

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**

**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

**C Number:** C50419  
**Cage Range:** All  
**Date Range:** All  
**Reasons For Removal:** All  
**Removal Date Range:** All  
**Treatment Groups:** All  
**Study Gender:** Female

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_001

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Natural Death

**HISTO:**

---

**OBSERVATIONS**

Brain

Mineralization

Lung

Hemorrhage

Peritoneum

Inflammation, Acute

Uterus

Abscess, Nos

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_002

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_003

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Lung	Alveolar/Bronchiolar Adenoma
Uterus	Endometrial Stromal Polyp
Endometrium	Hyperplasia, Nos

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_004

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Uterus

Endometrium

Hyperplasia, Nos

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_005

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
  
Endometrium

Hyperplasia, Lymphoid  
Hydrometra  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_006

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_007

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Natural Death

**HISTO:**

---

**OBSERVATIONS**

Ovary

Cyst, Nos

Thymus

Teratoma, Nos

Necrosis, Nos

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_008

**TRT#:** 1  
**DOSE:** 50000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Inflammation, Acute

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_009

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_010

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Moribund Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Heart

Periarteritis

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_011

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Lung  
Spleen

Alveolar/Bronchiolar Adenoma  
Hyperplasia, Lymphoid

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_012

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Spleen

Uterus

Lymphoma, Nos-Malignant

Endometrial Stromal Polyp

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_013

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Spleen

Stomach

Uterus

Mucosa

Hyperplasia, Reticulum Cell

Metaplasia, Squamous

Hydrometra

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_014

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Unspecified

Multiple Organs Nos

Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_015

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Intestine Large  
Liver  
Lymph node

Colon

Mesenteric Lymph Node

Nematodiasis  
Hepatocellular Adenoma  
Hyperplasia, Lymphoid

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_016

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Kidney

Infarct, Healed

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_017

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Natural Death

**HISTO:**

---

**OBSERVATIONS**

Liver

Metamorphosis, Fatty

Uterus

Neoplasm, Nos

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_019

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_020

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Stomach

Forestomach

Hyperplasia, Basal Cell

Forestomach

Inflammation, Acute Focal

Forestomach

Papilloma, Nos

---

PRIMARY CAUSE OF DEATH

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_021

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Spleen

Hyperplasia, Lymphoid

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_022

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Unspecified

Multiple Organs Nos

Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_023

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Natural Death

**HISTO:**

---

**OBSERVATIONS**

Liver		Abscess, Nos
Lung		Alveolar/Bronchiolar Adenoma
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_024

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_025

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos

Lymphoma, Nos-Malignant  
Hydrometra

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_026

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

**ANIMAL ID:** 1\_027

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Natural Death

**HISTO:**

**OBSERVATIONS**

Lung		Hemorrhage
Pancreas	Acinus	Degeneration, Cytologic Inflammation, Acute
Peritoneum		Inflammation, Acute
Spleen		Hyperplasia, Granulocytic
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type
Uterus	Endometrium	Inflammation, Acute

**PRIMARY CAUSE OF DEATH**

-

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_028

**TRT#:** 1  
**DOSE:** 50000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Harderian gland  
Ovary  
Spleen  
Uterus

Hardarian Gland  
  
  
  
Endometrium

Adenoma, Nos  
Hyperplasia, Cystic  
Hyperplasia, Lymphoid  
Hydrometra  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_029

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Mammary gland

Adenocarcinoma, Nos

Ovary

Cyst, Nos

Spleen

Hyperplasia, Granulocytic

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_030

**TRT#:** 1  
**DOSE:** 50000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Intestine Large  
Uterus

Cecum, Colon  
Endometrium

Leiomyosarcoma  
Hydrometra  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_031

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Spleen

Hyperplasia, Lymphoid

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_032

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Liver

Clear-Cell Change

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_033

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Uterus

Endometrium

Hyperplasia, Cystic

---

PRIMARY CAUSE OF DEATH

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_034

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Ovary  
Pituitary gland  
Spleen  
Uterus

Endometrium

Cyst, Hemorrhagic  
Adenoma, Nos  
Hyperplasia, Lymphoid  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_035

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_036

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Ovary

Uterus

Endometrium

Cyst, Nos

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_037

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Lymph node  
Uterus

Mesenteric Lymph Node

Angiectasis  
Endometrial Stromal Polyp

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_038

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Uterus

Endometrium

Hyperplasia, Cystic

---

PRIMARY CAUSE OF DEATH

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_039

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Lymph node  
Uterus

Mesenteric Lymph Node  
Endometrium

Hyperplasia, Reticulum Cell  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_040

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Lung		Alveolar/Bronchiolar Adenoma
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_041

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Pituitary gland

Cyst, Nos

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_042

**TRT#:** 1  
**DOSE:** 50000 PPM

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Kidney		Inflammation, Interstitial
Pancreas	Islets	Islet-Cell Adenoma
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_043

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Natural Death

**HISTO:**

---

**OBSERVATIONS**

Uterus

Leiomyosarcoma

---

PRIMARY CAUSE OF DEATH

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_044

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Ovary  
Unspecified

Cyst, Nos  
Fibrosis

Multiple Organs Nos

Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_045

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Natural Death

**HISTO:**

---

**OBSERVATIONS**

Uterus

Leiomyosarcoma

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_046

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Spleen

Hyperplasia, Lymphoid

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_047

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Ovary

Cyst, Nos

Spleen

Hyperplasia, Lymphoid

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_048

**TRT#:** 1  
**DOSE:** 50000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_049

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Liver		Hepatocellular Carcinoma
		Metamorphosis, Fatty
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 1\_050

**TRT#:** 1

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 50000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Spleen

Hyperplasia, Lymphoid

---

PRIMARY CAUSE OF DEATH

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_001

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Moribund Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Heart  
Mammary gland

Degeneration, Nos  
Fibroadenoma

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_002

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Liver	Hepatocellular Carcinoma
Spleen	Hyperplasia, Lymphoid
Uterus	Hydrometra
Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_003

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Kidney	Tubule	Metamorphosis, Fatty
Stomach		Pigmentation, Nos
Uterus		Leiomyoma

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_004

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Moribund Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Pituitary gland

Adenoma, Nos

---

PRIMARY CAUSE OF DEATH

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_005

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos

Lymphoma, Mixed-Malignant Type  
Hydrometra

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_006

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Spleen

Hyperplasia, Lymphoid

Stomach

Inflammation, Acute Focal

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_007

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Moribund Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified

Multiple Organs Nos

Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_008

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Moribund Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Kidney	Tubule	Pigmentation, Nos
Ovary		Cystadenocarcinoma, Nos
Stomach	Omentum Nos	Cystadenocarcinoma, Metastatic

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_009

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Natural Death

**HISTO:**

---

**OBSERVATIONS**

Kidney

Inflammation, Interstitial

Spleen

Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_010

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Uterus

Endometrium

Hyperplasia, Cystic

---

PRIMARY CAUSE OF DEATH

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_011

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Spleen		Hyperplasia, Lymphoid
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_012

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Spleen

Hyperplasia, Lymphoid

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_013

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Pituitary gland  
Stomach  
Unspecified  
Uterus

Forestomach  
Multiple Organs Nos  
Endometrium

Adenoma, Nos  
Hyperplasia, Basal Cell  
Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_014

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Thyroid	
Unspecified	Multiple Organs Nos
Uterus	Endometrium

Follicular-Cell Carcinoma
Lymphoma, Nos-Malignant
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_015

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_016

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Intestine Small

Peyers Patch

Hyperplasia, Lymphoid

Ovary

Cyst, Nos

Spleen

Angiosarcoma

Uterus

Endometrium

Hyperplasia, Nos

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_017

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_018

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Moribund Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Liver		Necrosis, Focal
Lymph node	Lumbar Lymph Node	Hemorrhage
		Squamous Cell Carcinoma, Metastatic
Skin		Squamous Cell Carcinoma

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**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_019

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Moribund Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Unspecified

Multiple Organs Nos

Lymphoma, Mixed-Malignant Type

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_020

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Liver		Hepatocellular Adenoma
Lung		Alveolar/Bronchiolar Adenoma
Stomach	Forestomach	Hyperplasia, Basal Cell
	Forestomach	Ulcer, Focal
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_021

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Spleen		Angiosarcoma
Stomach	Forestomach	Acanthosis
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_022

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Intestine Large  
Intestine Small  
Lymph node  
Pituitary gland  
Spleen  
  
Unspecified

Cecum, Colon  
Ileum, Ileum  
Mesenteric Lymph Node  
  
Follicles  
  
Chest  
Multiple Organs Nos

Edema, Nos  
Congestion, Nos  
Hematoma, Nos  
Adenoma, Nos  
Atrophy, Nos  
Hyperplasia, Granulocytic  
Sarcoma, Nos  
Sarcoma, Nos, Metastatic

---

**PRIMARY CAUSE OF DEATH**

-

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**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_023

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Ovary		Papillary Cystadenoma, Nos
Pituitary gland		Adenoma, Nos
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant
Uterus		Hydrometra

---

**PRIMARY CAUSE OF DEATH**

-

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**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_024

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Sarcoma, Nos  
Hydrometra

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_025

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Intestine Small  
Ovary  
Spleen  
Uterus

Mesentery Nos  
  
Endometrium  
Endometrium

Cyst, Nos  
Cyst, Nos  
Hyperplasia, Lymphoid  
Hyperplasia, Cystic  
Inflammation, Acute

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_026

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Natural Death

**HISTO:**

---

**OBSERVATIONS**

Unspecified

Multiple Organs Nos

Lymphoma, Lymphocytic-Malignant Type

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_027

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Liver

Cytoplasmic Change, Basophilic

Necrosis, Focal

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_028

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Ovary

Cyst, Hemorrhagic

Unspecified

Multiple Organs Nos

Hyperplasia, Lymphoid

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_029

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Spleen

Hyperplasia, Lymphoid

Stomach

Papilloma, Nos

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_030

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Spleen		Lymphoma, Nos-Malignant
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_031

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_032

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Lung		Alveolar/Bronchiolar Carcinoma
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_033

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Thyroid  
Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Cyst, Nos  
Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_034

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Ovary

Cyst, Hemorrhagic

Spleen

Lymphoma, Nos-Malignant

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_035

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Lung		Perivasculitis
Spleen		Hyperplasia, Lymphoid
Stomach	Omentum Nos	Necrosis, Fat
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_036

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Ovary

Mineralization

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_037

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Ovary		Cyst, Parovarian
Pancreas	Acinus	Atrophy, Focal
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_038

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_039

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Ovary		Cyst, Hemorrhagic
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_040

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Intestine Small  
Peritoneum  
Unspecified

Mesentery Nos

Necrosis, Fat  
Sarcoma, Nos, Metastatic  
Sarcoma, Nos  
Sarcoma, Nos, Metastatic

Axilla

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_041

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Ovary

Cyst, Nos

Spleen

Hyperplasia, Lymphoid

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_043

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Stomach	Omentum Nos
Unspecified	Multiple Organs Nos
Uterus	Endometrium

Necrosis, Fat
Lymphoma, Nos-Malignant
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_044

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Ovary		Mineralization
Pituitary gland		Cyst, Nos
Stomach		Hyperplasia, Basal Cell
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_045

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Spleen

Hyperplasia, Lymphoid

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_046

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic  
Inflammation, Acute

---

**PRIMARY CAUSE OF DEATH**

-

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**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_047

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Spleen		Hyperplasia, Lymphoid
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_048

**TRT#:** 2  
**DOSE:** 25000 PPM

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified

Multiple Organs Nos

Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_049

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Natural Death

**HISTO:**

---

**OBSERVATIONS**

Blood

Hematopoietic System

Neoplasm, Nos

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**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 2\_050

**TRT#:** 2

**SEX:** Female

**DAY ON TEST:**

**DOSE:** 25000 PPM

**DISP:** Scheduled Sacrifice

**HISTO:**

---

**OBSERVATIONS**

Spleen

Hyperplasia, Lymphoid

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_001

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Thymus  
Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Cyst, Nos  
Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_002

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Heart		Mineralization
Liver		Metamorphosis, Fatty
		Necrosis, Nos
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_003

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Stomach	
Unspecified	Multiple Organs Nos
Uterus	Endometrium

Inflammation, Acute Focal  
Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_004

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Salivary gland  
Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Fibrosis, Diffuse  
Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_005

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_006

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Bone  
Liver

Skull

Hyperplasia, Nos  
Hemangiosarcoma

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_007

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified

Multiple Organs Nos

Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_008

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Lung		Alveolar/Bronchiolar Adenoma
Spleen		Hyperplasia, Lymphoid
Stomach		Papilloma, Nos
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_009

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Lymph node  
Unspecified  
Uterus

Mesenteric Lymph Node  
Multiple Organs Nos  
Endometrium

Angiectasis  
Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_010

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_011

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified

Multiple Organs Nos

Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_012

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Ovary		Cyst, Nos
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_013

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Lung		Alveolar/Bronchiolar Carcinoma
Ovary		Cyst, Nos
Spleen		Lymphoma, Nos-Malignant
Uterus	Endometrium	Hyperplasia, Cystic
	Endometrium	Inflammation, Acute

---

**PRIMARY CAUSE OF DEATH**

-

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**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_014

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Lung		Alveolar/Bronchiolar Carcinoma
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant
Uterus	Endometrium	Inflammation, Necrotizing

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_015

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Adrenal gland  
Lung

Lymph node  
Unspecified  
Uterus

Mesenteric Lymph Node  
Multiple Organs Nos  
Endometrium

Pheochromocytoma  
Alveolar/Bronchiolar Adenoma  
Inflammation, Focal  
Lymphangiectasis  
Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_016

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified

Multiple Organs Nos

Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_017

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Spleen  
Unspecified

Multiple Organs Nos

Hyperplasia, Granulocytic  
Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_018

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Brain

Meningioma, Benign

---

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

**ANIMAL ID:** 3\_019

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

**OBSERVATIONS**

Kidney		Glomerulosclerosis, Nos
Ovary		Abscess, Nos
Pancreas		Abscess, Nos
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant
Uterus	Endometrium	Hyperplasia, Cystic
	Endometrium	Inflammation, Necrotizing

**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_020

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Ovary		Cyst, Nos
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_021

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Pancreas

Atrophy, Nos

Dilatation, Ducts

Inflammation, Nos

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_022

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Kidney		Inflammation, Interstitial
Pancreas	Islets	Islet-Cell Carcinoma
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_023

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium  
Fallopian Tube

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic  
Papillary Adenoma

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_024

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Thyroid	
Unspecified	Multiple Organs Nos
Uterus	Endometrium

Follicular-Cell Adenoma
Lymphoma, Nos-Malignant
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_025

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified

Multiple Organs Nos

Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_026

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Ovary

Cyst, Hemorrhagic

Spleen

Cyst, Nos

Uterus

Endometrium

Hyperplasia, Lymphoid

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_027

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Lung		Papillary Adenocarcinoma, Metastatic
Mammary gland		Papillary Adenocarcinoma
Uterus	Endometrium	Inflammation, Acute

---

**PRIMARY CAUSE OF DEATH**

-

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**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_028

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Liver		Angiosarcoma
Spleen		Hyperplasia, Lymphoid
Stomach		Mast-Cell Sarcoma
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_029

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Brain

Malacia  
Meningioma, Benign  
Cyst, Nos  
Acanthosis  
Hyperkeratosis

Ovary

Stomach

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_030

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Liver	Bile Duct	Cyst, Nos Hepatocellular Carcinoma
Ovary		Cyst, Nos
Spleen		Hyperplasia, Lymphoid
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_031

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Ovary		Cyst, Nos
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_032

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Blood	Hematopoietic System
Brain	Cerebellum Nos
Kidney	Tubule
Liver	Tubule

Neoplasm, Nos
Gliosis
Necrosis, Focal
Regeneration, Nos
Necrosis, Nos

---

**PRIMARY CAUSE OF DEATH**

-

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**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_033

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified

Multiple Organs Nos

Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_034

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Kidney		Glomerulosclerosis, Nos
Lymph node	Mesenteric Lymph Node	Angiectasis
Pituitary gland		Hyperplasia, Focal
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

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**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_035

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Liver		Hepatocellular Adenoma
Spleen		Angiectasis
Stomach	Omentum Nos	Necrosis, Fat
Uterus	Endometrium	Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_036

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type

---

**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_037

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_038

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Ovary  
Unspecified

Multiple Organs Nos

Cyst, Hemorrhagic  
Lymphoma, Nos-Malignant

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_039

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Uterus

Endometrium

Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_040

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_041

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Liver		Hepatocellular Carcinoma
Ovary		Hyperplasia, Granulosa Cell
Spleen		Hemorrhage
Unspecified	Multiple Organs Nos	Hemangiosarcoma

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_042

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Blood

Hematopoietic System

Neoplasm, Nos

---

PRIMARY CAUSE OF DEATH

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_043

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Harderian gland  
Ovary  
Spleen  
Uterus

Hardarian Gland  
  
Endometrium

Adenoma, Nos  
Cyst, Hemorrhagic  
Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_044

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

---

**OBSERVATIONS**

Brain		Mineralization
Lung		Alveolar/Bronchiolar Carcinoma
Lymph node	Bronchial Lymph Node	Alveolar/Bronchiolar Carcinoma, Metastatic
Unspecified	Mediastinum Nos	Alveolar/Bronchiolar Carcinoma, Metastatic

---

**PRIMARY CAUSE OF DEATH**

-

---

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

---

**ANIMAL ID:** 3\_045

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

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**OBSERVATIONS**

Ovary  
Spleen  
Uterus

Endometrium

Cyst, Nos  
Hyperplasia, Lymphoid  
Hyperplasia, Cystic

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**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE



**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

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**ANIMAL ID:** 3\_046

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Moribund Sacrifice

**DAY ON TEST:**  
**HISTO:**

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**OBSERVATIONS**

Pancreas	Islets
Peritoneum	
Stomach	Omentum Nos

Islet-Cell Adenoma  
Inflammation, Acute  
Necrosis, Fat

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**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

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**ANIMAL ID:** 3\_047

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

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**OBSERVATIONS**

Mammary gland

Pancreas

Stomach

Unspecified

Uterus

Forestomach

Forestomach

Multiple Organs Nos

Endometrium

Adenocarcinoma, Nos

Dilatation, Ducts

Acanthosis

Inflammation, Acute Focal

Lymphoma, Nos-Malignant

Hyperplasia, Cystic

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**PRIMARY CAUSE OF DEATH**

-

\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

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**ANIMAL ID:** 3\_048

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

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**OBSERVATIONS**

Spleen

Hyperplasia, Lymphoid

Uterus

Endometrium

Hyperplasia, Cystic

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**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

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**ANIMAL ID:** 3\_049

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Scheduled Sacrifice

**DAY ON TEST:**  
**HISTO:**

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**OBSERVATIONS**

Unspecified  
Uterus

Multiple Organs Nos  
Endometrium

Lymphoma, Nos-Malignant  
Hyperplasia, Cystic

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**PRIMARY CAUSE OF DEATH**

-

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\* PROTOCOL REQUIRED TISSUE

**Experiment Number:** C50419  
**Test Type:** Long-Term  
**Route:** Dosed-Feed  
**Species/Strain:** Mouse/B6C3F1

**P14: INDIVIDUAL ANIMAL PATHOLOGY DATA**  
**Test Compound:** Locust bean gum  
**CAS Number:** 9000-40-2

**Date Report Requested:** 10/26/2014  
**Time Report Requested:** 11:17:59  
**First Dose M/F:** NA / NA  
**Lab:** NA

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**ANIMAL ID:** 3\_050

**TRT#:** 3  
**DOSE:** 0

**SEX:** Female  
**DISP:** Natural Death

**DAY ON TEST:**  
**HISTO:**

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**OBSERVATIONS**

Liver		Necrosis, Focal
Unspecified	Multiple Organs Nos	Lymphoma, Nos-Malignant

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**PRIMARY CAUSE OF DEATH**

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**\*\* END OF REPORT \*\***