
Cyst, Epidermal Inclusion

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_046

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | |
|-------|------------------------------|
| Brain | Calcification, Focal |
| Lung | Alveolar/Bronchiolar Adenoma |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_047

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Brain
Intestine Large
Lymph node

Rectum
Mesenteric Lymph Node

Calcification, Focal
Mucinous Adenocarcinoma
Congestion, Nos

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_048

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-----------------|-----------------------|----------------------------------|
| Brain | | Calcification, Focal |
| Liver | | Hepatocellular Carcinoma |
| Lung | | Alveolar/Bronchiolar Carcinoma |
| Lymph node | Mesenteric Lymph Node | Hematopoiesis |
| Urinary bladder | | Calculus, Unknown Gross Or Micro |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_049

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|---------------|-----------------------|--------------------------------|
| Adrenal gland | Medulla | Hyperplasia, Nos |
| Brain | | Calcification, Focal |
| Lung | | Alveolar/Bronchiolar Carcinoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| Stomach | Mucosa | Metaplasia, Squamous |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 2_050

TRT#: 2
DOSE: 25000 PPM

SEX: Male
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Spleen
Testis
Unspecified

Hematopoiesis
Atrophy, Nos
Fibrosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_001

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-----------------|-------------|--------------------------------|
| Ear | | Fibrous Histiocytoma |
| Liver | | Hepatocellular Carcinoma |
| Lung | | Alveolar/Bronchiolar Carcinoma |
| Stomach | Omentum Nos | Necrosis, Fat |
| Urinary bladder | | Obstruction, Nos |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_002

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | |
|---------|------------------------------|
| Brain | Calcification, Focal |
| Lung | Alveolar/Bronchiolar Adenoma |
| Stomach | Perivasculitis |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_003

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|----------------------|
| Liver | | Metamorphosis, Fatty |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_004

TRT#: 3
DOSE: 0

SEX: Male
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-------------|-----------------------|----------------------------|
| Bone marrow | | Hyperplasia, Hematopoietic |
| Liver | | Hepatocellular Carcinoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| Prostate | | Inflammation, Chronic |
| Spleen | | Hematopoiesis |
| Unspecified | | Fibrosarcoma |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_005

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver
Lymph node
Preputial gland

Mesenteric Lymph Node

Hepatocellular Carcinoma
Congestion, Nos
Inflammation, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_007

TRT#: 3
DOSE: 0

SEX: Male
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

| | |
|------------|--------------------------------------|
| Brain | Calcification, Focal |
| Epididymis | Hepatocellular Carcinoma, Metastatic |
| Liver | Hepatocellular Carcinoma |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_010

TRT#: 3
DOSE: 0

SEX: Male
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Unspecified

Necrosis, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_011

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lymph node

Mesenteric Lymph Node

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_012

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lymph node

Mesenteric Lymph Node

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_013

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-------------|---------------------|--------------------------------------|
| Brain | | Calcification, Focal |
| Kidney | | Calcification, Focal |
| Lung | | Alveolar/Bronchiolar Adenoma |
| Pancreas | Islets | Hyperplasia, Nos |
| Unspecified | Multiple Organs Nos | Lymphoma, Lymphocytic-Malignant Type |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_014

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Brain
Stomach

Calcification, Focal
Parasitism

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_015

TRT#: 3
DOSE: 0

SEX: Male
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Unspecified

Multiple Organs Nos

Lymphoma, Nos-Malignant

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_016

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|----------------------|
| Brain | | Calcification, Focal |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| Stomach | | Parasitism |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_017

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|------------------------------|
| Brain | | Calcification, Focal |
| Kidney | | Perivasculitis |
| Lung | | Alveolar/Bronchiolar Adenoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_018

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-------------|-----------------------|-----------------------------|
| Brain | | Calcification, Focal |
| Liver | | Hepatocellular Carcinoma |
| Lymph node | Mesenteric Lymph Node | Inflammation, Acute/Chronic |
| Stomach | | Inflammation, Acute Focal |
| Unspecified | Back | Fibrosarcoma |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_019

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-----------------|-----------------------|----------------------------------|
| Brain | | Calcification, Focal |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| | Lumbar Lymph Node | Hyperplasia, Nos |
| Unspecified | | Neurofibrosarcoma |
| Urinary bladder | | Calculus, Unknown Gross Or Micro |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_020

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Kidney

Perivasculitis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_021

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|----------------------|
| Bone | Skull | Hyperostosis |
| Brain | | Calcification, Focal |
| Kidney | | Perivasculitis |
| Liver | | Hemangiosarcoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_022

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Salivary gland

Perivasculitis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_023

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|------------------------------|
| Liver | | Clear-Cell Change |
| Lung | | Alveolar/Bronchiolar Adenoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_024

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-------------|---------------------|------------------------------|
| Liver | | Hepatocellular Adenoma |
| Lung | | Alveolar/Bronchiolar Adenoma |
| Unspecified | Multiple Organs Nos | Perivasculitis |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_025

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lymph node

Mesenteric Lymph Node

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_026

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-----------------|-------|--------------------------------|
| Bone | Skull | Fibrosis |
| Liver | | Hemangioma |
| Lung | | Alveolar/Bronchiolar Carcinoma |
| | | Perivasculitis |
| Thyroid | | Follicular-Cell Carcinoma |
| Urinary bladder | | Perivasculitis |

PRIMARY CAUSE OF DEATH -

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_027

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Bone
Salivary gland
Stomach

Skull
Mucosa

Hyperostosis
Perivasculitis
Metaplasia, Squamous

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_028

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-----------------|-----------------------|--------------------------------------|
| Liver | | Hepatocellular Carcinoma |
| Lung | | Alveolar/Bronchiolar Carcinoma |
| Lymph node | Mesenteric Lymph Node | Lymphoma, Lymphocytic-Malignant Type |
| Urinary bladder | | Perivasculitis |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_029

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-------------|-----------------------|--------------------------------------|
| Liver | | Cyst, Nos |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| Testis | | Interstitial-Cell Tumor |
| Unspecified | Multiple Organs Nos | Lymphoma, Lymphocytic-Malignant Type |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_031

TRT#: 3
DOSE: 0

SEX: Male
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------------------|
| Brain | | Calcification, Focal |
| Liver | | Hepatocellular Carcinoma |
| Lung | | Hepatocellular Carcinoma, Metastatic |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_032

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Adrenal gland
Brain
Kidney
Liver
Lung
Penis

Pheochromocytoma
Calcification, Focal
Hemangiosarcoma
Hepatocellular Carcinoma
Hepatocellular Carcinoma, Metastatic
Inflammation, Acute

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_034

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|------------------------------|
| Brain | | Calcification, Focal |
| Lung | | Alveolar/Bronchiolar Adenoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_035

TRT#: 3
DOSE: 0

SEX: Male
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | |
|-------------|------------------------------|
| Lung | Alveolar/Bronchiolar Adenoma |
| Spleen | Hematopoiesis |
| Unspecified | Sarcoma, Nos |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_036

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------------------|
| Brain | | Calcification, Focal |
| Liver | | Hepatocellular Carcinoma |
| Lung | | Hepatocellular Carcinoma, Metastatic |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_037

TRT#: 3
DOSE: 0

SEX: Male
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------------------|
| Kidney | | Inflammation, Chronic |
| Liver | | Hepatocellular Carcinoma |
| Lung | | Hepatocellular Carcinoma, Metastatic |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_038

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------------------|
| Brain | | Calcification, Focal |
| Lung | | Alveolar/Bronchiolar Adenoma |
| Lymph node | Mesenteric Lymph Node | Lymphoma, Histiocytic-Malignant Type |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_039

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Brain
Kidney
Lymph node
Mesenteric Lymph Node

Calcification, Focal
Perivasculitis
Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_040

TRT#: 3
DOSE: 0

SEX: Male
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver

Hemangiosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_041

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Harderian gland
Kidney
Liver
Lung

Hardarian Gland

Adenoma, Nos
Perivasculitis
Hepatocellular Carcinoma
Hepatocellular Carcinoma, Metastatic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_042

TRT#: 3
DOSE: 0

SEX: Male
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-------------|---------------------|--------------------------------------|
| Brain | | Calcification, Focal |
| Liver | | Hepatocellular Carcinoma |
| Lung | | Alveolar/Bronchiolar Adenoma |
| | | Hepatocellular Carcinoma, Metastatic |
| Unspecified | Multiple Organs Nos | Lymphoma, Mixed-Malignant Type |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_043

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Liver
Salivary gland

Hepatocellular Carcinoma
Perivasculitis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_044

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Lymph node
Stomach

Mesenteric Lymph Node
Mucosa

Congestion, Nos
Metaplasia, Squamous

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_045

TRT#: 3
DOSE: 0

SEX: Male
DISP: Natural Death

DAY ON TEST:
HISTO:

OBSERVATIONS

| | |
|-------|--------------------------------------|
| Brain | Calcification, Focal |
| Heart | Calcification, Focal |
| Liver | Lymphoma, Histiocytic-Malignant Type |
| | Metamorphosis, Fatty |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_046

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------|
| Kidney | | Perivasculitis |
| Liver | | Hepatocellular Carcinoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_047

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|------------|-----------------------|--------------------------|
| Brain | | Calcification, Focal |
| Liver | | Hepatocellular Carcinoma |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| Testis | | Calcification, Focal |

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_048

TRT#: 3
DOSE: 0

SEX: Male
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Spleen
Testis

Hematopoiesis
Atrophy, Nos
Hemangiosarcoma
Fibrosarcoma

Unspecified

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_049

TRT#: 3
DOSE: 0

SEX: Male
DISP: Scheduled Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

Brain

Lymph node

Mesenteric Lymph Node

Calcification, Focal

Congestion, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50395
Test Type: Long-Term
Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA
Test Compound: Guar gum
CAS Number: 9000-30-0

Date Report Requested: 10/26/2014
Time Report Requested: 15:05:48
First Dose M/F: NA / NA
Lab: NA

ANIMAL ID: 3_050

TRT#: 3
DOSE: 0

SEX: Male
DISP: Moribund Sacrifice

DAY ON TEST:
HISTO:

OBSERVATIONS

| | | |
|-------------|-----------------------|--------------------------|
| Brain | | Calcification, Focal |
| Lung | | Fibrosarcoma, Metastatic |
| Lymph node | Mesenteric Lymph Node | Congestion, Nos |
| Unspecified | Forearm And Wrist | Fibrosarcoma |

PRIMARY CAUSE OF DEATH

-

**** END OF REPORT ****