

Experiment Number: 07018 - 02

Test Type: 14-WEEK

Route: DOSED WATER

Species/Strain: MICE/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Ionic Liquid: 1-Ethyl-3-methylimidazolium Chloride

CAS Number: 65039-09-0

Date Report Requested: 01/08/2020

Time Report Requested: 11:05:52

First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

Final_1 - EMIM Mice

NTP Study Number: C07018

Lock Date: 05/25/2018

Cage Range: ALL

Date Range: ALL

Reasons For Removal: ALL

Removal Date Range: ALL

Treatment Groups: Include ALL

Study Gender: Both

TDMSE Version: 3.0.2.3_002

PWG Approval Date: NONE

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Lab: BAT

B6C3F1 MICE MALE	0 mg/mL male	DAY ON TEST	0	0	0	0	0	0	0	0	0	0
			0	0	0	0	0	0	0	0	0	0
ANIMAL ID			9	9	9	9	9	9	9	9	9	9
			2	2	2	2	2	2	2	2	2	2
			0	0	0	0	0	0	0	0	0	0
			0	0	0	0	0	0	0	0	0	0
			2	2	2	2	2	2	2	2	2	2
			0	0	0	0	0	0	0	0	0	1
			1	2	3	4	5	6	7	8	9	0
			* TOTALS									

ALIMENTARY SYSTEM

Esophagus	+	+	+	+	+	+	+	+	+	+	+	10
Gallbladder	+	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	+	10
Liver	+	+	+	+	+	+	+	+	+	+	+	10
Pancreas	+	+	+	+	+	+	+	+	+	+	+	10
Salivary Glands	+	+	+	+	+	+	+	+	+	+	+	10
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	+	10
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	+	10

CARDIOVASCULAR SYSTEM

Blood Vessel	+	+	+	+	+	+	+	+	+	+	+	10
--------------	---	---	---	---	---	---	---	---	---	---	---	----

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

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Lab: BAT

B6C3F1 MICE MALE	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	
0 mg/mL male	ANIMAL ID	9	9	9	9	9	9	9	9	9	9	
		2	2	2	2	2	2	2	2	2	2	
Heart		0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	
ENDOCRINE SYSTEM		2	2	2	2	2	2	2	2	2	2	
		0	0	0	0	0	0	0	0	1		
Adrenal Cortex		1	2	3	4	5	6	7	8	9	0	
		+	+	+	+	+	+	+	+	+	+	
Adrenal Medulla		+	+	+	+	+	+	+	+	+	+	
		+	+	+	+	+	+	+	+	+	+	
Islets, Pancreatic Hyperplasia		+	+	+	+	+	+	+	+	+	+	
		1										
Parathyroid Gland		+	M	+	+	+	+	+	+	+	+	
		+	+	+	+	+	+	+	+	+	+	
Pituitary Gland		+	+	+	+	+	+	+	+	+	+	
		1										
Thyroid Gland Cyst		+	+	+	+	+	+	+	+	+	+	
		X										
GENERAL BODY SYSTEM												
NONE												
GENITAL SYSTEM												
Epididymis		+	+	+	+	+	+	+	+	+	+	
		1										
Preputial Gland		+	+	+	+	+	+	+	+	+	+	
		1										
Prostate		+	+	+	+	+	+	+	+	+	+	
		1										
Seminal Vesicle		+	+	+	+	+	+	+	+	+	+	
		1										

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Lab: BAT

B6C3F1 MICE MALE	DAY ON TEST	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0
0 mg/mL male	ANIMAL ID	9	9	9	9	9	9	9	9	9	9
		2	2	2	2	2	2	2	2	2	2
Testis		0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0
* TOTALS											
Testis		+	+	+	+	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM											
Bone Marrow		+	+	+	+	+	+	+	+	+	+
Lymph Node, Mandibular		+	+	+	+	+	+	+	+	+	+
Lymph Node, Mesenteric		+	+	+	+	+	+	+	+	+	+
Spleen		+	+	+	+	+	+	+	+	+	+
Thymus		+	+	+	+	+	+	+	+	+	+
INTEGUMENTARY SYSTEM											
Mammary Gland		M	M	M	M	M	M	M	M	M	M
Skin		+	+	+	+	+	+	+	+	+	+
MUSCULOSKELETAL SYSTEM											
Bone		+	+	+	+	+	+	+	+	+	+
NERVOUS SYSTEM											
Brain		+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM											
Lung		+	+	+	+	+	+	+	+	+	+

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Lab: BAT

		DAY ON TEST	0 0 9 2	0 0 9 2								
		ANIMAL ID	0 0 2 0 1	0 0 2 0 2	0 0 2 0 5	0 0 2 0 6	0 0 2 0 7	0 0 2 0 8	0 0 2 0 9	0 0 2 0 0		
* TOTALS												
Nose			+	+	+	+	+	+	+	+	+	10
Trachea			+	+	+	+	+	+	+	+	+	10
SPECIAL SENSES SYSTEM												
Eye			+	+	+	+	+	+	+	+	+	10
Harderian Gland			+	+	+	+	+	+	+	+	+	10
URINARY SYSTEM												
Kidney			+	+	+	+	+	+	+	+	+	10
Nephropathy, Chronic Progressive												1 1.0
Urinary Bladder			+	+	+	+	+	+	+	+	+	10

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		DAY ON TEST									
		0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0
		9	9	9	9	9	9	9	9	9	9
		2	2	2	2	2	2	2	2	2	2
		0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0
		2	2	2	2	2	2	2	2	2	2
		1	1	1	1	1	1	1	1	1	2
		1	2	3	4	5	6	7	8	9	0

* TOTALS

ALIMENTARY SYSTEM

NONE

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

NONE

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

NONE

INTEGUMENTARY SYSTEM

NONE

MUSCULOSKELETAL SYSTEM

NONE

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

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		DAY ON TEST											
		0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0	0	0
		9	9	9	9	9	9	9	9	9	9	9	9
		2	2	2	2	2	2	2	2	2	2	2	2
		0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0	0	0
		2	2	2	2	2	2	2	2	2	2	2	2
		1	1	1	1	1	1	1	1	1	1	1	2
		1	2	3	4	5	6	7	8	9	9	0	0

* TOTALS

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney

Nephropathy, Chronic Progressive

+ + + + + + + + + + +

10
1 1.0

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Lab: BAT

| DAY ON TEST | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|------------------|--|---|---|---|---|---|---|---|---|---|---|
| B6C3F1 MICE MALE | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10 mg/mL male | | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| ANIMAL ID | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 |
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |

* TOTALS

ALIMENTARY SYSTEM

Stomach, Forestomach
Epithelium, Cyst

+

1

1

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

NONE

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

NONE

INTEGUMENTARY SYSTEM

NONE

MUSCULOSKELETAL SYSTEM

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

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Time Report Requested: 11:05:52

First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

| B6C3F1 MICE MALE | 10 mg/mL male | ANIMAL ID | DAY ON TEST | | | | | | | | | |
|------------------|---------------|-----------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| | | | 0
0
9
2 |
| | | | 0
0
2
1 | 0
0
2
2 | 0
0
2
2 | 0
0
2
2 | 0
0
2
2 | 0
0
2
2 | 0
0
2
2 | 0
0
2
3 | 0
0
2
3 | 0
0
2
0 |

* TOTALS

NONE

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney
Infiltration Cellular, Mononuclear Cell
Nephropathy, Chronic Progressive

+ + + + + + + + + + +

10
1 1.0
2 1.0

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Lab: BAT

| | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|--|-------------|---|---|---|---|---|---|---|---|---|---|
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | ANIMAL ID | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 |
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |

* TOTALS

ALIMENTARY SYSTEM

| | | | | | | | | | | | |
|------------------------------|---|---|---|---|---|---|---|---|---|---|-------|
| Esophagus | + | + | + | + | + | + | + | + | + | + | 10 |
| Gallbladder | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Large, Cecum | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Large, Colon | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Large, Rectum | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Small, Ileum | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Small, Jejunum | + | + | + | + | + | + | + | + | + | + | 10 |
| Liver | + | + | + | + | + | + | + | + | + | + | 10 |
| Extramедullary Hematopoiesis | | | | | | | 1 | | | | 1 1.0 |
| Inflammation, Chronic Active | | | | | | | 1 | | | | 1 1.0 |
| Pancreas | + | + | + | + | + | + | + | + | + | + | 10 |
| Salivary Glands | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Glandular | + | + | + | + | + | + | + | + | + | + | 10 |

CARDIOVASCULAR SYSTEM

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

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First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

| B6C3F1 MICE MALE | 30 mg/mL male | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
|---------------------|---------------|-------------|---|---|---|---|---|---|---|---|---|-------|
| | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| ANIMAL ID | | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | |
| ENDOCRINE SYSTEM | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | |
| | | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | |
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | |
| | | * TOTALS | | | | | | | | | | |
| | | + | + | + | + | + | + | + | + | + | + | 10 |
| | | + | + | + | + | + | + | + | + | + | + | 10 |
| | | + | + | + | + | + | + | + | + | + | + | 10 |
| | | + | + | + | + | M | M | + | + | M | | 7 |
| GENERAL BODY SYSTEM | | + | + | + | + | + | + | + | + | + | + | 10 |
| | | + | + | + | + | + | + | + | + | + | + | 10 |
| | | + | + | + | + | + | + | + | + | + | + | 10 |
| | | + | + | + | + | + | + | + | + | + | + | |
| | | + | + | + | + | + | + | + | + | + | + | |
| GENITAL SYSTEM | | + | + | + | + | + | + | + | + | + | + | 10 |
| | | + | + | + | + | + | + | + | + | + | + | 10 |
| | | | | | | | | | | | | 1 2.0 |
| | | + | + | + | + | + | + | + | + | + | + | 10 |

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Lab: BAT

| B6C3F1 MICE MALE
30 mg/mL male | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|-----------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID | | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| * TOTALS | | | | | | | | | | | |
| Seminal Vesicle | | + | + | + | + | + | + | + | + | + | + |
| Testis | | + | + | + | + | + | + | + | + | + | |
| Germinal Epithelium, Degeneration | | | | | | | | | | | 1 |
| HEMATOPOIETIC SYSTEM | | | | | | | | | | | |
| Bone Marrow | | + | + | + | + | + | + | + | + | + | + |
| Lymph Node, Mandibular | | + | + | + | + | + | + | + | + | + | + |
| Lymph Node, Mesenteric | | + | + | + | + | + | + | + | + | + | + |
| Spleen | | + | + | + | + | + | + | + | + | + | + |
| Thymus | | + | + | + | + | + | + | + | + | + | + |
| INTEGUMENTARY SYSTEM | | | | | | | | | | | |
| Mammary Gland | | M | M | M | M | M | M | M | M | M | M |
| Skin | | + | + | + | + | + | + | + | + | + | + |
| MUSCULOSKELETAL SYSTEM | | | | | | | | | | | |
| Bone | | + | + | + | + | + | + | + | + | + | + |
| NERVOUS SYSTEM | | | | | | | | | | | |
| Brain | | + | + | + | + | + | + | + | + | + | + |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 07018 - 02

Test Type: 14-WEEK

Route: DOSED WATER

Species/Strain: MICE/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Ionic Liquid: 1-Ethyl-3-methylimidazolium Chloride

CAS Number: 65039-09-0

Date Report Requested: 01/08/2020

Time Report Requested: 11:05:52

First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

| B6C3F1 MICE MALE
30 mg/mL male | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|-----------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID | | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 |
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |

* TOTALS

RESPIRATORY SYSTEM

| | | | | | | | | | | | |
|---------|---|---|---|---|---|---|---|---|---|---|----|
| Lung | + | + | + | + | + | + | + | + | + | + | 10 |
| Nose | + | + | + | + | + | + | + | + | + | + | 10 |
| Trachea | + | + | + | + | + | + | + | + | + | + | 10 |

SPECIAL SENSES SYSTEM

| | | | | | | | | | | | |
|-----------------|---|---|---|---|---|---|---|---|---|---|----|
| Eye | + | + | + | + | + | + | + | + | + | + | 10 |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | 10 |

URINARY SYSTEM

| | | | | | | | | | | | |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|-------|
| Kidney | + | + | + | + | + | + | + | + | + | + | 10 |
| Infarct | 1 | | | | | | | | | 1 | 2 1.0 |
| Nephropathy, Chronic Progressive | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | | 1 | 8 1.0 |
| Renal Tubule, Cytoplasmic Alteration | 2 | 2 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 9 1.7 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | 10 |

*** END OF MALE DATA ***

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 07018 - 02

Test Type: 14-WEEK

Route: DOSED WATER

Species/Strain: MICE/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Ionic Liquid: 1-Ethyl-3-methylimidazolium Chloride

CAS Number: 65039-09-0

Date Report Requested: 01/08/2020

Time Report Requested: 11:05:52

First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

| B6C3F1 MICE FEMALE | 0 mg/mL female | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|--------------------|----------------|-------------|---|---|---|---|---|---|---|---|---|---|
| | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID | | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 |
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | |
| | | * TOTALS | | | | | | | | | | |

ALIMENTARY SYSTEM

| | | | | | | | | | | | | |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|-------|
| Esophagus | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Gallbladder | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Large, Cecum | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Large, Colon | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Large, Rectum | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Small, Ileum | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Small, Jejunum | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Liver | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Extramedullary Hematopoiesis | | | | | | | | | | | | 1 1.0 |
| Inflammation, Chronic Active | | | | | | | | | | | | 1 1.0 |
| Pancreas | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Salivary Glands | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Glandular | + | + | + | + | + | + | + | + | + | + | + | 10 |

CARDIOVASCULAR SYSTEM

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 07018 - 02

Test Type: 14-WEEK

Route: DOSED WATER

Species/Strain: MICE/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Ionic Liquid: 1-Ethyl-3-methylimidazolium Chloride

CAS Number: 65039-09-0

Date Report Requested: 01/08/2020

Time Report Requested: 11:05:52

First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

| B6C3F1 MICE FEMALE | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|-------------|---|---|---|---|---|---|---|---|---|---|
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0 mg/mL female | ANIMAL ID | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| * TOTALS | | | | | | | | | | | |
| Blood Vessel | | + | + | + | + | + | + | + | + | + | + |
| Heart | | + | + | + | + | + | + | + | + | + | + |
| ENDOCRINE SYSTEM | | | | | | | | | | | |
| Adrenal Cortex | | + | + | + | + | + | + | + | + | + | + |
| Adrenal Medulla | | + | + | + | + | + | + | + | + | + | + |
| Islets, Pancreatic | | + | + | + | + | + | + | + | + | + | + |
| Parathyroid Gland | | M | M | + | M | + | + | + | + | + | + |
| Pituitary Gland
Pars Intermedia, Hyperplasia | | + | + | + | + | + | + | + | + | + | + |
| | | | | | 1 | | | | | | |
| Thyroid Gland | | + | + | + | + | + | + | + | + | + | + |
| GENERAL BODY SYSTEM | | | | | | | | | | | |
| NONE | | | | | | | | | | | |
| GENITAL SYSTEM | | | | | | | | | | | |
| Clitoral Gland | | + | + | + | + | + | + | + | + | + | + |
| Ovary | | + | + | + | + | + | + | + | + | + | + |
| Uterus | | + | + | + | + | + | + | + | + | + | + |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 07018 - 02

Test Type: 14-WEEK

Route: DOSED WATER

Species/Strain: MICE/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Ionic Liquid: 1-Ethyl-3-methylimidazolium Chloride

CAS Number: 65039-09-0

Date Report Requested: 01/08/2020

Time Report Requested: 11:05:52

First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

| | | DAY ON TEST | | | | | | | | | | | |
|--------------------------------------|--|-------------|---|---|---|---|---|---|---|---|---|---|---|
| | | ANIMAL ID | | | | | | | | | | | |
| B6C3F1 MICE FEMALE
0 mg/mL female | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 |
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 9 | 0 | 0 |

* TOTALS

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | | |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow | + | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Lymph Node, Mandibular | + | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Spleen | + | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Thymus | + | + | + | + | + | + | + | + | + | + | + | + | 10 |

INTEGUMENTARY SYSTEM

| | | | | | | | | | | | | | |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland | + | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Skin | + | + | + | + | + | + | + | + | + | + | + | + | 10 |

MUSCULOSKELETAL SYSTEM

| | | | | | | | | | | | | | |
|------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone | + | + | + | + | + | + | + | + | + | + | + | + | 10 |
|------|---|---|---|---|---|---|---|---|---|---|---|---|----|

NERVOUS SYSTEM

| | | | | | | | | | | | | | |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain | + | + | + | + | + | + | + | + | + | + | + | + | 10 |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|----|

RESPIRATORY SYSTEM

| | | | | | | | | | | | | | |
|------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung | + | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Nose | + | + | + | + | + | + | + | + | + | + | + | + | 10 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 07018 - 02

Test Type: 14-WEEK

Route: DOSED WATER

Species/Strain: MICE/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Ionic Liquid: 1-Ethyl-3-methylimidazolium Chloride

CAS Number: 65039-09-0

Date Report Requested: 01/08/2020

Time Report Requested: 11:05:52

First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

| | | DAY ON TEST | 0
0
9
2 | 0
0
9
2 | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | ANIMAL ID | 0
0
2
4
1 | 0
0
2
4
2 | 0
0
2
4
5 | 0
0
2
4
6 | 0
0
2
4
7 | 0
0
2
4
8 | 0
0
2
4
9 | 0
0
2
4
0 | | * TOTALS |
| B6C3F1 MICE FEMALE | | | | | | | | | | | | |
| 0 mg/mL female | | | | | | | | | | | | |
| Trachea | | | + | + | + | + | + | + | + | + | + | 10 |
| SPECIAL SENSES SYSTEM | | | | | | | | | | | | |
| Eye | | | + | + | + | + | + | + | + | + | + | 10 |
| Harderian Gland | | | + | + | + | + | + | + | + | + | + | 10 |
| URINARY SYSTEM | | | | | | | | | | | | |
| Kidney | | | + | + | + | + | + | + | + | + | + | 10 |
| Nephropathy, Chronic Progressive | | | | | | | 1 | | | | | 2 1.0 |
| Urinary Bladder | | | + | + | + | + | + | + | + | + | + | 10 |
| Inflammation, Chronic Active | | | 1 | | | | | | | | | 1 1.0 |

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 07018 - 02

Test Type: 14-WEEK

Route: DOSED WATER

Species/Strain: MICE/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Ionic Liquid: 1-Ethyl-3-methylimidazolium Chloride

CAS Number: 65039-09-0

Date Report Requested: 01/08/2020

Time Report Requested: 11:05:52

First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

| B6C3F1 MICE FEMALE
3 mg/mL female | DAY ON TEST | | | | | | | | | | | | |
|--------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|
| | | 0
0
9
2 | 0
0
9
2 | 0
0
9
2 | 0
0
9
2 | 0
0
9
2 |
| ANIMAL ID | 0
0
2
5
1 | 0
0
2
5
2 | 0
0
2
5
3 | 0
0
2
5
4 | 0
0
2
5
5 | 0
0
2
5
6 | 0
0
2
5
7 | 0
0
2
5
8 | 0
0
2
5
9 | 0
0
2
6 | 0
0
2
0 | | |
| | 0
0
2
5
1 | 0
0
2
5
2 | 0
0
2
5
3 | 0
0
2
5
4 | 0
0
2
5
5 | 0
0
2
5
6 | 0
0
2
5
7 | 0
0
2
5
8 | 0
0
2
5
9 | 0
0
2
6 | 0
0
2
0 | * TOTALS | |

ALIMENTARY SYSTEM

NONE

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

Adrenal Cortex
X-zone, Persistent

+ + + + + + + + X

10
1

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

Uterus
Decidual Reaction
Arteriole, Hypertrophy

+
4
2

1
1 4.0
1 2.0

HEMATOPOIETIC SYSTEM

NONE

INTEGUMENTARY SYSTEM

NONE

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

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Experiment Number: 07018 - 02

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Route: DOSED WATER

Species/Strain: MICE/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

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CAS Number: 65039-09-0

Date Report Requested: 01/08/2020

Time Report Requested: 11:05:52

First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

| | | DAY ON TEST | | | | | | | | | | | |
|--|--|-------------|---|---|---|---|---|---|---|---|---|---|---|
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 |
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 9 | 0 | 0 |

* TOTALS

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney
Pelvis, Dilation
Renal Tubule, Cyst

+ + + + + + + + + + +
1
X

10
1 1.0
1

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

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Experiment Number: 07018 - 02

Test Type: 14-WEEK

Route: DOSED WATER

Species/Strain: MICE/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Ionic Liquid: 1-Ethyl-3-methylimidazolium Chloride

CAS Number: 65039-09-0

Date Report Requested: 01/08/2020

Time Report Requested: 11:05:52

First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

| B6C3F1 MICE FEMALE
10 mg/mL female | DAY ON TEST | | | | | | | | | | | | |
|---------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|
| | | 0
0
9
2 | 0
0
9
2 | 0
0
9
2 |
| ANIMAL ID | 0
0
2
6
1 | 0
0
2
6
2 | 0
0
2
6
3 | 0
0
2
6
4 | 0
0
2
6
5 | 0
0
2
6
6 | 0
0
2
6
7 | 0
0
2
6
8 | 0
0
2
6
9 | 0
0
2
6
0 | 0
0
2
6
7 | | |
| | 0
0
2
6
1 | 0
0
2
6
2 | 0
0
2
6
3 | 0
0
2
6
4 | 0
0
2
6
5 | 0
0
2
6
6 | 0
0
2
6
7 | 0
0
2
6
8 | 0
0
2
6
9 | 0
0
2
6
0 | 0
0
2
6
7 | * TOTALS | |

ALIMENTARY SYSTEM

NONE

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

Adrenal Cortex

+ + + + + + + + + +

10

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

NONE

INTEGUMENTARY SYSTEM

NONE

MUSCULOSKELETAL SYSTEM

NONE

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

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Experiment Number: 07018 - 02

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Route: DOSED WATER

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Ionic Liquid: 1-Ethyl-3-methylimidazolium Chloride

CAS Number: 65039-09-0

Date Report Requested: 01/08/2020

Time Report Requested: 11:05:52

First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

| B6C3F1 MICE FEMALE
10 mg/mL female | DAY ON TEST | | | | | | | | | | | | |
|---------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|
| | | 0
0
9
2 | 0
0
9
2 | 0
0
9
2 |
| ANIMAL ID | 0
0
2
6
1 | 0
0
2
6
2 | 0
0
2
6
3 | 0
0
2
6
4 | 0
0
2
6
5 | 0
0
2
6
6 | 0
0
2
6
7 | 0
0
2
6
8 | 0
0
2
6
9 | 0
0
2
6
0 | 0
0
2
6
7 | | |
| | 0
0
2
6
1 | 0
0
2
6
2 | 0
0
2
6
3 | 0
0
2
6
4 | 0
0
2
6
5 | 0
0
2
6
6 | 0
0
2
6
7 | 0
0
2
6
8 | 0
0
2
6
9 | 0
0
2
6
0 | 0
0
2
6
7 | | |

* TOTALS

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney

Nephropathy, Chronic Progressive
Renal Tubule, Cyst

+ + + + + + + + + + +
X

10
1 1.0
1

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 07018 - 02

Test Type: 14-WEEK

Route: DOSED WATER

Species/Strain: MICE/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Ionic Liquid: 1-Ethyl-3-methylimidazolium Chloride

CAS Number: 65039-09-0

Date Report Requested: 01/08/2020

Time Report Requested: 11:05:52

First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

| | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|--|-------------|---|---|---|---|---|---|---|---|---|---|
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | ANIMAL ID | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 |
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |

* TOTALS

ALIMENTARY SYSTEM

| | | | | | | | | | | | |
|------------------------------|---|---|---|---|---|---|---|---|---|---|-------|
| Esophagus | + | + | + | + | + | + | + | + | + | + | 10 |
| Gallbladder | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Large, Cecum | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Large, Colon | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Large, Rectum | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Small, Ileum | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Small, Jejunum | + | + | + | + | + | + | + | + | + | + | 10 |
| Liver | + | + | + | + | + | + | + | + | + | + | 10 |
| Inflammation, Chronic Active | 1 | | | | | | 1 | | | | 3 1.0 |
| Pancreas | + | + | + | + | + | + | + | + | + | + | 10 |
| Salivary Glands | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Glandular | + | + | + | + | + | + | + | + | + | + | 10 |

CARDIOVASCULAR SYSTEM

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 07018 - 02

Test Type: 14-WEEK

Route: DOSED WATER

Species/Strain: MICE/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Ionic Liquid: 1-Ethyl-3-methylimidazolium Chloride

CAS Number: 65039-09-0

Date Report Requested: 01/08/2020

Time Report Requested: 11:05:52

First Dose M/F: 05/08/13 / 05/07/13

Lab: BAT

| B6C3F1 MICE FEMALE
30 mg/mL female | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---------------------------------------|-------------|---|---|---|---|---|---|---|---|---|----|
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID | | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| * TOTALS | | | | | | | | | | | |
| Blood Vessel | | + | + | + | + | + | + | + | + | + | + |
| Heart | | + | + | + | + | + | + | + | + | + | + |
| ENDOCRINE SYSTEM | | | | | | | | | | | |
| Adrenal Cortex
X-zone, Persistent | | + | + | + | + | + | + | + | + | + | + |
| | X | X | X | X | | X | X | X | | X | |
| Adrenal Medulla | | + | + | + | + | + | + | + | + | + | + |
| Islets, Pancreatic | | + | + | + | + | M | + | + | + | + | + |
| Parathyroid Gland | | + | + | + | + | + | + | M | + | + | + |
| Pituitary Gland | | + | + | + | + | + | + | + | + | + | + |
| Thyroid Gland | | + | + | + | + | + | + | + | + | + | + |
| GENERAL BODY SYSTEM | | | | | | | | | | | |
| NONE | | | | | | | | | | | |
| GENITAL SYSTEM | | | | | | | | | | | |
| Clitoral Gland
Atrophy | | + | + | + | + | + | + | + | + | I | |
| | | | | | | | | | | | 4 |
| Ovary | | + | + | + | + | + | + | + | + | + | |
| Uterus | | + | + | + | + | + | + | + | + | + | |
| | | | | | | | | | | | 10 |
| | | | | | | | | | | | 10 |
| | | | | | | | | | | | 10 |

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|---------------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|
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| ANIMAL ID | | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 |
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |

* TOTALS

HEMATOPOIETIC SYSTEM

| | | | | | | | | | | | | |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Lymph Node, Mandibular | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Spleen | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Thymus | + | + | + | + | | + | + | + | + | + | + | 9 |

INTEGUMENTARY SYSTEM

| | | | | | | | | | | | | |
|---------------|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Skin | + | + | + | + | + | + | + | + | + | + | + | 10 |

MUSCULOSKELETAL SYSTEM

| | | | | | | | | | | | | |
|------|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone | + | + | + | + | + | + | + | + | + | + | + | 10 |
|------|---|---|---|---|---|---|---|---|---|---|---|----|

NERVOUS SYSTEM

| | | | | | | | | | | | | |
|-------|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain | + | + | + | + | + | + | + | + | + | + | + | 10 |
|-------|---|---|---|---|---|---|---|---|---|---|---|----|

RESPIRATORY SYSTEM

| | | | | | | | | | | | | |
|------|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung | + | + | + | + | + | + | + | + | + | + | + | 10 |
| Nose | + | + | + | + | + | + | + | + | + | + | + | 10 |

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|---------------------------------------|-------------|----------|---|---|---|---|---|---|---|---|-------|
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID | | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 |
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |
| | | * TOTALS | | | | | | | | | |
| Trachea | | + | + | + | + | + | + | + | + | + | 10 |
| SPECIAL SENSES SYSTEM | | | | | | | | | | | |
| Eye | | + | + | + | + | + | + | + | + | + | 10 |
| Harderian Gland | | + | + | + | + | + | + | + | + | + | 10 |
| URINARY SYSTEM | | | | | | | | | | | |
| Kidney | | + | + | + | + | + | + | + | + | + | 10 |
| Nephropathy, Chronic Progressive | | | | | | | | | | | 1 1.0 |
| Urinary Bladder | | + | + | + | + | + | + | + | + | + | 10 |

*** END OF REPORT ***

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