

TDMS No. 99002 - 03
Test Type: 90-DAY
Route: DOSED WATER
Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine
CAS Number: 109-09-1

Date Report Requested: 01/15/2009
Time Report Requested: 08:39:57
First Dose M/F: 07/28/03 / 07/29/03
Lab: MBA

F2_R2

C Number: C99002B
Lock Date: 12/16/2004
Cage Range: ALL
Date Range: ALL
Reasons For Removal: ALL
Removal Date Range: ALL
Treatment Groups: Include ALL
Study Gender: Both
TDMSE Version: 2.1.0

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
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
VEHICLE CONTROL	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	1
	1	2	3	4	5	6	7	8	9	0
										* TOTALS

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	+	I	+	+	+	+	+	+	+	+	9
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	10
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	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

TDMS No. 99002 - 03
 Test Type: 90-DAY
 Route: DOSED WATER
 Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL
 o-Chloropyridine
 CAS Number: 109-09-1

Date Report Requested: 01/15/2009
 Time Report Requested: 08:39:57
 First Dose M/F: 07/28/03 / 07/29/03
 Lab: MBA

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
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
VEHICLE CONTROL	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
										* TOTALS

CARDIOVASCULAR SYSTEM

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

ENDOCRINE SYSTEM

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

GENERAL BODY SYSTEM

NONE

* .. 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

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
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
VEHICLE CONTROL	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	1
	1	2	3	4	5	6	7	8	9	0
										* TOTALS

GENITAL SYSTEM

Epididymis	+	+	+	+	+	+	+	+	+	+	10
Preputial Gland	+	+	+	+	+	+	+	+	+	+	10
Prostate	+	+	+	+	+	+	+	+	+	+	10
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	10
Testes	+	+	+	+	+	+	+	+	+	+	10

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+	10
Lymph Node, Mandibular	M	M	M	M	M	M	M	M	M	M	0
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	10
Spleen	+	+	+	+	+	+	+	+	+	+	10
Thymus	+	+	+	+	+	+	+	+	+	+	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

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
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
VEHICLE CONTROL	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
										* TOTALS

INTEGUMENTARY SYSTEM

Mammary Gland	+	M	+	+	+	M	+	+	+	+	8
Skin	+	+	+	+	+	+	+	+	+	+	10

MUSCULOSKELETAL SYSTEM

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

NERVOUS SYSTEM

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

RESPIRATORY SYSTEM

Lung	+	+	+	+	+	+	+	+	+	+	10
Nose	+	+	+	+	+	+	+	+	+	+	10
Trachea	+	+	+	+	+	+	+	+	+	+	10

SPECIAL SENSES SYSTEM

* .. 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

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
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
VEHICLE CONTROL	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
	* TOTALS									

Eye + + + + + + + + + + **10**

Harderian Gland + + + + + + + + + + **10**

URINARY SYSTEM

Kidney + + + + + + + + + + **10**

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

SYSTEMIC LESIONS

Multiple Organ + + + + + + + + + + **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

TDMS No. 99002 - 03
 Test Type: 90-DAY
 Route: DOSED WATER
 Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL
 o-Chloropyridine
 CAS Number: 109-09-1

Date Report Requested: 01/15/2009
 Time Report Requested: 08:39:57
 First Dose M/F: 07/28/03 / 07/29/03
 Lab: MBA

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	
.....											
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0	
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
10 PPM	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	* TOTALS

ALIMENTARY SYSTEM

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

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

NONE

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

Bone Marrow + + + + + + + + + + 10

Spleen + + + + + + + + + + 10

INTEGUMENTARY SYSTEM

* .. 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

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
.....										
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
10 PPM	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
										* TOTALS

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

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

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

TDMS No. 99002 - 03
 Test Type: 90-DAY
 Route: DOSED WATER
 Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL
 o-Chloropyridine
 CAS Number: 109-09-1

Date Report Requested: 01/15/2009
 Time Report Requested: 08:39:57
 First Dose M/F: 07/28/03 / 07/29/03
 Lab: MBA

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
.....										
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
30 PPM	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
										* TOTALS

ALIMENTARY SYSTEM

Liver + + + + + + + + + + **10**

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

NONE

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

Bone Marrow + + + + + + + + + + **10**

Spleen + + + + + + + + + + **10**

INTEGUMENTARY SYSTEM

* .. 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

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

First Dose M/F: 07/28/03 / 07/29/03

Lab: MBA

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
.....										
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
30 PPM	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
										* TOTALS

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

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

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

TDMS No. 99002 - 03
 Test Type: 90-DAY
 Route: DOSED WATER
 Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL
 o-Chloropyridine
 CAS Number: 109-09-1

Date Report Requested: 01/15/2009
 Time Report Requested: 08:39:57
 First Dose M/F: 07/28/03 / 07/29/03
 Lab: MBA

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
.....										
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
100 PPM	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
	* TOTALS									

ALIMENTARY SYSTEM

Liver + + + + + + + + + + **10**

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

NONE

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

Bone Marrow + + + + + + + + + + **10**

Spleen + + + + + + + + + + **10**

INTEGUMENTARY SYSTEM

* .. 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

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

First Dose M/F: 07/28/03 / 07/29/03

Lab: MBA

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
.....										
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
100 PPM	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
										* TOTALS

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

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

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

TDMS No. 99002 - 03
 Test Type: 90-DAY
 Route: DOSED WATER
 Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL
 o-Chloropyridine
 CAS Number: 109-09-1

Date Report Requested: 01/15/2009
 Time Report Requested: 08:39:57
 First Dose M/F: 07/28/03 / 07/29/03
 Lab: MBA

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
.....										
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
300 PPM	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
										* TOTALS

ALIMENTARY SYSTEM

Liver + + + + + + + + + + **10**

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

NONE

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

Bone Marrow + + + + + + + + + + **10**

Spleen + + + + + + + + + + **10**

INTEGUMENTARY SYSTEM

* .. 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

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

First Dose M/F: 07/28/03 / 07/29/03

Lab: MBA

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
.....										
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
300 PPM	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
										* TOTALS

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

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

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

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
.....										
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
1000 PPM	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	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
										* TOTALS

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

* .. 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

TDMS No. 99002 - 03
 Test Type: 90-DAY
 Route: DOSED WATER
 Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL
 o-Chloropyridine
 CAS Number: 109-09-1

Date Report Requested: 01/15/2009
 Time Report Requested: 08:39:57
 First Dose M/F: 07/28/03 / 07/29/03
 Lab: MBA

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	
.....											
FISCHER 344 RATS MALE	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	
1000 PPM	5	5	5	5	5	5	5	5	5	6	
	1	2	3	4	5	6	7	8	9	0	* TOTALS

CARDIOVASCULAR SYSTEM

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

ENDOCRINE SYSTEM

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	10
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	10
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	10
Parathyroid Gland	+	+	+	M	+	+	M	+	+	M	7
Pituitary Gland	+	M	+	I	+	+	+	+	+	+	8
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	10

GENERAL BODY SYSTEM

NONE

* .. 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

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
.....										
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
1000 PPM	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	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
										* TOTALS

GENITAL SYSTEM

Epididymis	+	+	+	+	+	+	+	+	+	+	10
Preputial Gland	+	+	+	+	+	+	+	+	+	+	10
Prostate	+	+	+	+	+	+	+	+	+	+	10
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	10
Testes	+	+	+	+	+	+	+	+	+	+	10

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+	10
Lymph Node, Mandibular	M	M	M	+	M	M	M	M	M	M	1
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	10
Spleen	+	+	+	+	+	+	+	+	+	+	10
Thymus	+	+	+	+	+	+	+	+	+	+	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

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
<hr/>										
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
1000 PPM	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
										* TOTALS

INTEGUMENTARY SYSTEM

Mammary Gland	+	+	+	+	+	+	M	+	+	+	9
Skin	+	+	+	+	+	+	+	+	+	+	10

MUSCULOSKELETAL SYSTEM

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

NERVOUS SYSTEM

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

RESPIRATORY SYSTEM

Lung	+	+	+	+	+	+	+	+	+	+	10
Nose	+	+	+	+	+	+	+	+	+	+	10
Trachea	+	+	+	+	+	+	+	+	+	+	10

SPECIAL SENSES SYSTEM

* .. 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

TDMS No. 99002 - 03
 Test Type: 90-DAY
 Route: DOSED WATER
 Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL
 o-Chloropyridine
 CAS Number: 109-09-1

Date Report Requested: 01/15/2009
 Time Report Requested: 08:39:57
 First Dose M/F: 07/28/03 / 07/29/03
 Lab: MBA

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
.....										
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
1000 PPM	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
	* TOTALS									

Eye	+	+	+	+	+	+	+	+	+	+	10
Harderian Gland	+	+	+	+	+	+	+	+	+	+	10

URINARY SYSTEM

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

SYSTEMIC LESIONS

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

*** END OF MALE DATA ***

* .. 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

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
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
VEHICLE CONTROL	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
	* TOTALS									

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

* .. 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

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
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
VEHICLE CONTROL	0	0	0	0	0	0	0	0	0	0
	6	6	6	6	6	6	6	6	7	
	1	2	3	4	5	6	7	8	9	0
										* TOTALS

CARDIOVASCULAR SYSTEM

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

ENDOCRINE SYSTEM

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

GENERAL BODY SYSTEM

NONE

* .. 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

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
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
VEHICLE CONTROL	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
										* TOTALS

GENITAL SYSTEM

Clitoral Gland	+	+	+	+	+	+	+	+	+	+	10
Ovary	+	+	+	+	+	+	+	+	+	+	10
Uterus	+	+	+	+	+	+	+	+	+	+	10

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+	10
Lymph Node, Mandibular	M	M	M	M	M	M	M	M	M	M	0
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	10
Spleen	+	+	+	+	+	+	+	+	+	+	10
Thymus	+	+	+	+	+	+	+	+	+	+	10

INTEGUMENTARY SYSTEM

Mammary Gland	+	+	+	+	+	+	+		+	+	9
---------------	---	---	---	---	---	---	---	--	---	---	----------

* .. 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

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
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
VEHICLE CONTROL	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
										* TOTALS
Skin	+	+	+	+	+	+	+	+	+	+
										10
MUSCULOSKELETAL SYSTEM										
Bone	+	+	+	+	+	+	+	+	+	+
										10
NERVOUS SYSTEM										
Brain	+	+	+	+	+	+	+	+	+	+
										10
RESPIRATORY SYSTEM										
Lung	+	+	+	+	+	+	+	+	+	+
										10
Nose	+	+	+	+	+	+	+	+	+	+
										10
Trachea	+	+	+	+	+	+	+	+	+	+
										10
SPECIAL SENSES SYSTEM										
Eye	+	+	+	+	+	+	+	+	+	+
										10
Harderian 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

	0	0	0	0	0	0	0	0	0	0
DAY ON TEST	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
.....										
FISCHER 344 RATS FEMALE	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
VEHICLE CONTROL	6	6	6	6	6	6	6	6	7	7
	1	2	3	4	5	6	7	8	9	0
										* TOTALS

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+	10
Urinary Bladder	+	+	+	+	+	+	+	+	+	M	9

SYSTEMIC LESIONS

Multiple Organ	+	+	+	+	+	+	+	+	+	+	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

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

First Dose M/F: 07/28/03 / 07/29/03

Lab: MBA

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
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
10 PPM	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
										* TOTALS

ALIMENTARY SYSTEM

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

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

NONE

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+
										10

Spleen	+	+	+	+	+	+	+	+	+	+
										10

INTEGUMENTARY SYSTEM

- * .. 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

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

First Dose M/F: 07/28/03 / 07/29/03

Lab: MBA

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
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
10 PPM	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
										* TOTALS

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

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

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

TDMS No. 99002 - 03
 Test Type: 90-DAY
 Route: DOSED WATER
 Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL
 o-Chloropyridine
 CAS Number: 109-09-1

Date Report Requested: 01/15/2009
 Time Report Requested: 08:39:57
 First Dose M/F: 07/28/03 / 07/29/03
 Lab: MBA

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
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
30 PPM	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
										* TOTALS

ALIMENTARY SYSTEM

Liver + + + + + + + + + + **10**

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

NONE

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

Bone Marrow + + + + + + + + + + **10**

Spleen + + + + + + + + + + **10**

INTEGUMENTARY SYSTEM

* .. 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

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

First Dose M/F: 07/28/03 / 07/29/03

Lab: MBA

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
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
30 PPM	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
										* TOTALS

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

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

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

TDMS No. 99002 - 03
 Test Type: 90-DAY
 Route: DOSED WATER
 Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL
 o-Chloropyridine
 CAS Number: 109-09-1

Date Report Requested: 01/15/2009
 Time Report Requested: 08:39:57
 First Dose M/F: 07/28/03 / 07/29/03
 Lab: MBA

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
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
100 PPM	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
										* TOTALS

ALIMENTARY SYSTEM

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

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

NONE

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

Bone Marrow + + + + + + + + + + 10

Spleen + + + + + + + + + + 10

INTEGUMENTARY SYSTEM

* .. 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

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

First Dose M/F: 07/28/03 / 07/29/03

Lab: MBA

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
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
100 PPM	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
										* TOTALS

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

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

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

TDMS No. 99002 - 03
 Test Type: 90-DAY
 Route: DOSED WATER
 Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL
 o-Chloropyridine
 CAS Number: 109-09-1

Date Report Requested: 01/15/2009
 Time Report Requested: 08:39:57
 First Dose M/F: 07/28/03 / 07/29/03
 Lab: MBA

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
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
300 PPM	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
										* TOTALS

ALIMENTARY SYSTEM

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

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

NONE

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

Bone Marrow + + + + + + + + + + 10

Spleen + + + + + + + + + + 10

INTEGUMENTARY SYSTEM

* .. 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

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

First Dose M/F: 07/28/03 / 07/29/03

Lab: MBA

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
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
300 PPM	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
										* TOTALS

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

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

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

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
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
1000 PPM	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	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
										* TOTALS

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

* .. 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

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
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
1000 PPM	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
										* TOTALS

CARDIOVASCULAR SYSTEM

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

ENDOCRINE SYSTEM

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+
Parathyroid Gland	M	I	+	+	+	+	+	+	+	+
Pituitary Gland	+	+	+	+	+	+	+	+	+	+
Thyroid Gland	+	+	+	+	+	+	+	+	+	+

GENERAL BODY SYSTEM

NONE

* .. 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

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
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
1000 PPM	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	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
										* TOTALS

GENITAL SYSTEM

Clitoral Gland	+	+	+	+	+	+	+	+	+	+
Ovary	+	+	+	+	+	+	+	+	+	+
Uterus	+	+	+	+	+	+	+	+	+	+

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+
Lymph Node, Mandibular	M	M	M	M	M	M	M	M	M	M
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+
Spleen	+	+	+	+	+	+	+	+	+	+
Thymus	+	+	+	+	+	+	+	+	+	+

INTEGUMENTARY SYSTEM

Mammary Gland	+	+	+	+	+	+	+	+	+	+
---------------	---	---	---	---	---	---	---	---	---	---

* .. 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

TDMS No. 99002 - 03
 Test Type: 90-DAY
 Route: DOSED WATER
 Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL
 o-Chloropyridine
 CAS Number: 109-09-1

Date Report Requested: 01/15/2009
 Time Report Requested: 08:39:57
 First Dose M/F: 07/28/03 / 07/29/03
 Lab: MBA

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
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
1000 PPM	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	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
										* TOTALS
Skin	+	+	+	+	+	+	+	+	+	+
										10
MUSCULOSKELETAL SYSTEM										
Bone	+	+	+	+	+	+	+	+	+	+
										10
NERVOUS SYSTEM										
Brain	+	+	+	+	+	+	+	+	+	+
										10
RESPIRATORY SYSTEM										
Lung	+	+	+	+	+	+	+	+	+	+
										10
Nose	+	+	+	+	+	+	+	+	+	+
										10
Trachea	+	+	+	+	+	+	+	+	+	+
										10
SPECIAL SENSES SYSTEM										
Eye	+	+	+	+	+	+	+	+	+	+
										10
Harderian 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

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

First Dose M/F: 07/28/03 / 07/29/03

Lab: MBA

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
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
1000 PPM	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	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
										* TOTALS

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+
Urinary Bladder	+	+	+	+	+	+	+	+	+	+

SYSTEMIC LESIONS

Multiple Organ	+	+	+	+	+	+	+	+	+	+
----------------	---	---	---	---	---	---	---	---	---	---

*** END OF REPORT ***

* .. 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