

**Experiment Number:** 88032-04  
**Test Type:** 90-DAY  
**Route:** GAVAGE  
**Species/Strain:** Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
**Test Compound:** Oxymetholone  
**CAS Number:** 434-07-1

**Date Report Requested:** 10/21/2014  
**Time Report Requested:** 18:23:53  
**First Dose M/F:** NA / NA  
**Lab:** BAT

<b>C Number:</b>	C88032B
<b>Lock Date:</b>	02/03/1993
<b>Cage Range:</b>	All
<b>Date Range:</b>	All
<b>Reasons For Removal:</b>	All
<b>Removal Date Range:</b>	All
<b>Treatment Groups:</b>	All
<b>Study Gender:</b>	Both
<b>PWG Approval Date</b>	NONE

Experiment Number: 88032-04  
 Test Type: 90-DAY  
 Route: GAVAGE  
 Species/Strain: Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**

Test Compound: Oxymetholone  
 CAS Number: 434-07-1

Date Report Requested: 10/21/2014  
 Time Report Requested: 18:23:53  
 First Dose M/F: NA / NA  
 Lab: BAT

**B6C3F1 Mouse Male**  
**0 MG/KG**

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	3	3	3	3	3	3	3	3	3	3
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	1	0
	1	2	3	4	5	6	7	8	9	0
	<b>*TOTALS</b>									

**Alimentary System**

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

**Cardiovascular System**

Blood Vessel	+	+	+	+	+	+	+	+	+	+	10
Heart	+	+	+	+	+	+	+	+	+	+	10

**Endocrine System**

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	10
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	10
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	10

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04  
 Test Type: 90-DAY  
 Route: GAVAGE  
 Species/Strain: Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
 Test Compound: Oxymetholone  
 CAS Number: 434-07-1

Date Report Requested: 10/21/2014  
 Time Report Requested: 18:23:53  
 First Dose M/F: NA / NA  
 Lab: BAT

B6C3F1 Mouse Male 0 MG/KG	DAY ON TEST										*TOTALS
	0	0	0	0	0	0	0	0	0	0	
	9	9	9	9	9	9	9	9	9	9	
	3	3	3	3	3	3	3	3	3	3	
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	1	
	1	2	3	4	5	6	7	8	9	0	
Parathyroid Gland	+	+	M	+	+	+	+	+	+	+	9
Pituitary Gland	+	M	M	+	+	+	+	+	+	+	8
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	10
<b>General Body System</b>											
NONE											
<b>Genital System</b>											
Epididymis	+	+	+	+	+	+	+	+	+	+	10
Preputial Gland	+	+	+	+	+	+	+	+	+	+	10
Prostate	+	+	+	+	+	+	+	+	+	+	10
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	10
Testes	+	+	+	+	+	+	+	+	+	+	10
<b>Hematopoietic System</b>											
Bone Marrow	+	+	+	+	+	+	+	+	+	+	10
Lymph Node, Mandibular	+	+	+	+	+	+	+	+	+	+	10
Lymph Node, Mesenteric	+	+	+	+	+	M	+	+	+	+	9
Spleen	+	+	+	+	+	+	+	+	+	+	10
Thymus	+	+	+	+	+	+	+	+	+	+	10
<b>Integumentary System</b>											
Mammary Gland	M	M	M	M	M	M	M	M	M	M	0
Skin	+	+	+	+	+	+	+	+	+	+	10

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04

Test Type: 90-DAY

Route: GAVAGE

Species/Strain: Mouse/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: Oxymetholone

CAS Number: 434-07-1

Date Report Requested: 10/21/2014

Time Report Requested: 18:23:53

First Dose M/F: NA / NA

Lab: BAT

<b>B6C3F1 Mouse Male</b> <b>0 MG/KG</b>	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	
		9	9	9	9	9	9	9	9	9	9	
		3	3	3	3	3	3	3	3	3	3	
	ANIMAL ID	0	0	0	0	0	0	0	0	0	0	<b>*TOTALS</b>
	0	0	0	0	0	0	0	0	0	0		
	0	0	0	0	0	0	0	0	0	0		
	0	0	0	0	0	0	0	0	0	1		
	1	2	3	4	5	6	7	8	9	0		

**Musculoskeletal System**

Bone + + + + + + + + + + 10

**Nervous System**

Brain + + + + + + + + + + 10

**Respiratory System**

Lung + + + + + + + + + + 10

Nose + + + + + + + + + + 10

Trachea + + + + + + + + + + 10

**Special Senses System**

NONE

**Urinary System**

Kidney + + + + + + + + + + 10

Urinary Bladder + + + + + + + + + + 10

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

**Experiment Number:** 88032-04  
**Test Type:** 90-DAY  
**Route:** GAVAGE  
**Species/Strain:** Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
**Test Compound:** Oxymetholone  
**CAS Number:** 434-07-1

**Date Report Requested:** 10/21/2014  
**Time Report Requested:** 18:23:53  
**First Dose M/F:** NA / NA  
**Lab:** BAT

DAY ON TEST

**B6C3F1 Mouse Male**  
**160 MG/KG**

ANIMAL ID

\*TOTALS

**Alimentary System**

NONE

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

NONE

**Hematopoietic System**

NONE

**Integumentary System**

NONE

**Musculoskeletal System**

NONE

**Nervous System**

NONE

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

**Experiment Number:** 88032-04  
**Test Type:** 90-DAY  
**Route:** GAVAGE  
**Species/Strain:** Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
**Test Compound:** Oxymetholone  
**CAS Number:** 434-07-1

**Date Report Requested:** 10/21/2014  
**Time Report Requested:** 18:23:53  
**First Dose M/F:** NA / NA  
**Lab:** BAT

DAY ON TEST

**B6C3F1 Mouse Male**  
**160 MG/KG**

ANIMAL ID

\*TOTALS

---

**Respiratory System**

NONE

**Special Senses System**

NONE

**Urinary System**

NONE

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

**Experiment Number:** 88032-04  
**Test Type:** 90-DAY  
**Route:** GAVAGE  
**Species/Strain:** Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
**Test Compound:** Oxymetholone  
**CAS Number:** 434-07-1

**Date Report Requested:** 10/21/2014  
**Time Report Requested:** 18:23:53  
**First Dose M/F:** NA / NA  
**Lab:** BAT

DAY ON TEST

**B6C3F1 Mouse Male**  
**320 MG/KG**

ANIMAL ID

\*TOTALS

**Alimentary System**

NONE

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

NONE

**Hematopoietic System**

NONE

**Integumentary System**

NONE

**Musculoskeletal System**

NONE

**Nervous System**

NONE

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

**Experiment Number:** 88032-04  
**Test Type:** 90-DAY  
**Route:** GAVAGE  
**Species/Strain:** Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
**Test Compound:** Oxymetholone  
**CAS Number:** 434-07-1

**Date Report Requested:** 10/21/2014  
**Time Report Requested:** 18:23:53  
**First Dose M/F:** NA / NA  
**Lab:** BAT

DAY ON TEST

**B6C3F1 Mouse Male**  
**320 MG/KG**

ANIMAL ID

\*TOTALS

---

**Respiratory System**

NONE

**Special Senses System**

NONE

**Urinary System**

NONE

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked



**Experiment Number:** 88032-04  
**Test Type:** 90-DAY  
**Route:** GAVAGE  
**Species/Strain:** Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**

**Test Compound:** Oxymetholone  
**CAS Number:** 434-07-1

**Date Report Requested:** 10/21/2014  
**Time Report Requested:** 18:23:53  
**First Dose M/F:** NA / NA  
**Lab:** BAT

DAY ON TEST

**B6C3F1 Mouse Male**  
**630 MG/KG**

ANIMAL ID

\*TOTALS

**Alimentary System**

NONE

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

NONE

**Hematopoietic System**

NONE

**Integumentary System**

NONE

**Musculoskeletal System**

NONE

**Nervous System**

NONE

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

**Experiment Number:** 88032-04  
**Test Type:** 90-DAY  
**Route:** GAVAGE  
**Species/Strain:** Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
**Test Compound:** Oxymetholone  
**CAS Number:** 434-07-1

**Date Report Requested:** 10/21/2014  
**Time Report Requested:** 18:23:53  
**First Dose M/F:** NA / NA  
**Lab:** BAT

DAY ON TEST

**B6C3F1 Mouse Male**  
**630 MG/KG**

ANIMAL ID

\*TOTALS

---

**Respiratory System**

NONE

**Special Senses System**

NONE

**Urinary System**

NONE

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

**Experiment Number:** 88032-04  
**Test Type:** 90-DAY  
**Route:** GAVAGE  
**Species/Strain:** Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
**Test Compound:** Oxymetholone  
**CAS Number:** 434-07-1

**Date Report Requested:** 10/21/2014  
**Time Report Requested:** 18:23:53  
**First Dose M/F:** NA / NA  
**Lab:** BAT

DAY ON TEST

**B6C3F1 Mouse Male**  
**1250 MG/KG**

ANIMAL ID

\*TOTALS

**Alimentary System**

NONE

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

NONE

**Hematopoietic System**

NONE

**Integumentary System**

NONE

**Musculoskeletal System**

NONE

**Nervous System**

NONE

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

**Experiment Number:** 88032-04  
**Test Type:** 90-DAY  
**Route:** GAVAGE  
**Species/Strain:** Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
**Test Compound:** Oxymetholone  
**CAS Number:** 434-07-1

**Date Report Requested:** 10/21/2014  
**Time Report Requested:** 18:23:53  
**First Dose M/F:** NA / NA  
**Lab:** BAT

DAY ON TEST

**B6C3F1 Mouse Male**  
**1250 MG/KG**

ANIMAL ID

\*TOTALS

---

**Respiratory System**

NONE

**Special Senses System**

NONE

**Urinary System**

NONE

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04  
 Test Type: 90-DAY  
 Route: GAVAGE  
 Species/Strain: Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**

Test Compound: Oxymetholone  
 CAS Number: 434-07-1

Date Report Requested: 10/21/2014  
 Time Report Requested: 18:23:53  
 First Dose M/F: NA / NA  
 Lab: BAT

**B6C3F1 Mouse Male**  
**2500 MG/KG**

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	3	3	3	3	3	3	3	3	3	3
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	5	5	5	5	5	5	5	5	5	6
	1	2	3	4	5	6	7	8	9	0
	<b>*TOTALS</b>									

**Alimentary System**

Esophagus	+	+	+	+	+	+	+	+	+	+	10
Gallbladder	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	10
Liver	+	+	+	+	+	+	+	+	+	+	10
Pancreas	+	+	+	+	+	+	+	+	+	+	10
Salivary Glands	+	+	+	+	+	+	+	+	+	+	10
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	10
Epithelium, Hyperplasia, Focal					3						1 3.0
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	10
Epithelium, Mineralization			1		1						2 1.0

**Cardiovascular System**

Blood Vessel	+	+	+	+	+	+	+	+	+	+	10
Heart	+	+	+	+	+	+	+	+	+	+	10

**Endocrine System**

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	10
----------------	---	---	---	---	---	---	---	---	---	---	----

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04

Test Type: 90-DAY

Route: GAVAGE

Species/Strain: Mouse/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: Oxymetholone

CAS Number: 434-07-1

Date Report Requested: 10/21/2014

Time Report Requested: 18:23:53

First Dose M/F: NA / NA

Lab: BAT

B6C3F1 Mouse Male 2500 MG/KG	DAY ON TEST										*TOTALS
	0	0	0	0	0	0	0	0	0	0	
	9	9	9	9	9	9	9	9	9	9	
	3	3	3	3	3	3	3	3	3	3	
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	
	5	5	5	5	5	5	5	5	5	6	
	1	2	3	4	5	6	7	8	9	0	
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	10
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	10
Parathyroid Gland	M	+	+	M	M	+	+	M	M	+	5
Pituitary Gland	+	+	+	+	+	+	+	+	+	+	10
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	10
<b>General Body System</b>											
NONE											
<b>Genital System</b>											
Epididymis	+	+	+	+	+	+	+	+	+	+	10
Preputial Gland	+	+	+	+	+	+	+	+	+	+	10
Prostate	+	+	+	+	+	+	+	+	+	+	10
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	10
Testes	+	+	+	+	+	+	+	+	+	+	10
<b>Hematopoietic System</b>											
Bone Marrow	+	+	+	+	+	+	+	+	+	+	10
Lymph Node, Mandibular	+	+	+	+	+	+	+	+	+	+	10
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	10
Spleen	+	+	+	+	+	+	+	+	+	+	10
Thymus	M	+	+	+	+	+	+	+	+	+	9
<b>Integumentary System</b>											
Mammary Gland	M	M	M	M	M	M	M	M	M	M	0

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04  
 Test Type: 90-DAY  
 Route: GAVAGE  
 Species/Strain: Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**

Test Compound: Oxymetholone  
 CAS Number: 434-07-1

Date Report Requested: 10/21/2014  
 Time Report Requested: 18:23:53  
 First Dose M/F: NA / NA  
 Lab: BAT

**B6C3F1 Mouse Male**  
**2500 MG/KG**

	DAY ON TEST										*TOTALS
	0	0	0	0	0	0	0	0	0	0	
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	
	5	5	5	5	5	5	5	5	5	6	
	1	2	3	4	5	6	7	8	9	0	
Mammary Gland	M	M	M	M	M	M	M	M	M	M	0
Skin	+	+	+	+	+	+	+	+	+	+	10
<b>Musculoskeletal System</b>											
Bone	+	+	+	+	+	+	+	+	+	+	10
<b>Nervous System</b>											
Brain	+	+	+	+	+	+	+	+	+	+	10
<b>Respiratory System</b>											
Lung	+	+	+	+	+	+	+	+	+	+	10
Nose	+	+	+	+	+	+	+	+	+	+	10
Trachea	+	+	+	+	+	+	+	+	+	+	10
<b>Special Senses System</b>											
NONE											
<b>Urinary System</b>											
Kidney	+	+	+	+	+	+	+	+	+	+	10
Urinary Bladder	+	+	+	+	+	+	+	+	+	+	10

\*\*\*END OF MALE DATA\*\*\*

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Date Report Requested: 10/21/2014

Test Type: 90-DAY

Test Compound: Oxymetholone

Time Report Requested: 18:23:53

Route: GAVAGE

CAS Number: 434-07-1

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: BAT

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	<b>B6C3F1 Mouse Female</b>	0	0	0	0	0	0	0	0	0
<b>0 MG/KG</b>	9	9	9	9	9	9	9	9	9	9
	3	3	3	3	3	3	3	3	3	3
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	6	6	6	6	6	6	6	6	6	7
	1	2	3	4	5	6	7	8	9	0
	<b>*TOTALS</b>									

**Alimentary System**

Esophagus	+	+	+	+	+	+	+	+	+	+	10
Gallbladder	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	10
Liver	+	+	+	+	+	+	+	+	+	+	10
Pancreas	+	+	+	+	+	+	+	+	+	+	10
Salivary Glands	+	+	+	+	+	+	+	+	+	+	10
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	10
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	10
Epithelium, Mineralization								1			1 1.0

**Cardiovascular System**

Blood Vessel	+	+	+	+	+	+	+	+	+	+	10
Heart	+	+	+	+	+	+	+	+	+	+	10

**Endocrine System**

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	10
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	10

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked



Experiment Number: 88032-04

Test Type: 90-DAY

Route: GAVAGE

Species/Strain: Mouse/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: Oxymetholone

CAS Number: 434-07-1

Date Report Requested: 10/21/2014

Time Report Requested: 18:23:53

First Dose M/F: NA / NA

Lab: BAT

B6C3F1 Mouse Female 0 MG/KG	DAY ON TEST										*TOTALS
	0	0	0	0	0	0	0	0	0	0	
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
	6	6	6	6	6	6	6	6	6	7	
	1	2	3	4	5	6	7	8	9	0	
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	10
Parathyroid Gland	+	+	+	+	+	M	+	+	+	+	9
Cyst			2								1 2.0
Pituitary Gland	+	+	+	+	+	+	+	+	+	+	10
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	10
<b>General Body System</b>											
NONE											
<b>Genital System</b>											
Clitoral Gland	+	+	+	+	+	+	M	+	+	+	9
Ovary	+	+	+	+	+	+	+	+	+	+	10
Uterus	+	+	+	+	+	+	+	+	+	+	10
<b>Hematopoietic System</b>											
Bone Marrow	+	+	+	+	+	+	+	+	+	+	10
Lymph Node, Mandibular	+	+	+	+	+	+	+	M	+	+	9
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	10
Spleen	+	+	+	+	+	+	+	+	+	+	10
Thymus	+	+	+	+	+	+	+	+	+	+	10
<b>Integumentary System</b>											
Mammary Gland	+	+	+	+	+	+	+	+	+	+	10
Skin	+	+	+	+	+	+	+	+	+	+	10

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04

Test Type: 90-DAY

Route: GAVAGE

Species/Strain: Mouse/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: Oxymetholone

CAS Number: 434-07-1

Date Report Requested: 10/21/2014

Time Report Requested: 18:23:53

First Dose M/F: NA / NA

Lab: BAT

B6C3F1 Mouse Female 0 MG/KG	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	*TOTALS
	ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	
		9	9	9	9	9	9	9	9	9	9	
		3	3	3	3	3	3	3	3	3	3	
		0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	
		6	6	6	6	6	6	6	6	6	7	
		1	2	3	4	5	6	7	8	9	0	

Musculoskeletal System

Bone + + + + + + + + + + 10

Nervous System

Brain + + + + + + + + + + 10

Respiratory System

Lung + + + + + + + + + + 10

Nose + + + + + + + + + + 10

Infiltration Cellular, Mast Cell, Focal 1 1 1.0

Trachea + + + + + + + + + + 10

Special Senses System

NONE

Urinary System

Kidney + + + + + + + + + + 10

Urinary Bladder + + + + + + + + + + 10

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Date Report Requested: 10/21/2014

Test Type: 90-DAY

Test Compound: Oxymetholone

Time Report Requested: 18:23:53

Route: GAVAGE

CAS Number: 434-07-1

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: BAT

<b>B6C3F1 Mouse Female</b> <b>160 MG/KG</b>	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	
		9	9	9	9	9	9	9	9	9	9	
		3	3	3	3	3	3	3	3	3	3	
	ANIMAL ID	0	0	0	0	0	0	0	0	0	0	*TOTALS
	0	0	0	0	0	0	0	0	0	0		
	0	0	0	0	0	0	0	0	0	0		
	7	7	7	7	7	7	7	7	7	8		
	1	2	3	4	5	6	7	8	9	0		

**Alimentary System**

Salivary Glands	+	+	+	+	+	+	+	+	+	+	10
Submandibul GI, Cytoplasmic Alteration	1	1	1	1	1	1	1	1	1	1	10 1.0

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

Clitoral Gland	+	+	+	+	+	+	+	+	+	+	10
Hyperplasia	3	3	3	3	3	3	3	3	3	3	10 3.0
Ovary	+	+	+	+	+	+	+	+	+	+	10

**Hematopoietic System**

NONE

**Integumentary System**

NONE

**Musculoskeletal System**

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04

Test Type: 90-DAY

Route: GAVAGE

Species/Strain: Mouse/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: Oxymetholone

CAS Number: 434-07-1

Date Report Requested: 10/21/2014

Time Report Requested: 18:23:53

First Dose M/F: NA / NA

Lab: BAT

<b>B6C3F1 Mouse Female</b> <b>160 MG/KG</b>	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	
		9	9	9	9	9	9	9	9	9	9	
		3	3	3	3	3	3	3	3	3	3	
	ANIMAL ID	0	0	0	0	0	0	0	0	0	0	*TOTALS
		0	0	0	0	0	0	0	0	0		
		0	0	0	0	0	0	0	0	0		
		7	7	7	7	7	7	7	7	8		
		1	2	3	4	5	6	7	8	9		
										0		

NONE  
Nervous System

NONE  
Respiratory System

NONE  
Special Senses System

NONE  
Urinary System

Kidney	+	+	+	+	+	+	+	+	+	+	10
Bow Cap Pari, Metaplasia	1	1	1	1	1	1	1	1	1	1	10 1.0

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04  
 Test Type: 90-DAY  
 Route: GAVAGE  
 Species/Strain: Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**

Test Compound: Oxymetholone  
 CAS Number: 434-07-1

Date Report Requested: 10/21/2014  
 Time Report Requested: 18:23:53  
 First Dose M/F: NA / NA  
 Lab: BAT

B6C3F1 Mouse Female 320 MG/KG	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	*TOTALS
	ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
	9	9	9	9	9	9	9	9	9	9	9	
	3	3	3	3	3	3	3	3	3	3	3	
	0	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	0	
	8	8	8	8	8	8	8	8	8	8	9	
	1	2	3	4	5	6	7	8	9	0	0	

**Alimentary System**

Salivary Glands	+	+	+	+	+	+	+	+	+	+	10
Submandibul GI, Cytoplasmic Alteration	2	1	1	2	2	2	2	2	2	2	10 1.8

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

Clitoral Gland	+	+	+	+	+	+	+	+	+	+	10
Hyperplasia	3	3	3	3	3	3	3	3	3	3	10 3.0
Ovary	+	+	+	+	+	+	+	+	+	+	10
Corpus Luteum, Atrophy	1		1			1	1	1	1	1	7 1.0
Interstit Cell, Atrophy	1	1	1	1	1	1	1	1	1	1	10 1.0

**Hematopoietic System**

NONE

**Integumentary System**

NONE

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04

Test Type: 90-DAY

Route: GAVAGE

Species/Strain: Mouse/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: Oxymetholone

CAS Number: 434-07-1

Date Report Requested: 10/21/2014

Time Report Requested: 18:23:54

First Dose M/F: NA / NA

Lab: BAT

B6C3F1 Mouse Female 320 MG/KG	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	*TOTALS
		0	0	0	0	0	0	0	0	0	0	
		9	9	9	9	9	9	9	9	9	9	
		3	3	3	3	3	3	3	3	3	3	
	ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	
		8	8	8	8	8	8	8	8	8	9	
		1	2	3	4	5	6	7	8	9	0	

Musculoskeletal System

NONE

Nervous System

NONE

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney	+	+	+	+	+	+	+	+	+	+	10
--------	---	---	---	---	---	---	---	---	---	---	----

Bow Cap Pari, Metaplasia	1	1	1	1	1	1	1	1	1	1	10	1.0
--------------------------	---	---	---	---	---	---	---	---	---	---	----	-----

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04

Test Type: 90-DAY

Route: GAVAGE

Species/Strain: Mouse/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: Oxymetholone

CAS Number: 434-07-1

Date Report Requested: 10/21/2014

Time Report Requested: 18:23:54

First Dose M/F: NA / NA

Lab: BAT

<b>B6C3F1 Mouse Female</b> <b>630 MG/KG</b>	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	
		9	9	9	9	9	9	9	9	9	9	
		3	3	3	3	3	3	3	3	3	3	
	ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0		
		0	0	0	0	0	0	0	0	1		
		9	9	9	9	9	9	9	9	0		
		1	2	3	4	5	6	7	8	9		
		<b>*TOTALS</b>										

**Alimentary System**

Salivary Glands	+	+	+	+	+	+	+	+	+	+	10
Submandibul GI, Cytoplasmic Alteration	2	2	2	2	2	2	2	2	2	2	10 2.0

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

Clitoral Gland	+	+	+	+	+	+	+	+	+	+	10
Hyperplasia	3	3	3	3	3	3	3	3	3	3	10 3.0
Ovary	+	+	+	+	+	+	+	+	+	+	10
Corpus Luteum, Atrophy	1	1	1	1	1	1	1	1	1	2	10 1.1
Interstit Cell, Atrophy	1	1	1	1	1	1	1	1	1	1	10 1.0

**Hematopoietic System**

NONE

**Integumentary System**

NONE

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04

Test Type: 90-DAY

Route: GAVAGE

Species/Strain: Mouse/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: Oxymetholone

CAS Number: 434-07-1

Date Report Requested: 10/21/2014

Time Report Requested: 18:23:54

First Dose M/F: NA / NA

Lab: BAT

B6C3F1 Mouse Female 630 MG/KG	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	*TOTALS
		0	0	0	0	0	0	0	0	0	0	
		9	9	9	9	9	9	9	9	9	9	
		3	3	3	3	3	3	3	3	3	3	
	ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	1	
		9	9	9	9	9	9	9	9	9	0	
		1	2	3	4	5	6	7	8	9	0	

Musculoskeletal System

NONE

Nervous System

NONE

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney

+ + + + + + + + + + 10

Bow Cap Pari, Metaplasia

1 1 1 1 1 1 1 1 1 1 10 1.0

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked



Experiment Number: 88032-04

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Date Report Requested: 10/21/2014

Test Type: 90-DAY

Test Compound: Oxymetholone

Time Report Requested: 18:23:54

Route: GAVAGE

CAS Number: 434-07-1

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: BAT

|   |             |   |   |   |   |   |   |   |   |   |   |         |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---------|
| <b>B6C3F1 Mouse Female</b><br><b>1250 MG/KG</b> | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|   |             | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |         |
|   |             | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |         |
|   | ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *TOTALS |
|   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |         |
|   | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |   |         |
|   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |   |         |
|   | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |   |         |

**Alimentary System**

|  |   |   |   |   |   |   |   |   |   |   |        |
|--|---|---|---|---|---|---|---|---|---|---|--------|
| Salivary Glands                        | + | + | + | + | + | + | + | + | + | + | 10     |
| Parotid Gl, Atrophy                    |   |   | 1 |   | 1 | 1 |   |   |   | 1 | 4 1.0  |
| Submandibul Gl, Cytoplasmic Alteration | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 10 2.0 |

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

|                         |   |   |   |   |   |   |   |   |   |   |        |
|-------------------------|---|---|---|---|---|---|---|---|---|---|--------|
| Clitoral Gland          | + | + | + | + | + | + | + | + | + | + | 10     |
| Hyperplasia             | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 10 3.0 |
| Ovary                   | + | + | + | + | + | + | + | + | + | + | 10     |
| Corpus Luteum, Atrophy  | 2 | 1 | 3 | 1 | 1 | 1 | 3 | 3 | 1 | 1 | 10 1.7 |
| Interstit Cell, Atrophy | 2 | 2 | 2 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 10 1.4 |

**Hematopoietic System**

NONE

**Integumentary System**

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04

Test Type: 90-DAY

Route: GAVAGE

Species/Strain: Mouse/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: Oxymetholone

CAS Number: 434-07-1

Date Report Requested: 10/21/2014

Time Report Requested: 18:23:54

First Dose M/F: NA / NA

Lab: BAT

|                                   |             |   |   |   |   |   |   |   |   |   |   |         |
|-----------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---------|
| B6C3F1 Mouse Female<br>1250 MG/KG | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                                   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                                   |             | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |         |
|                                   |             | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |         |
|                                   | ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *TOTALS |
|                                   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |         |
|                                   | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |   |         |
|                                   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |   |         |
|                                   | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |   |         |

NONE  
Musculoskeletal System

NONE  
Nervous System

NONE  
Respiratory System

NONE  
Special Senses System

NONE  
Urinary System

|                          |   |   |   |   |   |   |   |   |   |   |        |
|--------------------------|---|---|---|---|---|---|---|---|---|---|--------|
| Kidney                   | + | + | + | + | + | + | + | + | + | + | 10     |
| Bow Cap Pari, Metaplasia | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 10 2.0 |

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Date Report Requested: 10/21/2014

Test Type: 90-DAY

Test Compound: Oxymetholone

Time Report Requested: 18:23:54

Route: GAVAGE

CAS Number: 434-07-1

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: BAT

|                                   |             |   |   |   |   |   |   |   |   |   |   |         |
|-----------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---------|
| B6C3F1 Mouse Female<br>2500 MG/KG | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                                   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                                   |             | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |         |
|                                   |             | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |         |
|                                   | ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *TOTALS |
|                                   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |         |
|                                   | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |   |         |
|                                   | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 |   |         |
|                                   | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |   |         |

Alimentary System

|  |   |   |   |   |   |   |   |   |   |   |        |
|--|---|---|---|---|---|---|---|---|---|---|--------|
| Esophagus                              | + | + | + | + | + | + | + | + | + | + | 10     |
| Gallbladder                            | + | + | + | + | + | + | + | + | + | + | 10     |
| Intestine Large, Cecum                 | + | + | + | + | + | + | + | + | + | + | 10     |
| Intestine Large, Colon                 | + | + | + | + | + | + | + | + | + | + | 10     |
| Intestine Large, Rectum                | + | + | + | + | + | + | + | + | + | + | 10     |
| Intestine Small, Duodenum              | + | + | + | + | + | + | + | + | + | + | 10     |
| Intestine Small, Ileum                 | + | + | + | + | + | + | + | + | + | + | 10     |
| Intestine Small, Jejunum               | + | + | + | + | + | + | + | + | + | + | 10     |
| Liver                                  | + | + | + | + | + | + | + | + | + | + | 10     |
| Pancreas                               | + | + | + | + | + | + | + | + | + | + | 10     |
| Salivary Glands                        | + | + | + | + | + | + | + | + | + | + | 10     |
| Parotid GI, Atrophy                    | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 1 |   | 9 1.8  |
| Submandibul GI, Cytoplasmic Alteration | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 10 2.0 |
| Stomach, Forestomach                   | + | + | + | + | + | + | + | + | + | + | 10     |
| Stomach, Glandular                     | + | + | + | + | + | + | + | + | + | + | 10     |

Cardiovascular System

|              |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | 10 |
| Heart        | + | + | + | + | + | + | + | + | + | + | 10 |

Endocrine System

|                |   |   |   |   |   |   |   |   |   |   |    |
|----------------|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex | + | + | + | + | + | + | + | + | + | + | 10 |
|----------------|---|---|---|---|---|---|---|---|---|---|----|

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04

Test Type: 90-DAY

Route: GAVAGE

Species/Strain: Mouse/B6C3F1

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: Oxymetholone

CAS Number: 434-07-1

Date Report Requested: 10/21/2014

Time Report Requested: 18:23:54

First Dose M/F: NA / NA

Lab: BAT

| B6C3F1 Mouse Female<br>2500 MG/KG | DAY ON TEST |   |   |   |   |   |   |   |   |   | *TOTALS |
|-----------------------------------|-------------|---|---|---|---|---|---|---|---|---|---------|
|                                   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
| ANIMAL ID                         | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                                   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                                   | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |         |
|                                   | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 |         |
|                                   | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |         |
| Adrenal Medulla                   | +           | + | + | + | + | + | + | + | + | + | 10      |
| Islets, Pancreatic                | +           | + | + | + | + | + | + | + | + | + | 10      |
| Parathyroid Gland                 | +           | + | + | + | + | + | + | + | + | + | 10      |
| Pituitary Gland                   | +           | + | + | + | + | + | M | + | + | + | 9       |
| Thyroid Gland                     | +           | + | + | + | + | + | + | + | + | + | 10      |
| <b>General Body System</b>        |             |   |   |   |   |   |   |   |   |   |         |
| NONE                              |             |   |   |   |   |   |   |   |   |   |         |
| <b>Genital System</b>             |             |   |   |   |   |   |   |   |   |   |         |
| Clitoral Gland                    | +           | + | + | + | + | + | + | + | + | + | 10      |
| Hyperplasia                       | 3           | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 10 3.0  |
| Ovary                             | +           | + | + | + | + | + | + | + | + | + | 10      |
| Corpus Luteum, Atrophy            | 3           | 3 | 3 | 3 | 3 | 3 | 3 | 2 | 3 | 3 | 10 2.9  |
| Interstitial Cell, Atrophy        | 3           | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 10 3.0  |
| Uterus                            | +           | + | + | + | + | + | + | + | + | + | 10      |
| <b>Hematopoietic System</b>       |             |   |   |   |   |   |   |   |   |   |         |
| Bone Marrow                       | +           | + | + | + | + | + | + | + | + | + | 10      |
| Lymph Node, Mandibular            | +           | + | + | + | + | + | + | + | + | M | 9       |
| Lymph Node, Mesenteric            | +           | + | + | + | + | + | + | + | + | + | 10      |
| Spleen                            | +           | + | + | + | + | + | + | + | + | + | 10      |
| Thymus                            | +           | + | + | + | + | + | + | + | + | + | 10      |
| <b>Integumentary System</b>       |             |   |   |   |   |   |   |   |   |   |         |

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 88032-04  
 Test Type: 90-DAY  
 Route: GAVAGE  
 Species/Strain: Mouse/B6C3F1

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**

Test Compound: Oxymetholone  
 CAS Number: 434-07-1

Date Report Requested: 10/21/2014  
 Time Report Requested: 18:23:54  
 First Dose M/F: NA / NA  
 Lab: BAT

|                            |                   | DAY ON TEST |   |   |   |   |   |   |   |   |   |                |
|----------------------------|-------------------|-------------|---|---|---|---|---|---|---|---|---|----------------|
| <b>B6C3F1 Mouse Female</b> |                   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                |
|                            |                   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                |
|                            | <b>2500 MG/KG</b> | 3           | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |                |
|                            | ANIMAL ID         | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                |
|                            |                   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                |
|                            |                   | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |                |
|                            |                   | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 |                |
|                            |                   | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | <b>*TOTALS</b> |

**Integumentary System**

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

**Musculoskeletal System**

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

**Nervous System**

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

**Respiratory System**

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

**Special Senses System**

NONE

**Urinary System**

|                          |   |   |   |   |   |   |   |   |   |        |    |
|--------------------------|---|---|---|---|---|---|---|---|---|--------|----|
| Kidney                   | + | + | + | + | + | + | + | + | + | +      | 10 |
| Bow Cap Pari, Metaplasia | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 1 | 1 | 10 1.8 |    |
| Urinary Bladder          | + | + | + | + | + | + | + | + | + | 10     |    |

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

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked