

**Experiment Number:** 55301-03  
**Test Type:** 90-DAY  
**Species/Strain:** Rat/WISTAR OUTBR

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

**Test Compound:** Pyridine  
**CAS Number:** 110-86-1

**Date Report Requested:** 10/21/2014  
**Time Report Requested:** 15:46:28  
**First Dose M/F:** NA / NA  
**Lab:** TSI MASON

<b>C Number:</b>	C55301B
<b>Lock Date:</b>	Not Entered.
<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>	Male
<b>PWG Approval Date</b>	NONE

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 Lab: TSI MASON

DAY ON TEST		0	0	0	0	0	0	0	0	0	0
<b>WISTAR OUTBR Rat Male</b>		0	0	0	0	0	0	0	0	0	0
		9	9	9	9	9	9	9	9	9	9
	<b>0 PPM</b>	2	2	2	2	2	2	2	2	2	2
ANIMAL ID		0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0
		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
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**

Heart	+	+	+	+	+	+	+	+	+	+	10
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**Endocrine System**

Adrenal Gland, Cortex	+	+	+	+	+	+	+	+	+	+	10
Adrenal Gland, Medulla	+	+	+	+	+	+	+	+	+	+	10
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	10
Parathyroid Gland	+	+	+	+	+	+	+	+		+	9
Pituitary Gland	+	+	+	+	+	+	+	+	+	+	10

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
 + ..Tissue examined microscopically  
 X ..Lesion present  
 I ..Insufficient tissue

M ..Missing tissue  
 A ..Autolysis precludes evaluation  
 BLANK ..Not examined microscopically

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WISTAR OUTBR Rat Male 0 PPM	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	
Thyroid Gland	1	0	0	0	0	0	0	0	0	0	0	10
<b>General Body System</b>	2	0	0	0	0	0	0	0	0	0	0	
NONE	3	0	0	0	0	0	0	0	0	0	0	
<b>Genital System</b>	4	0	0	0	0	0	0	0	0	0	0	
Epididymis	5	0	0	0	0	0	0	0	0	0	0	9
Preputial Gland	6	0	0	0	0	0	0	0	0	0	0	10
Prostate	7	0	0	0	0	0	0	0	0	0	0	10
Seminal Vesicle	8	0	0	0	0	0	0	0	0	0	0	10
Testes	9	0	0	0	0	0	0	0	0	0	0	10
<b>Hematopoietic System</b>												
Bone Marrow		0	0	0	0	0	0	0	0	0	0	10
Lymph Node							0					1
Lymph Node, Mandibular		0	0	0	0	0	0	0	0	0	0	10
Lymph Node, Mesenteric		0	0	0	0	0	0	0	0	0	0	10
Spleen		0	0	0	0	0	0	0	0	0	0	10
Thymus		0	0	0	0	0	0	0	0	0	0	10
<b>Integumentary System</b>												
Mammary Gland		0	0	0	M	0	0	0	0	0	0	9
Skin		0	0	0	0	0	0	0	0	0	0	10
<b>Musculoskeletal System</b>												

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 First Dose M/F: NA / NA  
 Lab: TSI MASON

WISTAR OUTBR Rat Male 0 PPM	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	
	1	2	3	4	5	6	7	8	9	0	
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
<b>SYSTEMIC LESIONS</b>											
Multiple Organ	+	+	+	+	+	+	+	+	+	+	10

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 X ..Lesion present  
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DAY ON TEST		0	0	0	0	0	0	0	0	0	0
<b>WISTAR OUTBR Rat Male</b>		0	0	0	0	0	0	0	0	0	0
		9	9	9	9	9	9	9	9	9	9
	<b>50 PPM</b>	2	2	2	2	2	2	2	2	2	2
ANIMAL ID		0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0
		1	1	1	1	1	1	1	1	1	2
		1	2	3	4	5	6	7	8	9	0
<b>*TOTALS</b>											

**Alimentary System**

Liver + + + + + + + + + + 10

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

NONE

**Hematopoietic System**

Lymph Node, Mandibular + 1

**Integumentary System**

Skin + 1

**Musculoskeletal System**

NONE

**Nervous System**

NONE

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
 + ..Tissue examined microscopically  
 X ..Lesion present  
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 First Dose M/F: NA / NA  
 Lab: TSI MASON

<b>WISTAR OUTBR Rat Male</b> <b>50 PPM</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
		2	2	2	2	2	2	2	2	2	2
	ANIMAL ID	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0
		1	1	1	1	1	1	1	1	2	2
		1	2	3	4	5	6	7	8	9	0
		<b>*TOTALS</b>									

**Respiratory System**

NONE

**Special Senses System**

NONE

**Urinary System**

Kidney

+ + + + + + + + + + 10

**SYSTEMIC LESIONS**

Multiple Organ

+ + + + + + + + + + 10

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
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 Lab: TSI MASON

|                              |                | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |                |
|------------------------------|----------------|-------------|---|---|---|---|---|---|---|---|---|---|----------------|
| <b>WISTAR OUTBR Rat Male</b> | <b>100 PPM</b> | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | <b>*TOTALS</b> |
|                              |                | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |                |
|                              |                | 9           | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |   |                |
|                              |                | 2           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |   |                |
|                              |                | 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 |   |                |
|                              |                | 2           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 |   |                |
|                              |                | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |   |                |

**Alimentary System**

Liver + + + + + + + + + + 10

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

NONE

**Hematopoietic System**

Lymph Node, Mandibular + 1

**Integumentary System**

NONE

**Musculoskeletal System**

NONE

**Nervous System**

NONE

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
 + ..Tissue examined microscopically  
 X ..Lesion present  
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|  |             |                |   |   |   |   |   |   |   |   |   |
|--|-------------|----------------|---|---|---|---|---|---|---|---|---|
| <b>WISTAR OUTBR Rat Male</b><br><b>100 PPM</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 |
|  |             | 2              | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|  | ANIMAL ID   | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  |             | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  |             | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  |             | 2              | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 |
|  |             | 1              | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |
|  |             | <b>*TOTALS</b> |   |   |   |   |   |   |   |   |   |

**Respiratory System**

NONE

**Special Senses System**

NONE

**Urinary System**

Kidney

+ + + + + + + + + + 10

**SYSTEMIC LESIONS**

Multiple Organ

+ + + + + + + + + + 10

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
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 X ..Lesion present  
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 Lab: TSI MASON

| DAY ON TEST                                    |  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|--|--|---|---|---|---|---|---|---|---|---|---|
| <b>WISTAR OUTBR Rat Male</b><br><b>250 PPM</b> |  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  |  | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
|  |  | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| 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 |
|  |  | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 |
|  |  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |
| <b>*TOTALS</b>                                 |  |   |   |   |   |   |   |   |   |   |   |

**Alimentary System**

Liver + + + + + + + + + + 10

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

NONE

**Hematopoietic System**

Lymph Node, Mandibular + 1

**Integumentary System**

NONE

**Musculoskeletal System**

NONE

**Nervous System**

NONE

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
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 First Dose M/F: NA / NA  
 Lab: TSI MASON

|                                  |             |   |   |   |   |   |   |   |   |   |   |         |
|----------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---------|
| WISTAR OUTBR Rat Male<br>250 PPM | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                                  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                                  |             | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |         |
|                                  |             | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |         |
|                                  | 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 |   |         |
|                                  | 3           | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 |   |         |
|                                  | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |   |         |

**Respiratory System**

NONE

**Special Senses System**

NONE

**Urinary System**

|                 |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|----|
| Kidney          | + | + | + | + | + | + | + | + | + | + | 10 |
| Urinary Bladder | + |   |   |   | + |   |   |   |   |   | 2  |

**SYSTEMIC LESIONS**

|                |   |   |   |   |   |   |   |   |   |   |    |
|----------------|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ | + | + | + | + | + | + | + | + | + | + | 10 |
|----------------|---|---|---|---|---|---|---|---|---|---|----|

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|                                  |             |   |   |   |   |   |   |   |   |   |   |         |
|----------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---------|
| WISTAR OUTBR Rat Male<br>500 PPM | 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 | 0 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |         |
|                                  |             | 2 | 6 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |         |
|                                  | ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                                  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                                  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                                  |             | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 |         |
|                                  |             | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |         |

**Alimentary System**

Liver + + + + + + + + + 9

**Cardiovascular System**

Heart + + + + + + + + + 9

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

Testes + 1

**Hematopoietic System**

NONE

**Integumentary System**

NONE

**Musculoskeletal System**

NONE

**Nervous System**

NONE

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
 + ..Tissue examined microscopically  
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|  |             |                |   |   |   |   |   |   |   |   |   |
|--|-------------|----------------|---|---|---|---|---|---|---|---|---|
| <b>WISTAR OUTBR Rat Male</b><br><b>500 PPM</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              | 0 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
|  |             | 2              | 6 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|  | ANIMAL ID   | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  |             | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  |             | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  |             | 4              | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 |
|  |             | 1              | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |
|  |             | <b>*TOTALS</b> |   |   |   |   |   |   |   |   |   |

**Respiratory System**

NONE

**Special Senses System**

NONE

**Urinary System**

Kidney

+ + + + + + + + + 9

**SYSTEMIC LESIONS**

Multiple Organ

+ + + + + + + + + 9

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
 + ..Tissue examined microscopically  
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| DAY ON TEST                  |                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|------------------------------|-----------------|---|---|---|---|---|---|---|---|---|---|
| <b>WISTAR OUTBR Rat Male</b> |                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                              |                 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
|                              | <b>1000 PPM</b> | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| ANIMAL ID                    |                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                              |                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                              |                 | 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                 | + | M | + | + | + | + | + | + | + | + | 9  |
| 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**

|       |   |   |   |   |   |   |   |   |   |   |    |
|-------|---|---|---|---|---|---|---|---|---|---|----|
| Heart | + | + | + | + | + | + | + | + | + | + | 10 |
|-------|---|---|---|---|---|---|---|---|---|---|----|

**Endocrine System**

|                        |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Gland, Cortex  | + | + | + | + | + | + | + | + | + | + | 10 |
| Adrenal Gland, Medulla | + | + | + | + | + | + | + | + | + | + | 10 |
| Islets, Pancreatic     | + | + | + | + | + | + | + | + | + | + | 10 |
| Parathyroid Gland      | M | M | M | + | + | + | + | + | + | + | 7  |
| Pituitary Gland        | + | + | + | + | + | + | + | + | + | + | 10 |

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
 + ..Tissue examined microscopically  
 X ..Lesion present  
 I ..Insufficient tissue

M ..Missing tissue  
 A ..Autolysis precludes evaluation  
 BLANK ..Not examined microscopically

Experiment Number: 55301-03  
 Test Type: 90-DAY  
 Species/Strain: Rat/WISTAR OUTBR

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Test Compound: Pyridine  
 CAS Number: 110-86-1

Date Report Requested: 10/21/2014  
 Time Report Requested: 15:46:29  
 First Dose M/F: NA / NA  
 Lab: TSI MASON

| WISTAR OUTBR Rat Male<br>1000 PPM | 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 |         |
| 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                            | +           | + | + | + | + | + | + | + | + | + | 10      |
| <b>Integumentary System</b>       |             |   |   |   |   |   |   |   |   |   |         |
| Mammary Gland                     | +           | + | + | + | M | + | + | + | + | + | 9       |
| Skin                              | +           | + | + | + | + | + | + | + | + | + | 10      |
| <b>Musculoskeletal System</b>     |             |   |   |   |   |   |   |   |   |   |         |
| Bone                              | +           | + | + | + | + | + | + | + | + | + | 10      |

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 + ..Tissue examined microscopically  
 X ..Lesion present  
 I ..Insufficient tissue

M ..Missing tissue  
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Experiment Number: 55301-03  
 Test Type: 90-DAY  
 Species/Strain: Rat/WISTAR OUTBR

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 Test Compound: Pyridine  
 CAS Number: 110-86-1

Date Report Requested: 10/21/2014  
 Time Report Requested: 15:46:29  
 First Dose M/F: NA / NA  
 Lab: TSI MASON

|                              |                 | DAY ON TEST |   |   |   |   |   |   |   |   |   |                |  |
|------------------------------|-----------------|-------------|---|---|---|---|---|---|---|---|---|----------------|--|
| <b>WISTAR OUTBR Rat Male</b> | <b>1000 PPM</b> | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0              |  |
|                              |                 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0              |  |
|                              |                 | 9           | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9              |  |
|                              |                 | 2           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2              |  |
|                              | ANIMAL ID       | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                |  |
|                              |                 | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                |  |
|                              |                 | 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> |  |

**Nervous System**

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

**Respiratory System**

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

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

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

**Special Senses System**

NONE

**Urinary System**

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

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

**SYSTEMIC LESIONS**

Multiple Organ + + + + + + + + + + 10

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

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**Date Report Requested:** 10/21/2014  
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**\*\* END OF REPORT \*\***

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