

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

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: Male

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_001

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Kidney		Nephrosis, Nos
Liver	Bile Duct	Hyperplasia, Nos Inflammation, Active Chronic
Prostate		Pus
Spleen		Fibrosis, Focal
Testis		Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_002

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_003

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Pituitary gland

Testis

Unspecified

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Adenoma, Nos

Interstitial-Cell Tumor

Fibrosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_004

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Brain	Cerebellum Nos	Hemorrhage
Testis		Interstitial-Cell Tumor
Unspecified	Multiple Organs Nos	Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_005

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_006

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Liver

Testis

Bile Duct

Pheochromocytoma

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_007

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland
Intestine Large
Kidney
Liver
Pituitary gland
Unspecified

Colon

Bile Duct

Multiple Organs Nos

Pheochromocytoma
Nematodiasis
Nephrosis, Nos
Hyperplasia, Nos
Adenoma, Nos
Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_008

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_009

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Testis

Unspecified

Multiple Organs Nos

Pheochromocytoma

Nephrosis, Nos

Interstitial-Cell Tumor

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_010

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney		Nephrosis, Nos
Liver	Bile Duct	Hyperplasia, Nos
Stomach	Omentum Nos	Mesothelioma, Nos
Testis		Interstitial-Cell Tumor
Unspecified	Multiple Organs Nos	Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_011

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Medulla

Hyperplasia, Focal

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_012

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_013

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Tunica Vaginalis

Interstitial-Cell Tumor

Mesothelioma, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_014

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_015

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_016

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Liver		Necrosis, Focal
Lung		Edema, Nos
		Hemorrhage
Testis		Interstitial-Cell Tumor
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: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_017

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Liver

Testis

Bile Duct

Pheochromocytoma

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_018

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Heart

Left Ventricle Nos

Fibrosis

Atrium

Thrombus, Mural

Kidney

Nephrosis, Nos

Liver

Kupffer Cell

Hemosiderosis

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_019

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Heart

Left Ventricle Nos

Fibrosis

Kidney

Nephrosis, Nos

Liver

Centrilobular

Necrosis, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_020

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_021

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Intestine Large
Kidney
Liver
Pancreas
Pituitary gland
Testis

Colon

Bile Duct
Islets

Nematodiasis
Nephrosis, Nos
Hyperplasia, Nos
Islet-Cell Adenoma
Adenoma, Nos
Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_022

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Intestine Large

Colon

Nematodiasis

Kidney

Nephrosis, Nos

Liver

Cytoplasmic Change, Basophilic

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_023

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney
Preputial gland

Nephrosis, Nos
Hyperplasia, Nos
Pus

Testis
Unspecified

Interstitial-Cell Tumor
Fibroma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_024

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Heart	Atrium	Thrombus, Mural
Kidney		Nephrosis, Nos
Liver	Centrilobular	Necrosis, Nos
Stomach	Mucosa	Ulcer, Nos
Testis		Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_025

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Skin

Testis

Urinary bladder

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Squamous Cell Papilloma

Interstitial-Cell Tumor

Parasitism

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_026

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Cortex

Pheochromocytoma

Hamartoma

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Lymph node

Mesenteric Lymph Node

Congestion, Nos

Skin

Trichoepithelioma

Testis

Interstitial-Cell Tumor

Thyroid

C-Cell Adenoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_027

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Heart	Atrium	Thrombus, Mural
Kidney		Nephrosis, Nos
Liver		Hepatocellular Carcinoma
Pituitary gland		Adenoma, Nos
Prostate		Inflammation, Suppurative
Testis		Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_028

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney
Pituitary gland
Testis

Nephrosis, Nos
Adenoma, Nos
Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_029

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney		Nephrosis, Nos
Liver	Bile Duct	Hyperplasia, Nos
Prostate		Inflammation, Suppurative
Testis		Interstitial-Cell Tumor
Unspecified	Multiple Organs Nos	Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_030

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Medulla

Hyperplasia, Focal

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Pituitary gland

Adenoma, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_031

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Tail

Squamous Cell Papilloma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_032

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_033

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_034

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Fibrosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_035

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Intestine Large

Colon

Nematodiasis

Kidney

Nephrosis, Nos

Liver

Clear-Cell Change

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_036

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Blood vessel

Intestine Small

Kidney

Testis

Sup.Panc-Duod.Artery

Sup.Panc-Duod.Artery

Mesentery Nos

Mesentery Nos

Pheochromocytoma

Calcification, Medial

Hyperplasia, Nos

Necrosis, Fat

Steatitis

Nephrosis, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_037

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Adipose Tissue

Inflammation, Chronic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_038

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Medulla

Hyperplasia, Focal

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_039

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Brain	Cortex	Malacia
Kidney		Hemosiderosis
		Nephrosis, Nos
Testis		Interstitial-Cell Tumor
	Scrotum Nos	Necrosis, Fat
	Scrotum Nos	Steatitis
Unspecified	Tail	Cyst, Epidermal Inclusion
	Multiple Organs Nos	Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_040

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Ear	External Ear	Fibrosarcoma
Kidney		Nephrosis, Nos
Liver		Metamorphosis, Fatty
Stomach	Omentum Nos	Necrosis, Fat
Testis		Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_041

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Testis

Unspecified

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

Sarcoma, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_042

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_043

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney		Nephrosis, Nos
Liver		Cytoplasmic Change, Ground-Glass
	Bile Duct	Hyperplasia, Nos
Testis		Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_044

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_045

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney		Nephrosis, Nos
Liver	Bile Duct	Hyperplasia, Nos
Mammary gland		Adenocarcinoma, Nos
Testis		Interstitial-Cell Tumor
Unspecified	Multiple Organs Nos	Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_046

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Liver

Pancreas

Testis

Bile Duct

Islets

Pheochromocytoma

Nephrosis, Nos

Cytoplasmic Change, Basophilic

Hyperplasia, Nos

Islet-Cell Carcinoma

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_047

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Cytoplasmic Change, Basophilic

Pituitary gland

Adenoma, Nos

Skin

Hyperkeratosis

Testis

Interstitial-Cell Tumor

Thyroid

Follicle

Hyperplasia, Papillary

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_048

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Metamorphosis, Fatty

Pituitary gland

Carcinoma, Nos

Stomach

Forestomach

Inflammation, Acute

Testis

Interstitial-Cell Tumor

Thyroid

C-Cell Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_049

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney
Pituitary gland
Testis

Nephrosis, Nos
Adenoma, Nos
Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_050

TRT#: 1

SEX: Male

DAY ON TEST:

DOSE: 50000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_001

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Adrenal gland

Heart

Kidney

Liver

Preputial gland

Testis

Atrium

Bile Duct

Centrilobular

Pheochromocytoma

Thrombus, Mural

Nephrosis, Nos

Atrophy, Nos

Hyperplasia, Nos

Metamorphosis, Fatty

Hyperplasia, Nos

Pus

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_002

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_003

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Intestine Large

Intestine Small

Kidney

Liver

Testis

Colon

Mesentery Nos

Mesentery Nos

Bile Duct

Nematodiasis

Calcification, Nos

Steatitis

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_004

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Preputial gland

Bile Duct

Testis

Thyroid

Nephrosis, Nos

Hyperplasia, Nos

Hyperplasia, Nos

Pus

Interstitial-Cell Tumor

Hyperplasia, C Cell

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_005

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Liver

Pituitary gland

Testis

Unspecified

Bile Duct

Pheochromocytoma

Nephrosis, Nos

Hyperplasia, Nos

Adenoma, Nos

Interstitial-Cell Tumor

Fibroma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_006

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Adrenal gland

Testis

Pheochromocytoma

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_007

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Brain	Cerebellum Nos	Hemorrhage
Intestine Small	Mesentery Nos	Calcification, Nos
	Mesentery Nos	Necrosis, Fat
Kidney		Nephrosis, Nos
Liver	Bile Duct	Hyperplasia, Nos
		Necrosis, Nos
Prostate		Inflammation, Chronic
Spleen	Follicles	Atrophy, Nos
		Degeneration, Hyaline
Testis		Interstitial-Cell Tumor
Unspecified	Multiple Organs Nos	Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_008

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Testis

Pheochromocytoma

Nephrosis, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_009

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_010

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_011

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Pituitary gland

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Adenoma, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_012

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Pituitary gland

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Adenoma, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_013

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney

Hemosiderosis

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_014

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_015

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_016

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Testis

Thyroid

Bile Duct

Follicle

Nephrosis, Nos

Focal Cellular Change

Hyperplasia, Nos

Interstitial-Cell Tumor

Papillary Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_017

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Medulla

Hyperplasia, Focal

Pheochromocytoma

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_018

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Kidney

Prostate

Testis

Unspecified

Back

Multiple Organs Nos

Nephrosis, Nos

Inflammation, Suppurative

Interstitial-Cell Tumor

Hibernoma

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_019

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Intestine Large
Intestine Small
Kidney
Liver
Pituitary gland
Prostate
Testis

Colon
Mesentery Nos

Bile Duct

Nematodiasis
Steatitis
Nephrosis, Nos
Hyperplasia, Nos
Adenoma, Nos
Inflammation, Suppurative
Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_020

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney		Nephrosis, Nos
Liver	Bile Duct	Hyperplasia, Nos
Pituitary gland		Adenoma, Nos
Testis		Interstitial-Cell Tumor
Unspecified	Multiple Organs Nos	Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_021

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_022

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_023

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Intestine Large

Colon

Nematodiasis

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Pituitary gland

Adenoma, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_024

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Liver

Testis

Bile Duct

Pheochromocytoma

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_025

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Intestine Large

Colon

Nematodiasis

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

Thyroid

C-Cell Carcinoma

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_026

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney
Preputial gland
Testis

Nephrosis, Nos
Carcinoma, Nos
Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_027

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Liver

Pituitary gland

Testis

Unspecified

Bile Duct

Multiple Organs Nos

Pheochromocytoma

Nephrosis, Nos

Hyperplasia, Nos

Cyst, Nos

Interstitial-Cell Tumor

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_028

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Intestine Large

Colon

Nematodiasis

Kidney

Nephrosis, Nos

Skin

Acanthosis

Hyperkeratosis

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_029

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney	Cortex	Cyst, Nos Hemosiderosis Nephrosis, Nos
Prostate		Inflammation, Suppurative
Testis	Tubule	Degeneration, Nos Interstitial-Cell Tumor
Unspecified	Multiple Organs Nos	Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_030

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Pancreas

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Periarteritis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_031

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Cytoplasmic Change, Basophilic

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_032

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney

Pelvis

Calcification, Nos

Hyperplasia, Papillary

Papilla

Necrosis, Focal

Testis

Interstitial-Cell Tumor

Unspecified

Fibroma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_033

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_034

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Liver

Preputial gland

Spleen

Testis

Bile Duct

Pheochromocytoma

Nephrosis, Nos

Hyperplasia, Nos

Carcinoma, Nos

Hematopoiesis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_035

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Testis

Unspecified

Interstitial-Cell Tumor

Fibrosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_036

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney
Preputial gland

Nephrosis, Nos
Hyperplasia, Nos
Pus

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_037

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Mammary gland

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Fibroadenoma

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_038

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Liver

Bile Duct

Lung

Testis

Pheochromocytoma

Nephrosis, Nos

Hyperplasia, Nos

Neoplastic Nodule

Inflammation, Interstitial

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_039

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney
Preputial gland
Testis

Nephrosis, Nos
Carcinoma, Nos
Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_040

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney
Preputial gland

Nephrosis, Nos
Hyperplasia, Nos
Pus

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_041

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Intestine Small

Mesentery Nos

Steatitis

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Necrosis, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_042

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Natural Death

HISTO:

OBSERVATIONS

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_043

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Intestine Small

Mesentery Nos

Steatitis

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Preputial gland

Carcinoma, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Mesothelioma, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_044

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Heart	Myocardium Nos	Fibrosis
Intestine Large	Colon	Nematodiasis
Kidney		Nephrosis, Nos
Liver		Hepatocellular Carcinoma
Testis		Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_045

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_046

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_047

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Spleen

Testis

Nephrosis, Nos

Hemangiosarcoma

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_048

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Mammary gland

Fibroadenoma

Stomach

Omentum Nos

Steatitis

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_049

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Liver

Testis

Unspecified

Bile Duct

Multiple Organs Nos

Pheochromocytoma

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

Fibroma

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_050

TRT#: 2

SEX: Male

DAY ON TEST:

DOSE: 25000 PPM

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Pancreas

Islets

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_001

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_002

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Heart

Kidney

Liver

Testis

Bile Duct

Fibrosis, Diffuse

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_003

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Natural Death

HISTO:

OBSERVATIONS

Intestine Small

Ileum, Ileum

Mucinous Cystadenocarcinoma

Kidney

Tubule

Necrosis, Cortical

Lung

Nephrosis, Nos

Testis

Inflammation, Suppurative

Unspecified

Multiple Organs Nos

Interstitial-Cell Tumor

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_004

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

Groin

Necrosis, Fat

Groin

Steatitis

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_005

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Intestine Large

Colon

Nematodiasis

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_006

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Natural Death

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_007

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Pancreas

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Periarteritis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_008

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Natural Death

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Preputial gland

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_009

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Hyperplasia, Focal

Kidney

Pheochromocytoma

Liver

Bile Duct

Nephrosis, Nos

Nasal cavity

Hyperplasia, Nos

Pancreas

Nose Nos

Squamous Cell Papilloma

Pituitary gland

Islets

Islet-Cell Adenoma

Preputial gland

Adenoma, Nos

Testis

Inflammation, Acute

Scrotum Nos

Interstitial-Cell Tumor

Squamous Cell Papilloma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_010

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Medulla

Hyperplasia, Focal

Kidney

Nephrosis, Nos

Pancreas

Islets

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Cyst, Epidermal Inclusion

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_011

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Spleen

Testis

Unspecified

Multiple Organs Nos

Erythropoiesis

Interstitial-Cell Tumor

Leukemia, Myelomonocytic

Pus

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_012

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Brain	Cerebrum	Cyst, Nos
Intestine Small	Mesentery Nos	Necrosis, Fat
Kidney		Nephrosis, Nos
Liver	Bile Duct	Hyperplasia, Nos
Pituitary gland		Cyst, Hemorrhagic
Preputial gland		Inflammation, Chronic
Testis	Tubule	Degeneration, Nos
		Interstitial-Cell Tumor
Unspecified	Tail	Fibrosarcoma
	Multiple Organs Nos	Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_013

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_014

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Preputial gland

Abscess, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_015

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Pheochromocytoma

Kidney

Nephrosis, Nos

Mammary gland

Fibroadenoma

Preputial gland

Inflammation, Acute

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_016

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Pancreas

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Inflammation, Interstitial

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_017

TRT#: 3

DOSE: 0

SEX: Male

DISP: Scheduled Sacrifice

DAY ON TEST:

HISTO:

OBSERVATIONS

Kidney

Liver

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_018

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_019

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Skin

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Squamous Cell Papilloma

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_020

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney
Preputial gland

Nephrosis, Nos
Hyperplasia, Nos
Pus

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_021

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Liver

Bile Duct

Preputial gland

Testis

Cortical Adenoma

Nephrosis, Nos

Hyperplasia, Nos

Metamorphosis, Fatty

Hyperplasia, Nos

Pus

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_022

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Cytoplasmic Change, Basophilic

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

Thyroid

Hyperplasia, C Cell

Unspecified

Multiple Organs Nos

Mesothelioma, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_023

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Mammary gland

Hyperplasia, Cystic

Pituitary gland

Carcinoma, Nos

Spleen

Hemosiderosis

Testis

Tubule

Degeneration, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_024

TRT#: 3

DOSE: 0

SEX: Male

DISP: Scheduled Sacrifice

DAY ON TEST:

HISTO:

OBSERVATIONS

Heart

Kidney

Liver

Pituitary gland

Spleen

Testis

Bile Duct

Periarteritis

Nephrosis, Nos

Hyperplasia, Nos

Adenoma, Nos

Sarcoma, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_025

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Pituitary gland

Testis

Thyroid

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Adenoma, Nos

Interstitial-Cell Tumor

C-Cell Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_026

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Heart

Kidney

Liver

Testis

Thyroid

Bile Duct

Fibrosis

Nephrosis, Nos

Hyperplasia, Nos

Interstitial-Cell Tumor

C-Cell Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_027

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Heart

Intestine Small

Kidney

Liver

Preputial gland

Testis

Mesentery Nos

Bile Duct

Fibrosis

Steatitis

Nephrosis, Nos

Hyperplasia, Nos

Carcinoma, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_028

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Lymph node

Mesenteric Lymph Node

Cyst, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_029

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Natural Death

HISTO:

OBSERVATIONS

Brain	Cerebellum Nos	Hemorrhage
Kidney		Nephrosis, Nos
Testis		Interstitial-Cell Tumor
Unspecified	Multiple Organs Nos	Leukemia, Myelomonocytic
		Lipoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_030

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_031

TRT#: 3

DOSE: 0

SEX: Male

DISP: Scheduled Sacrifice

DAY ON TEST:

HISTO:

OBSERVATIONS

Kidney

Testis

Unspecified

Nephrosis, Nos

Interstitial-Cell Tumor

Fibrosarcoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_032

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Natural Death

HISTO:

OBSERVATIONS

Adrenal gland

Hyperplastic Nodule

Kidney

Pheochromocytoma

Lung

Nephrosis, Nos

Prostate

Inflammation, Interstitial

Testis

Inflammation, Suppurative

Unspecified

Multiple Organs Nos

Interstitial-Cell Tumor

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_033

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney		Nephrosis, Nos
Liver	Bile Duct	Hyperplasia, Nos
Pituitary gland		Adenoma, Nos
Testis		Interstitial-Cell Tumor
Unspecified	Adipose Tissue	Inflammation, Chronic
	Adipose Tissue	Necrosis, Fat
Urinary bladder		Transitional-Cell Papilloma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_034

TRT#: 3

DOSE: 0

SEX: Male

DISP: Scheduled Sacrifice

DAY ON TEST:

HISTO:

OBSERVATIONS

Adrenal gland

Kidney

Parathyroid gland

Skin

Testis

Thyroid

Unspecified

Multiple Organs Nos

Pheochromocytoma

Nephrosis, Nos

Hyperplasia, Nos

Hyperkeratosis

Interstitial-Cell Tumor

C-Cell Adenoma

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_035

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Intestine Large

Colon

Kidney

Nematodiasis

Preputial gland

Nephrosis, Nos

Testis

Carcinoma, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_036

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Bile Duct

Hyperplasia, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_037

TRT#: 3

DOSE: 0

SEX: Male

DISP: Scheduled Sacrifice

DAY ON TEST:

HISTO:

OBSERVATIONS

Kidney

Liver

Pituitary gland

Preputial gland

Testis

Thyroid

Nephrosis, Nos

Cytoplasmic Change, Basophilic

Carcinoma, Nos

Hyperplasia, Nos

Pus

Interstitial-Cell Tumor

Hyperplasia, C Cell

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_038

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Adrenal gland

Medulla

Hyperplasia, Focal

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_039

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Natural Death

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_040

TRT#: 3

DOSE: 0

SEX: Male

DISP: Scheduled Sacrifice

DAY ON TEST:

HISTO:

OBSERVATIONS

Kidney

Testis

Nephrosis, Nos

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_041

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Hepatocellular Carcinoma

Preputial gland

Hyperplasia, Nos

Pus

Stomach

Forestomach

Squamous Cell Papilloma

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_042

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Natural Death

HISTO:

OBSERVATIONS

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_043

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Intestine Small

Mesentery Nos

Necrosis, Fat

Kidney

Mesentery Nos

Steatitis

Liver

Bile Duct

Nephrosis, Nos

Pituitary gland

Hyperplasia, Nos

Testis

Adenoma, Nos

Unspecified

Multiple Organs Nos

Interstitial-Cell Tumor

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_044

TRT#: 3

DOSE: 0

SEX: Male

DISP: Scheduled Sacrifice

DAY ON TEST:

HISTO:

OBSERVATIONS

Kidney
Pituitary gland
Testis
Thyroid

Nephrosis, Nos
Carcinoma, Nos
Interstitial-Cell Tumor
C-Cell Carcinoma

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_045

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Natural Death

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Liver

Cytoplasmic Change, Basophilic

Bile Duct

Hyperplasia, Nos

Preputial gland

Carcinoma, Nos

Testis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_046

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney

Nephrosis, Nos

Testis

Necrosis, Nos

Unspecified

Multiple Organs Nos

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_047

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Kidney

Liver

Skin

Testis

Bile Duct

Nephrosis, Nos

Hyperplasia, Nos

Hyperkeratosis

Interstitial-Cell Tumor

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_048

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Liver	Bile Duct	Hyperplasia, Nos
Testis		Interstitial-Cell Tumor
Unspecified		Inflammation, Chronic Focal

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_049

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Moribund Sacrifice

HISTO:

OBSERVATIONS

Kidney

Tubule

Hemosiderosis

Pyelonephritis, Acute

Skin

Inflammation, Acute

Stomach

Mucosa

Calcification, Nos

PRIMARY CAUSE OF DEATH

-

* PROTOCOL REQUIRED TISSUE

Experiment Number: C50419

Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Rat/F344

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: Locust bean gum

CAS Number: 9000-40-2

Date Report Requested: 10/26/2014

Time Report Requested: 11:18:15

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_050

TRT#: 3

SEX: Male

DAY ON TEST:

DOSE: 0

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Intestine Small

Mesentery Nos

Necrosis, Fat

Kidney

Mesentery Nos

Steatitis

Liver

Bile Duct

Nephrosis, Nos

Testis

Hyperplasia, Nos

Thyroid

Interstitial-Cell Tumor

Unspecified

Multiple Organs Nos

C-Cell Carcinoma

Leukemia, Myelomonocytic

PRIMARY CAUSE OF DEATH

-

**** END OF REPORT ****