

**TDMS No.** 95003 - 05  
**Test Type:** CHRONIC  
**Route:** SKIN APPLICATION  
**Species/Strain:** RATS/F 344/N

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

Methyl trans-styryl ketone  
**CAS Number:** 1896-62-4

**Date Report Requested:** 07/06/2010  
**Time Report Requested:** 12:57:38  
**First Dose M/F:** 04/05/04 / 04/05/04  
**Lab:** SRI

F#2\_R2

**C Number:** C95003  
**Lock Date:** 01/29/2007  
**Cage Range:** ALL  
**Date Range:** ALL  
**Reasons For Removal:** ALL  
**Removal Date Range:** ALL  
**Treatment Groups:** Include ALL  
**Study Gender:** Both  
**TDMSE Version:** 2.2.0

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FISCHER 344 RATS MALE	DAY ON TEST																									ANIMAL ID	males (cont...)
	0 7 1 6	0 7 3 0	0 7 3 0	0 7 3 0	0 5 9 0	0 7 2 9	0 3 6 8	0 7 3 0	0 6 6 7	0 6 6 3	0 7 7 3	0 5 5 4	0 7 7 3	0 7 7 3	0 5 0 2	0 7 1 0	0 7 3 0	0 7 3 2	0 5 7 3	0 6 5 9	0 7 3 0	0 6 0 1	0 6 5 9	0 6 6 4			
0 MG/KG	0 0 0 1	0 0 0 2	0 0 0 3	0 0 0 4	0 0 0 5	0 0 0 6	0 0 0 7	0 0 0 8	0 0 0 9	0 0 0 0	0 0 0 1	0 0 0 2	0 0 0 3	0 0 0 4	0 0 0 5	0 0 0 6	0 0 0 7	0 0 0 8	0 0 0 9	0 0 0 0	0 0 0 1	0 0 0 2	0 0 0 3	0 0 0 4	0 0 0 5		

**ALIMENTARY SYSTEM**

Esophagus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+
Intestine Large, Cecum Edema	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
			3								2														2
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+	+	+	A	+	+	
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	I	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Intestine Small, Duodenum Epithelium, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+
											3														
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+
Intestine Small, Jejunum	+	+	+	+	A	+	A	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	A	+	+
Liver	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Basophilic Focus		X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
Clear Cell Focus				X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
Degeneration, Cystic			2																						
Eosinophilic Focus		X					X				X													1	
Hepatodiaphragmatic Nodule														X								X			
Infiltration Cellular, Mixed Cell																								1	
Mixed Cell Focus		X				X										X		X						X	
Necrosis, Focal																									
Bile Duct, Hyperplasia	1	2	4	2		2		1	4	2	3	1	1	3	3		1	1		2		3		2	2
Centrilobular, Necrosis											2				2								2		
Hepatocyte, Hyperplasia, Focal				3																					

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 2) Mild 4) Marked

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FISCHER 344 RATS MALE 0 MG/KG	DAY ON TEST																									ANIMAL ID	males (cont...)
	0 7 1 6	0 7 3 0	0 7 3 0	0 7 3 0	0 5 9 0	0 7 2 9	0 3 6 8	0 7 3 0	0 6 6 7	0 6 3 0	0 6 6 3	0 7 7 9	0 5 5 4	0 7 0 3	0 7 1 0	0 7 3 2	0 7 3 2	0 5 3 1	0 6 7 3	0 6 3 0	0 6 0 1	0 6 5 9	0 6 9 4				
Hepatocyte, Vacuolization Cytoplasmic Kupffer Cell, Pigmentation	2										3	3							3								
Mesentery Accessory Spleen Fat, Necrosis	+	+				+	+							+	+								+	+			
		3				2	2							3	4												
Oral Mucosa																											
Pancreas Atrophy Cyst Acinus, Cytoplasmic Alteration Acinus, Hyperplasia, Focal	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+		
	4	1	4		3		2		1					3	2		3	4	1	1		1	2	2	3	1	
		X	X	X				X	X								X							X	X		
		2															2		2								
Salivary Glands Atrophy	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		
Stomach, Forestomach Edema Erosion Inflammation, Chronic Active Ulcer Epithelium, Hyperplasia	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		
			2																								
	3													4		3						3					
	4		2										3		2												
Stomach, Glandular Cyst Edema Erosion Inflammation, Chronic Active Ulcer	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		
														1		2						1		1			
														3		3											

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DAY ON TEST	FISCHER 344 RATS MALE																									ANIMAL ID	males (cont...)
	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		
7	7	7	7	5	7	3	7	6	6	7	7	5	7	7	7	7	7	5	6	7	6	6	6	6	6	6	
1	3	3	3	9	2	6	3	7	6	0	2	5	0	1	3	3	3	3	7	5	3	0	5	9	4		
6	0	0	0	0	9	8	0	7	3	3	9	4	3	0	0	2	2	1	3	9	0	1	9	4	4		
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	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	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
1	2	3	4	5	6	7	8	9	0	1	2	3	4	5	6	7	8	9	0	1	2	2	2	2	2	2	

Glands, Hyperplasia

Tongue

+

**CARDIOVASCULAR SYSTEM**

Heart

Cardiomyopathy

Inflammation, Chronic

Thrombosis

+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
3	3	3	3	2	3		3	3	3	2	3	3	1	3	3		3	2	1	2	3	3	3		3	3	
		3					2			3		3															

**ENDOCRINE SYSTEM**

Adrenal Cortex

Accessory Adrenal Cortical Nodule

Degeneration, Fatty

Hyperplasia, Focal

Hypertrophy, Focal

+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
	X	X	X		X		X		X	X	X	X		X	X		X	X		X	X		X	X		X
2	3	3	1	1			2		2		2		1		1	1	2		2		1	2		1	2	
1		2	1				1								1	1	2		1	2		1	2			

Adrenal Medulla

Hyperplasia

+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
3	2	3								3		1	3											2		1	2

Islets, Pancreatic

Hyperplasia

+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+
				2																							

Parathyroid Gland

+	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

Pituitary Gland

Pars Distalis, Angiectasis

Pars Distalis, Cyst

Pars Distalis, Hyperplasia

+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
							2										1										

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	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 MG/KG	7	7	7	7	5	7	3	7	6	6	7	7	5	7	7	7	7	7	5	6	7	6	6	6	6	
	1	3	3	3	9	2	6	3	7	6	0	2	5	0	1	3	3	3	3	7	5	3	0	5	9	
	6	0	0	0	0	9	8	0	7	3	3	9	4	3	0	0	2	2	1	3	9	0	1	9	4	
	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	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	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	0	0	0	0	0	0	0	0	
	1	2	3	4	5	6	7	8	9	0	1	2	3	4	5	6	7	8	9	0	1	2	3	4	5	

Pars Distalis, Hyperplasia, Focal  
 Pars Intermedia, Angiectasis  
 Pars Intermedia, Cyst  
 Pars Nervosa, Infiltration Cellular, Mixed Cell

2 3 2  
 1 3  
 3

Thyroid Gland  
 C-cell, Hyperplasia  
 Follicle, Cyst  
 Follicular Cell, Hyperplasia

+ A + +  
 1 1 2 1 1 3 1

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Epididymis  
 Inflammation, Chronic

+  
 2 2 2 3

Preputial Gland  
 Inflammation, Chronic

+  
 2 2 2 3

Prostate  
 Inflammation, Chronic  
 Epithelium, Hyperplasia

+  
 3 2 2 3 2 3 3 3 3 2 2 4 3 1 3 2 1

Seminal Vesicle  
 Fibrosis

+ +

Testes  
 Artery, Inflammation, Chronic

+ +

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| FISCHER 344 RATS MALE<br>0 MG/KG | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | males<br>(cont...)    |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|                                  | 0<br>7<br>1<br>6      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>5<br>9<br>0      | 0<br>7<br>2<br>9      | 0<br>3<br>6<br>8      | 0<br>7<br>3<br>0      | 0<br>6<br>6<br>7      | 0<br>6<br>6<br>3      | 0<br>7<br>7<br>3      | 0<br>7<br>5<br>9      | 0<br>7<br>5<br>4      | 0<br>7<br>7<br>3      | 0<br>7<br>7<br>0      | 0<br>7<br>7<br>2      | 0<br>7<br>7<br>2      | 0<br>7<br>7<br>1      | 0<br>5<br>5<br>3      | 0<br>6<br>7<br>9      | 0<br>7<br>3<br>0      | 0<br>6<br>0<br>1      | 0<br>6<br>5<br>9      | 0<br>6<br>6<br>4      |                       |                       |
| ANIMAL ID                        | 0<br>0<br>0<br>0<br>1 | 0<br>0<br>0<br>0<br>2 | 0<br>0<br>0<br>0<br>3 | 0<br>0<br>0<br>0<br>4 | 0<br>0<br>0<br>0<br>5 | 0<br>0<br>0<br>0<br>6 | 0<br>0<br>0<br>0<br>7 | 0<br>0<br>0<br>0<br>8 | 0<br>0<br>0<br>0<br>9 | 0<br>0<br>0<br>0<br>0 | 0<br>0<br>0<br>0<br>1 | 0<br>0<br>0<br>0<br>1 | 0<br>0<br>0<br>0<br>2 | 0<br>0<br>0<br>0<br>3 | 0<br>0<br>0<br>0<br>4 | 0<br>0<br>0<br>0<br>5 | 0<br>0<br>0<br>0<br>6 | 0<br>0<br>0<br>0<br>7 | 0<br>0<br>0<br>0<br>8 | 0<br>0<br>0<br>0<br>9 | 0<br>0<br>0<br>0<br>0 | 0<br>0<br>0<br>0<br>1 | 0<br>0<br>0<br>0<br>2 | 0<br>0<br>0<br>0<br>3 | 0<br>0<br>0<br>0<br>4 | 0<br>0<br>0<br>0<br>5 |
| Germinal Epithelium, Atrophy     | 2                     | 1                     | 3                     | 2                     | 4                     | 1                     |                       |                       |                       |                       | 1                     |                       |                       | 2                     | 1                     | 3                     | 1                     |                       | 3                     | 1                     | 4                     |                       | 1                     |                       |                       |                       |
| Interstitial Cell, Hyperplasia   |                       |                       | 1                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |                       |                       |                       |                       | 2                     |                       |

**HEMATOPOIETIC SYSTEM**

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hyperplasia                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |
| Myelofibrosis                        |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node                           |   | + | + |   |   |   |   |   | + | + |   |   |   | + | + |   |   |   |   | + |   |   | + |   | + |
| Deep Cervical, Hyperplasia, Lymphoid |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mediastinal, Ectasia                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |
| Mediastinal, Hemorrhage              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |
| Mediastinal, Hyperplasia, Lymphoid   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mediastinal, Pigmentation            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pancreatic, Ectasia                  |   |   |   |   |   |   |   |   |   |   |   | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node, Mandibular               | M | M | M | M | M | M | M | M | M | + | M | M | M | M | M | M | + | M | M | M | M | M | M | M |   |
| Ectasia                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hyperplasia, Lymphoid                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node, Mesenteric               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Ectasia                              |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hemorrhage                           |   |   |   | 1 |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |
| Hyperplasia, Lymphoid                |   |   |   |   |   |   | 2 |   |   |   |   |   | 2 |   |   | 2 |   |   |   |   |   |   |   |   |   |
| Pigmentation                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Spleen                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Accessory Spleen                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibrosis                             |   |   |   | 2 |   |   |   |   | 3 |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |
| Hematopoietic Cell Proliferation     |   |   |   |   |   |   |   |   |   |   |   | 2 | 2 |   | 2 | 2 | 2 | 1 |   |   | 2 |   | 3 | 2 | 3 |

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Lab: SRI

|                       |         | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |   |   |   |   |   |   |   |
|-----------------------|---------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|---|---|---|---|---|---|---|---|
|                       |         | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    |   |   |   |   | 0 |   |   |   |   |
| FISCHER 344 RATS MALE | 0 MG/KG | 7           | 7 | 7 | 7 | 5 | 7 | 3 | 7 | 6 | 6 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 6                  | 7 | 6 | 6 | 6 | 6 |   |   |   |   |
|                       |         | 1           | 3 | 3 | 3 | 9 | 2 | 6 | 3 | 7 | 6 | 0 | 2 | 5 | 0 | 1 | 3 | 3 | 3 | 3 | 7 | 5                  | 3 | 0 | 5 | 9 | 9 |   |   |   |   |
|                       |         | 6           | 0 | 0 | 0 | 0 | 9 | 8 | 0 | 7 | 3 | 3 | 9 | 4 | 3 | 0 | 0 | 2 | 2 | 1 | 3 | 9                  | 0 | 1 | 9 | 4 |   |   |   |   |   |
|                       |         | ANIMAL ID   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |   |   |   |   |   |   |   |   |
|                       |         | 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 | 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 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2                  | 2 | 2 | 2 | 2 | 2 |   |   |   |   |
|                       |         | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1                  | 2 | 3 | 4 | 5 |   |   |   |   |   |

Hemorrhage  
Necrosis  
Lymphoid Follicle, Hyperplasia

4

Thymus  
Cyst

+  
X

INTEGUMENTARY SYSTEM

Mammary Gland  
Hyperplasia

+  
2 3 3 3 3 4 3 4 4 4 2 2 4 4 2 1

Skin  
Cyst Epithelial Inclusion  
Hemorrhage  
Inflammation, Acute  
Ulcer  
Control, Hyperkeratosis  
Control Epidermis, Hyperplasia  
Epidermis, Hyperplasia  
Site Of Application, Hyperkeratosis

+  
3 3 4 4 4 3  
1 1 1 1  
4 4 4 3  
1 1 1 1 1 1

MUSCULOSKELETAL SYSTEM

Bone

+ +

Skeletal Muscle

+

NERVOUS SYSTEM

Brain

+ +

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
+ .. Tissue examined microscopically M .. Missing tissue  
X .. Lesion present A .. Autolysis precludes evaluation  
I .. Insufficient tissue BLANK .. Not examined microscopically  
1-4 .. Lesion qualified as:  
1) Minimal 3) Moderate  
2) Mild 4) Marked

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST      | FISCHER 344 RATS MALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID | males<br>(cont...) |   |  |  |  |  |  |
|------------------|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|--------------------|---|--|--|--|--|--|
|                  | 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 |  |  |  |  |  |
| 7                | 7                     | 7 | 7 | 5 | 7 | 3 | 7 | 6 | 6 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 6 | 7 | 6 | 6 | 6 | 6 | 6         |                    |   |  |  |  |  |  |
| 1                | 3                     | 3 | 3 | 9 | 2 | 6 | 3 | 7 | 6 | 0 | 2 | 5 | 0 | 1 | 3 | 3 | 3 | 3 | 7 | 5 | 3 | 0 | 5 | 9 | 9 | 4         |                    |   |  |  |  |  |  |
| 6                | 0                     | 0 | 0 | 0 | 9 | 8 | 0 | 7 | 3 | 3 | 9 | 4 | 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 | 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 | 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 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2         |                    |   |  |  |  |  |  |
| 1                | 2                     | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 |           |                    |   |  |  |  |  |  |
| Compression      | 3                     |   |   | 4 |   |   |   | 4 |   |   |   |   | 3 |   | 3 |   |   | 2 |   |   | 3 |   | 4 |   |   |           | 2                  |   |  |  |  |  |  |
| Necrosis         |                       |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |   |  |  |  |  |  |
| Peripheral Nerve |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   | +         |                    | + |  |  |  |  |  |
| Spinal Cord      |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   | +         |                    | + |  |  |  |  |  |

**RESPIRATORY SYSTEM**

|   |   |  |   |   |   |  |   |   |   |  |   |  |   |  |   |  |   |   |   |   |   |  |   |  |   |  |  |
|---|---|--|---|---|---|--|---|---|---|--|---|--|---|--|---|--|---|---|---|---|---|--|---|--|---|--|--|
| Lung  | + |  |   |   |   |  |   |   |   |  |   |  |   |  |   |  |   |   |   |   |   |  |   |  |   |  |  |
| Hemorrhage                                    |   |  |   |   |   |  |   |   |   |  |   |  |   |  |   |  |   | 2 |   |   |   |  |   |  |   |  |  |
| Infiltration Cellular, Histiocyte             | 1 |  |   | 4 |   |  |   | 2 |   |  |   |  | 1 |  | 1 |  |   | 1 |   |   | 1 |  |   |  |   |  |  |
| Inflammation, Chronic                         |   |  |   |   |   |  |   |   |   |  |   |  |   |  |   |  |   |   |   |   |   |  |   |  | 1 |  |  |
| Nose  | + |  |   |   |   |  |   |   |   |  |   |  |   |  |   |  |   |   |   |   |   |  |   |  |   |  |  |
| Foreign Body                                  | X |  | X |   | X |  | X |   | X |  | X |  | X |  | X |  | X |   | X |   | X |  | X |  | X |  |  |
| Fungus  |   |  |   |   |   |  |   |   |   |  |   |  |   |  |   |  |   | X |   | X |   |  |   |  |   |  |  |
| Inflammation, Chronic                         | 1 |  |   | 1 |   |  |   | 3 |   |  |   |  | 4 |  | 2 |  |   | 1 |   | 1 |   |  | 1 |  |   |  |  |
| Olfactory Epithelium, Metaplasia, Respiratory | 1 |  |   |   |   |  |   |   |   |  |   |  |   |  |   |  |   |   |   |   |   |  |   |  |   |  |  |
| Respiratory Epithelium, Hyperplasia           | 1 |  |   | 1 |   |  |   | 3 |   |  |   |  | 2 |  | 1 |  |   | 1 |   | 1 |   |  | 2 |  |   |  |  |
| Respiratory Epithelium, Metaplasia, Squamous  |   |  |   |   |   |  |   |   |   |  |   |  |   |  |   |  |   | 3 |   | 2 |   |  |   |  |   |  |  |
| Turbinate, Necrosis                           |   |  |   |   |   |  |   |   |   |  |   |  |   |  |   |  |   | 2 |   |   |   |  |   |  |   |  |  |
| Trachea                                       | + |  |   |   |   |  |   |   |   |  |   |  |   |  |   |  |   |   |   |   |   |  |   |  |   |  |  |

**SPECIAL SENSES SYSTEM**

|                      |   |  |  |   |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |
|----------------------|---|--|--|---|--|--|--|--|--|--|--|--|---|--|--|--|--|--|--|--|--|--|--|--|--|
| Eye                  | + |  |  |   |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |
| Cataract             |   |  |  |   |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |
| Retina, Degeneration |   |  |  | 2 |  |  |  |  |  |  |  |  | 1 |  |  |  |  |  |  |  |  |  |  |  |  |

\* .. 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



**TDMS No.** 95003 - 05  
**Test Type:** CHRONIC  
**Route:** SKIN APPLICATION  
**Species/Strain:** RATS/F 344/N

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

Methyl trans-styryl ketone  
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**Date Report Requested:** 07/06/2010  
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**First Dose M/F:** 04/05/04 / 04/05/04  
**Lab:** SRI

|  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |  |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|---|--|
| FISCHER 344 RATS MALE<br><br>0 MG/KG                           | ANIMAL ID   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |   |  |
|  |             | 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 |  |
|  |             | 7 | 7 | 7 | 7 | 5 | 7 | 3 | 7 | 6 | 6 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 5 | 6 | 7 | 6 | 6 | 6 |                    | 6 | 6 |  |
|  | 1           | 3 | 3 | 3 | 9 | 2 | 6 | 3 | 7 | 6 | 0 | 2 | 5 | 0 | 1 | 3 | 3 | 3 | 3 | 7 | 5 | 3 | 0 | 5 | 9 | 9                  |   |   |  |
|  | 6           | 0 | 0 | 0 | 0 | 9 | 8 | 0 | 7 | 3 | 3 | 9 | 4 | 3 | 0 | 0 | 2 | 2 | 1 | 3 | 9 | 0 | 1 | 9 | 4 |                    |   |   |  |
|  | 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 | 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 | 1 | 2 | 2 | 2 | 2 | 2 | 2                  |   |   |  |
|  | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 |                    |   |   |  |
| Harderian Gland<br>Hyperplasia, Focal<br>Inflammation, Chronic | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                  |   |   |  |
| Zymbal's Gland   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | +                  |   |   |  |

**URINARY SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Infarct                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Inflammation, Chronic  |   |   |   | 2 |   |   |   | 3 |   |   |   | 3 |   |   |   | 2 | 3 |   |   | 3 |   |   |   |   |   |   |
| Nephropathy            | 4 | 3 | 2 | 3 |   | 2 |   | 3 | 2 | 1 | 4 | 4 | 3 | 3 | 2 | 2 | 3 | 3 | 4 | 1 |   | 3 |   | 3 | 2 |   |
| Renal Tubule, Necrosis |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Urinary Bladder        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

\* .. 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

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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
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 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

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First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>0 MG/KG      | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |     |    |   |   |   |     |   |     |   |     |     |     |    |     |
|---------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----|----|---|---|---|-----|---|-----|---|-----|-----|-----|----|-----|
|                                       | 0<br>7<br>3<br>1      | 0<br>6<br>7<br>1      | 0<br>6<br>1<br>6      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>8      | 0<br>7<br>3<br>1      | 0<br>6<br>5<br>3      | 0<br>7<br>3<br>2      | 0<br>5<br>3<br>7      | 0<br>6<br>3<br>4      | 0<br>6<br>3<br>9      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>6<br>5<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>4<br>8<br>0      |                       |                       |     |    |   |   |   |     |   |     |   |     |     |     |    |     |
| ANIMAL ID                             | 0<br>0<br>0<br>2<br>6 | 0<br>0<br>0<br>2<br>7 | 0<br>0<br>0<br>2<br>8 | 0<br>0<br>0<br>2<br>9 | 0<br>0<br>0<br>3<br>0 | 0<br>0<br>0<br>3<br>1 | 0<br>0<br>0<br>3<br>2 | 0<br>0<br>0<br>3<br>3 | 0<br>0<br>0<br>3<br>4 | 0<br>0<br>0<br>3<br>5 | 0<br>0<br>0<br>3<br>6 | 0<br>0<br>0<br>3<br>7 | 0<br>0<br>0<br>3<br>8 | 0<br>0<br>0<br>3<br>9 | 0<br>0<br>0<br>4<br>0 | 0<br>0<br>0<br>4<br>1 | 0<br>0<br>0<br>4<br>2 | 0<br>0<br>0<br>4<br>3 | 0<br>0<br>0<br>4<br>4 | 0<br>0<br>0<br>4<br>5 | 0<br>0<br>0<br>4<br>6 | 0<br>0<br>0<br>4<br>7 | 0<br>0<br>0<br>4<br>8 | 0<br>0<br>0<br>4<br>9 | 0<br>0<br>0<br>5<br>0 |     |    |   |   |   |     |   |     |   |     |     |     |    |     |
| Hepatocyte, Vacuolization Cytoplasmic | 3                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     | 3                     | 3 3                   |                       |                       |                       |                       |                       |                       | 9                     | 2.8                   |     |    |   |   |   |     |   |     |   |     |     |     |    |     |
| Kupffer Cell, Pigmentation            | 2                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     | 2.0 |    |   |   |   |     |   |     |   |     |     |     |    |     |
| Mesentery                             | +                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | +                     |                       | +                     |                       | +                     |                       | +                     |                       |                       |                       |                       |                       |     | 15 |   |   |   |     |   |     |   |     |     |     |    |     |
| Accessory Spleen                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |     | X  |   |   |   |     |   |     | 3 |     |     |     |    |     |
| Fat, Necrosis                         | 4                     |                       | 3                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |     |    |   | 3 |   |     |   |     |   |     | 9   | 2.9 |    |     |
| Oral Mucosa                           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | +                     |                       |                       |                       |                       |     |    |   |   | 1 |     |   |     |   |     |     |     |    |     |
| Pancreas                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 49                    |     |    |   |   |   |     |   |     |   |     |     |     |    |     |
| Atrophy                               | 1                     | 2                     |                       |                       | 1                     | 1                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     | 4                     | 2                     | 1                     | 2                     |                       | 3                     | 2                     | 4   | 1  | 2 | 2 |   |     |   |     |   | 32  | 2.2 |     |    |     |
| Cyst                                  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       | X                     |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |     |    |   | X |   | X   |   |     |   |     |     |     | 14 |     |
| Acinus, Cytoplasmic Alteration        |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 4                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |     |    |   |   |   |     | 2 | 3.5 |   |     |     |     |    |     |
| Acinus, Hyperplasia, Focal            | 2                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 4                     | 2.0 |    |   |   |   |     |   |     |   |     |     |     |    |     |
| Salivary Glands                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 50                    |     |    |   |   |   |     |   |     |   |     |     |     |    |     |
| Atrophy                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |     |    |   |   |   |     | 1 | 1.0 |   |     |     |     |    |     |
| Stomach, Forestomach                  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 50                    |     |    |   |   |   |     |   |     |   |     |     |     |    |     |
| Edema                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 4                     |                       |                       |     |    |   |   |   |     | 3 | 3.0 |   |     |     |     |    |     |
| Erosion                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |     |    |   |   | 1 | 2.0 |   |     |   |     |     |     |    |     |
| Inflammation, Chronic Active          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |     |    |   |   |   |     | 1 | 3.0 |   |     |     |     |    |     |
| Ulcer                                 |                       |                       | 2                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 4                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |     |    |   |   |   | 4   |   |     |   |     |     |     | 6  | 3.3 |
| Epithelium, Hyperplasia               |                       |                       | 3                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |     |    |   | 1 |   | 3   |   |     |   |     |     |     | 8  | 2.5 |
| Stomach, Glandular                    |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 50                    |     |    |   |   |   |     |   |     |   |     |     |     |    |     |
| Cyst                                  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |     |    |   |   |   |     | 1 |     |   |     |     |     |    |     |
| Edema                                 | 3                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |     |    |   |   |   |     | 1 | 3.0 |   |     |     |     |    |     |
| Erosion                               |                       |                       | 2                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |                       | 1                     |                       |                       |                       |                       |                       |                       |                       |     |    |   |   |   |     |   |     |   |     |     |     | 7  | 1.4 |
| Inflammation, Chronic Active          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |     |    |   |   |   |     | 4 | 4.0 |   |     |     |     |    |     |
| Ulcer                                 | 3                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |     |    |   |   |   |     |   |     | 3 | 4.0 |     |     |    |     |

\* .. 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

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1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| DAY ON TEST | FISCHER 344 RATS MALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |   |   |
|-------------|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|---|
|             | 0                     | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          | 0 | 0 |
| 7           | 6                     | 6 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 5 | 6 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7        | 4 |   |
| 3           | 7                     | 1 | 3 | 3 | 3 | 0 | 3 | 5 | 3 | 3 | 6 | 3 | 3 | 3 | 3 | 3 | 5 | 3 | 3 | 3 | 3        | 8 |   |
| 1           | 1                     | 6 | 1 | 0 | 1 | 8 | 1 | 3 | 2 | 7 | 4 | 9 | 1 | 0 | 0 | 1 | 0 | 1 | 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 | 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 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |   |
|             | 2                     | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4        | 4 | 5 |
| 6           | 7                     | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7        | 8 |   |

Glands, Hyperplasia 4 1 4.0

Tongue 1

CARDIOVASCULAR SYSTEM

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| Heart                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |
| Cardiomyopathy        | 2 | 1 | 3 | 3 | 1 | 2 | 1 | 3 |   | 3 | 3 | 1 | 3 | 2 | 2 | 3 | 2 | 3 | 3 | 3 | 3 | 3 | 1 | 45 2.5 |
| Inflammation, Chronic |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 3.0  |
| Thrombosis            | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 5 2.4  |

ENDOCRINE SYSTEM

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| Adrenal Cortex                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |
| Accessory Adrenal Cortical Nodule |   | X | X |   | X |   | X |   | X |   | X |   |   | X |   | X |   | X |   | X |   | X |   | 25     |
| Degeneration, Fatty               |   | 3 | 2 | 1 | 2 | 2 | 3 | 2 |   | 1 |   |   | 2 | 1 | 2 | 1 | 1 |   | 1 | 1 |   |   |   | 30 1.7 |
| Hyperplasia, Focal                |   |   |   |   | 1 |   |   |   |   | 1 |   |   | 1 |   |   |   |   | 1 |   |   |   |   |   | 12 1.3 |
| Hypertrophy, Focal                | 1 |   |   | 2 |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 7 1.4  |
| Adrenal Medulla                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49     |
| Hyperplasia                       |   | 1 |   | 1 | 1 |   | 2 |   | 3 |   |   |   |   | 2 | 2 | 2 | 1 | 1 | 1 | 2 |   | 1 |   | 22 1.8 |
| Islets, Pancreatic                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49     |
| Hyperplasia                       | 1 |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   | 4 1.5  |
| Parathyroid Gland                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49     |
| Pituitary Gland                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |
| Pars Distalis, Angiectasis        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 1.5  |
| Pars Distalis, Cyst               |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   | 2      |
| Pars Distalis, Hyperplasia        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>0 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | * TOTALS |
|----------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|--|----------|
|                                  | 0<br>7<br>3<br>1 | 0<br>6<br>7<br>1 | 0<br>6<br>1<br>6 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>8 | 0<br>7<br>3<br>1 | 0<br>6<br>5<br>3 | 0<br>7<br>3<br>2 | 0<br>5<br>3<br>7 | 0<br>6<br>3<br>4 | 0<br>6<br>3<br>9 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>1 | 0<br>6<br>5<br>0 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>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                | 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                |  |          |
|                                  | 2                | 2                | 2                | 2                | 3                | 3                | 3                | 3                | 3                | 3                | 3                | 3                | 3                | 4                | 4                | 4                | 4                | 4                | 4                | 4                | 4                | 4                | 5                |  |          |
|                                  | 6                | 7                | 8                | 9                | 0                | 1                | 2                | 3                | 4                | 5                | 6                | 7                | 8                | 9                | 0                | 1                | 2                | 3                | 4                | 5                | 6                | 7                | 8                |  |          |

|   |   |   |  |   |  |  |  |   |  |   |  |  |   |  |  |  |  |  |   |  |  |  |  |   |     |
|---|---|---|--|---|--|--|--|---|--|---|--|--|---|--|--|--|--|--|---|--|--|--|--|---|-----|
| Pars Distalis, Hyperplasia, Focal               | 2 | 2 |  | 3 |  |  |  | 3 |  | 1 |  |  | 3 |  |  |  |  |  |   |  |  |  |  | 9 | 2.3 |
| Pars Intermedia, Angiectasis                    |   |   |  |   |  |  |  |   |  |   |  |  |   |  |  |  |  |  | 3 |  |  |  |  | 4 | 2.3 |
| Pars Intermedia, Cyst                           | X |   |  |   |  |  |  |   |  |   |  |  |   |  |  |  |  |  |   |  |  |  |  | 1 |     |
| Pars Nervosa, Infiltration Cellular, Mixed Cell |   |   |  |   |  |  |  |   |  |   |  |  | 1 |  |  |  |  |  |   |  |  |  |  | 2 | 2.0 |

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|
| Thyroid Gland                | + | + | A | + | + | + | + | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | 46 |     |
| C-cell, Hyperplasia          |   |   |   |   | 1 |   |   |   |   |   |   | 1 |   |   |   |   | 1 |   | 1 |   |   |   |   | 11 | 1.3 |
| Follicle, Cyst               |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   | 3  |     |
| Follicular Cell, Hyperplasia |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   | 1  | 2.0 |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

|                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |
|-------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|
| Epididymis                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Inflammation, Chronic         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  | 2.0 |
| Preputial Gland               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Inflammation, Chronic         |   | 3 |   | 2 | 2 | 2 | 3 |   |   | 2 |   |   |   | 2 |   | 3 |   |   |   |   |   |   |   | 14 | 2.4 |
| Prostate                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Inflammation, Chronic         |   | 3 |   |   | 2 | 3 | 3 |   | 2 |   |   | 3 | 2 | 2 | 3 | 3 | 1 | 3 |   | 2 | 2 | 3 | 2 | 33 | 2.5 |
| Epithelium, Hyperplasia       |   |   |   | 1 |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   | 3  | 1.3 |
| Seminal Vesicle               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Fibrosis                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   | 1  | 3.0 |
| Testes                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Artery, Inflammation, Chronic |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 2.0 |

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+ .. Tissue examined microscopically

X .. Lesion present

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TDMS No. 95003 - 05  
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Lab: SRI

| FISCHER 344 RATS MALE<br>0 MG/KG | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |            |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------|
|                                  | 0<br>7<br>3<br>1      | 0<br>6<br>7<br>1      | 0<br>6<br>1<br>6      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>8      | 0<br>7<br>3<br>1      | 0<br>6<br>5<br>3      | 0<br>7<br>3<br>2      | 0<br>5<br>3<br>7      | 0<br>6<br>6<br>4      | 0<br>6<br>3<br>9      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>6<br>5<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>4<br>8<br>0      |                       |                       |            |
| ANIMAL ID                        | 0<br>0<br>0<br>2<br>6 | 0<br>0<br>0<br>2<br>7 | 0<br>0<br>0<br>2<br>8 | 0<br>0<br>0<br>2<br>9 | 0<br>0<br>0<br>3<br>0 | 0<br>0<br>0<br>3<br>1 | 0<br>0<br>0<br>3<br>2 | 0<br>0<br>0<br>3<br>3 | 0<br>0<br>0<br>3<br>4 | 0<br>0<br>0<br>3<br>5 | 0<br>0<br>0<br>3<br>6 | 0<br>0<br>0<br>3<br>7 | 0<br>0<br>0<br>3<br>8 | 0<br>0<br>0<br>3<br>9 | 0<br>0<br>0<br>4<br>0 | 0<br>0<br>0<br>4<br>1 | 0<br>0<br>0<br>4<br>2 | 0<br>0<br>0<br>4<br>3 | 0<br>0<br>0<br>4<br>4 | 0<br>0<br>0<br>4<br>5 | 0<br>0<br>0<br>4<br>6 | 0<br>0<br>0<br>4<br>7 | 0<br>0<br>0<br>4<br>8 | 0<br>0<br>0<br>4<br>9 | 0<br>0<br>0<br>5<br>0 |            |
| Germinal Epithelium, Atrophy     | 3                     | 3                     |                       | 1                     | 1                     | 2                     | 1                     |                       | 2                     | 1                     |                       |                       |                       | 3                     | 4                     | 1                     |                       |                       | 3                     | 4                     |                       | 4                     | 1                     |                       | <b>30</b>             | <b>2.1</b> |
| Interstitial Cell, Hyperplasia   |                       | 2                     | 1                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |                       |                       | <b>6</b>              | <b>1.3</b> |

**HEMATOPOIETIC SYSTEM**

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Bone Marrow                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Hyperplasia                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>2</b>  |
| Myelofibrosis                        |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>2</b>  |
| Lymph Node                           | + | + | + | + | + |   |   | + | + | + |   |   | + |   | + |   |   |   |   |   | + |   | + | + | + | <b>25</b> |
| Deep Cervical, Hyperplasia, Lymphoid |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Mediastinal, Ectasia                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>2</b>  |
| Mediastinal, Hemorrhage              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>3</b>  |
| Mediastinal, Hyperplasia, Lymphoid   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>2</b>  |
| Mediastinal, Pigmentation            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Pancreatic, Ectasia                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>3</b>  |
| Lymph Node, Mandibular               | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | <b>3</b>  |
| Ectasia                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Hyperplasia, Lymphoid                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Lymph Node, Mesenteric               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Ectasia                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>5</b>  |
| Hemorrhage                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>4</b>  |
| Hyperplasia, Lymphoid                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>3</b>  |
| Pigmentation                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>2</b>  |
| Spleen                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Accessory Spleen                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Fibrosis                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>3</b>  |
| Hematopoietic Cell Proliferation     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>20</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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE<br>0 MG/KG | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|                                  | 0<br>7<br>3<br>1      | 0<br>6<br>7<br>1      | 0<br>6<br>1<br>6      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>8      | 0<br>7<br>3<br>1      | 0<br>6<br>5<br>3      | 0<br>7<br>3<br>2      | 0<br>5<br>3<br>7      | 0<br>6<br>6<br>4      | 0<br>6<br>3<br>9      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>6<br>5<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>4<br>3<br>0      |                       |                       |
| ANIMAL ID                        | 0<br>0<br>0<br>2<br>6 | 0<br>0<br>0<br>2<br>7 | 0<br>0<br>0<br>2<br>8 | 0<br>0<br>0<br>2<br>9 | 0<br>0<br>0<br>3<br>0 | 0<br>0<br>0<br>3<br>1 | 0<br>0<br>0<br>3<br>2 | 0<br>0<br>0<br>3<br>3 | 0<br>0<br>0<br>3<br>4 | 0<br>0<br>0<br>3<br>5 | 0<br>0<br>0<br>3<br>6 | 0<br>0<br>0<br>3<br>7 | 0<br>0<br>0<br>3<br>8 | 0<br>0<br>0<br>3<br>9 | 0<br>0<br>0<br>4<br>0 | 0<br>0<br>0<br>4<br>1 | 0<br>0<br>0<br>4<br>2 | 0<br>0<br>0<br>4<br>3 | 0<br>0<br>0<br>4<br>4 | 0<br>0<br>0<br>4<br>5 | 0<br>0<br>0<br>4<br>6 | 0<br>0<br>0<br>4<br>7 | 0<br>0<br>0<br>4<br>8 | 0<br>0<br>0<br>4<br>9 | 0<br>0<br>0<br>5<br>0 |

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |     |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|-----|
| Hemorrhage                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 | 1  | 4.0 |     |
| Necrosis                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  | 1   | 3.0 |
| Lymphoid Follicle, Hyperplasia |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |     | 2.0 |
| Thymus                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |     |
| Cyst                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     | 1   |

**INTEGUMENTARY SYSTEM**

|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |     |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|-----|
| Mammary Gland                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | M | + | + | + |   | 48 |     |     |
| Hyperplasia                         | 3 | 3 |   | 2 |   | 3 | 4 |   |   | 4 |   | 2 | 2 |   | 3 | 1 | 3 |   | 4 | 3 | 3 |   | 3 | 2 |   | 32 | 2.9 |     |
| Skin                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |     |
| Cyst Epithelial Inclusion           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |    |     | 1   |
| Hemorrhage                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |    |     | 2.0 |
| Inflammation, Acute                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |    |     | 2.0 |
| Ulcer                               |   |   |   |   | 3 |   |   | 3 |   | 4 | 4 |   |   | 3 |   |   |   |   | 3 |   | 3 | 4 |   |   |   | 15 | 3.5 |     |
| Control, Hyperkeratosis             |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   | 5  | 1.0 |     |
| Control Epidermis, Hyperplasia      |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   | 2  | 1.0 |     |
| Epidermis, Hyperplasia              |   |   |   | 3 |   |   | 4 |   | 4 | 3 |   |   |   | 3 |   |   |   |   | 3 |   | 3 | 3 |   | 1 |   | 15 | 3.4 |     |
| Site Of Application, Hyperkeratosis |   |   | 1 | 1 |   | 1 | 1 | 1 | 2 | 1 | 1 | 1 |   |   |   |   |   |   |   |   | 3 | 3 | 1 |   | 1 | 20 | 1.1 |     |

**MUSCULOSKELETAL SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|---|
| Bone            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |  |   |
| Skeletal Muscle |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 1 |

**NERVOUS SYSTEM**

|       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  |  |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|--|
| Brain | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |  |  |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|--|

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST | FISCHER 344 RATS MALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |   |   |   |
|-------------|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|---|---|
|             | 0                     | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          | 0 | 0 | 0 |
| 7           | 3                     | 1 | 6 | 1 | 3 | 3 | 0 | 3 | 5 | 3 | 6 | 3 | 3 | 3 | 3 | 3 | 5 | 3 | 3 | 3 | 3        | 3 | 4 |   |
| 6           | 7                     | 1 | 8 | 1 | 9 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6        | 7 | 8 | 9 |
| 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 | 0 | 0 |
| 2           | 2                     | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4        | 4 | 4 | 5 |
| 6           | 7                     | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7        | 8 | 9 | 0 |

|                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |     |
|------------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|-----|
| Compression      |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 17 | 2.9 |
| Necrosis         | 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 2  | 2.0 |
| Peripheral Nerve | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 6  |     |
| Spinal Cord      | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 7  |     |

**RESPIRATORY SYSTEM**

|   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |     |
|---|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|-----|
| Lung  | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 50 |     |
| Hemorrhage                                    | 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 2  | 2.0 |
| Infiltration Cellular, Histiocyte             | 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 14 | 1.4 |
| Inflammation, Chronic                         | 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 4  | 1.0 |
| Nose  | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 50 |     |
| Foreign Body                                  | X |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 23 |     |
| Fungus  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 2  |     |
| Inflammation, Chronic                         | 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 25 | 1.6 |
| Olfactory Epithelium, Metaplasia, Respiratory | 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 7  | 1.3 |
| Respiratory Epithelium, Hyperplasia           | 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 19 | 1.4 |
| Respiratory Epithelium, Metaplasia, Squamous  | 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 3  | 2.3 |
| Turbinate, Necrosis                           |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1  | 2.0 |
| Trachea                                       | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 50 |     |

**SPECIAL SENSES SYSTEM**

|                      |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |     |
|----------------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|-----|
| Eye                  | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 50 |     |
| Cataract             | 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1  | 3.0 |
| Retina, Degeneration | 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 3  | 2.3 |

\* .. 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



TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST | FISCHER 344 RATS MALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID | * TOTALS |   |   |   |
|-------------|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|----------|---|---|---|
|             | 0                     | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |           |          | 0 | 0 | 0 |
| 7           | 6                     | 6 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 5 | 6 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7         | 7        | 4 | 0 |   |
| 3           | 7                     | 1 | 3 | 3 | 3 | 0 | 3 | 5 | 3 | 3 | 6 | 3 | 3 | 3 | 3 | 3 | 5 | 3 | 3 | 3 | 3         | 3        | 8 | 0 |   |
| 1           | 1                     | 6 | 1 | 0 | 1 | 8 | 1 | 3 | 2 | 7 | 4 | 9 | 1 | 0 | 0 | 1 | 0 | 0 | 1 | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         | 0        | 0 | 0 |   |
| 2           | 2                     | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4         | 4        | 5 | 0 |   |
| 6           | 7                     | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7         | 8        | 9 | 0 |   |

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|
| Harderian Gland       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Hyperplasia, Focal    |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 1.0 |
| Inflammation, Chronic |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 |   | 1  | 4.0 |
| Zymbal's Gland        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |     |

**URINARY SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |     |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|-----|
| Kidney                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |     |
| Infarct                |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 2.0 |     |
| Inflammation, Chronic  |   |   |   | 3 | 3 | 3 |   | 2 |   |   |   |   | 2 | 3 | 3 | 3 | 2 |   |   | 2 | 2 | 2 | 2 | 19 | 2.5 |     |
| Nephropathy            | 2 | 2 | 1 | 3 | 3 | 3 | 3 | 3 | 2 | 3 | 1 | 1 |   | 3 | 4 | 4 | 3 | 3 | 4 | 1 | 3 | 2 | 3 | 3  | 44  | 2.7 |
| Renal Tubule, Necrosis |   |   |   |   |   |   |   |   | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 4.0 |     |
| Urinary Bladder        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |     |

\* .. 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  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
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 Species/Strain: RATS/F 344/N

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST           |  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                                | 0 |
|-----------------------|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------------------|---|
| FISCHER 344 RATS MALE |  | 2 | 7 | 6 | 7 | 6 | 7 | 7 | 7 | 4 | 7 | 7 | 6 | 6 | 5 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 5 | 7                                | 7 |
| 10 MG/KG              |  | 7 | 3 | 5 | 3 | 7 | 3 | 3 | 3 | 8 | 2 | 3 | 1 | 6 | 9 | 3 | 3 | 3 | 1 | 5 | 3 | 3 | 3 | 5                                | 3 |
| ANIMAL ID             |  | 2 | 0 | 7 | 1 | 0 | 1 | 2 | 1 | 0 | 6 | 2 | 3 | 0 | 1 | 0 | 2 | 1 | 8 | 9 | 0 | 0 | 1 | 2                                | 1 |
|                       |  | 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 | 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 |
|                       |  | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7                                |   |
|                       |  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3                                |   |
|                       |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>males</b><br><b>(cont...)</b> |   |

**ALIMENTARY SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum            | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Edema                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Infiltration Cellular, Mixed Cell |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |
| Intestine Large, Colon            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum           | + | + | + | I | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum            | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum          | + | + | + | + | + | + | + | + | A | + | + | M | A | + | + | + | + | + | + | + | + | + | + | + |
| Inflammation, Chronic Active      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |
| Liver                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Angiectasis                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |
| Basophilic Focus                  |   |   | X | X |   |   | X | X |   |   | X |   |   | X | X | X |   |   | X | X | X | X | X | X |
| Clear Cell Focus                  |   |   | X | X |   |   | X | X |   |   | X |   |   | X | X |   |   |   | X |   | X |   | X | X |
| Degeneration, Cystic              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |
| Eosinophilic Focus                |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   | X |   |   |   | X |   |   | 1 |
| Hepatodiaphragmatic Nodule        |   |   |   |   | X |   |   |   |   |   | X |   | X |   |   |   |   |   |   |   |   |   |   | X |
| Infiltration Cellular, Mixed Cell |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Mixed Cell Focus                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |
| Necrosis, Focal                   |   |   |   | X |   |   |   |   |   |   |   |   |   |   | X | X | X |   |   | X | X |   |   | X |
| Thrombosis                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>10 MG/KG     | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | males<br>(cont...) |                  |                  |                  |                  |                  |
|---------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|--------------------|------------------|------------------|------------------|------------------|------------------|
|                                       | 0<br>2<br>7<br>2 | 0<br>7<br>3<br>0 | 0<br>6<br>5<br>7 | 0<br>7<br>3<br>1 | 0<br>6<br>7<br>0 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>4<br>8<br>0 | 0<br>7<br>2<br>6 | 0<br>7<br>3<br>1 | 0<br>6<br>6<br>0 | 0<br>5<br>9<br>1 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>6<br>7<br>8 | 0<br>6<br>5<br>9 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>1 |           |                    | 0<br>5<br>3<br>4 | 0<br>7<br>3<br>1 | 0<br>5<br>3<br>4 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 |
| Bile Duct, Hyperplasia                |                  |                  |                  | 2                | 4                |                  |                  |                  | 1                | 1                |                  |                  | 1                |                  | 1                | 1                |                  |                  |                  |                  | 2         | 2                  | 2                |                  |                  | 1                |                  |
| Centrilobular, Necrosis               |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 4                |                  |                  |                  |                  |                  |                  |                  | 1         |                    |                  |                  |                  |                  |                  |
| Hepatocyte, Hyperplasia, Focal        |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Hepatocyte, Vacuolization Cytoplasmic |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 3                |                  |                  | 2                |                  |                  |                  |                  |           | 2                  |                  |                  |                  |                  |                  |
| Kupffer Cell, Pigmentation            |                  |                  |                  | 2                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Oval Cell, Hyperplasia                |                  |                  |                  | 3                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Mesentery                             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Accessory Spleen                      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Hemorrhage                            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Mineralization                        |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Fat, Necrosis                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Oral Mucosa                           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Pancreas                              |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Atrophy                               |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Cyst                                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Acinus, Cytoplasmic Alteration        |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Acinus, Hyperplasia, Focal            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Salivary Glands                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Atrophy                               |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Necrosis                              |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Stomach, Forestomach                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Edema                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Inflammation, Chronic Active          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Ulcer                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Epithelium, Hyperplasia               |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |

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 + .. 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:  
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TDMS No. 95003 - 05  
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 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE<br>10 MG/KG | DAY ON TEST |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | ANIMAL ID | males<br>(cont...) |    |    |    |
|-----------------------------------|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|-----------|--------------------|----|----|----|
|                                   | 02          | 07 | 06 | 07 | 06 | 07 | 07 | 07 | 04 | 07 | 07 | 06 | 06 | 05 | 07 | 07 | 07 | 07 | 06 | 07 |           |                    | 07 | 05 | 07 |
|                                   | 7           | 3  | 5  | 3  | 7  | 3  | 3  | 3  | 8  | 2  | 3  | 1  | 6  | 9  | 3  | 3  | 3  | 1  | 5  | 3  | 3         | 3                  | 5  | 3  | 3  |
|                                   | 2           | 0  | 0  | 7  | 1  | 0  | 1  | 2  | 1  | 0  | 6  | 2  | 3  | 0  | 1  | 0  | 2  | 1  | 8  | 9  | 0         | 0                  | 1  | 2  | 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  | 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  | 6  | 6  | 6  | 6  | 6  | 6  | 6  | 6  | 6  | 7  | 7         | 7                  | 7  | 7  | 7  |
|                                   | 1           | 2  | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 0  | 1  | 2  | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 0  | 1         | 2                  | 3  | 4  | 5  |

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Stomach, Glandular Edema       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Erosion                        |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |
| Mineralization                 |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |
| Ulcer                          |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Glands, Hyperplasia            |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |
| Tongue Epithelium, Hyperplasia |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |
|                                |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |

**CARDIOVASCULAR SYSTEM**

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Heart          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |   |
| Cardiomyopathy |   | 2 | 2 | 3 | 2 | 3 | 3 | 2 | 2 | 3 | 3 | 3 |   |   | 3 | 3 |   |   | 3 |   | 1 | 3 | 2 |   | 3 | 3 |
| Thrombosis     |   |   |   |   | 4 |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   | 4 |   |   |   |   |   |

**ENDOCRINE SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adrenal Cortex                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Accessory Adrenal Cortical Nodule |   | X |   |   | X | X | X | X |   |   |   |   | X |   | X | X |   | X | X |   |   |   |   | X |   |
| Atrophy                           |   |   |   | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Degeneration, Fatty               |   |   |   |   | 2 |   | 2 | 2 |   | 2 |   |   |   |   | 3 | 2 |   | 2 |   |   |   |   |   | 1 | 1 |
| Hyperplasia, Focal                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hypertrophy, Focal                |   |   |   | 1 |   | 2 |   |   |   |   |   |   |   |   | 2 |   | 2 |   |   |   |   |   |   | 2 |   |
| Necrosis                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Adrenal Medulla                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Hyperplasia                       |   |   |   |   |   |   | 1 |   | 2 |   |   |   |   |   | 1 |   |   |   | 2 |   |   | 2 |   | 3 |   |
| Islets, Pancreatic                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |

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 + .. Tissue examined microscopically  
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CAS Number: 1896-62-4

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First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>10 MG/KG            | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | males<br>(cont...) |                  |   |   |   |   |   |   |  |
|--|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|--------------------|------------------|---|---|---|---|---|---|--|
|  | 0<br>2<br>7<br>2 | 0<br>7<br>3<br>0 | 0<br>6<br>5<br>7 | 0<br>7<br>3<br>1 | 0<br>6<br>7<br>0 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>4<br>8<br>0 | 0<br>7<br>2<br>6 | 0<br>7<br>3<br>3 | 0<br>6<br>1<br>6 | 0<br>6<br>6<br>0 | 0<br>5<br>9<br>1 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>7<br>6<br>8 | 0<br>6<br>5<br>9 | 0<br>7<br>3<br>0 |           |                    | 0<br>7<br>3<br>0 |   |   |   |   |   |   |  |
| Hyperplasia                                  | 1                |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |   |   |   |   |   |   |  |
| Parathyroid Gland<br>Hyperplasia             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | + | + | + | + |   |   |  |
| Pituitary Gland<br>Pigmentation              | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                    |                  | 3 |   |   |   |   |   |  |
| Pars Distalis, Angiectasis                   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |   |   |   |   |   |   |  |
| Pars Distalis, Atrophy                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  | 3 |   |   |   |   |   |  |
| Pars Distalis, Cyst                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |   |   |   |   |   |   |  |
| Pars Distalis, Cytoplasmic Alteration, Focal |                  |                  |                  |                  |                  | 3                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |   |   |   |   |   |   |  |
| Pars Distalis, Hyperplasia, Focal            | 1                |                  |                  |                  |                  |                  |                  |                  |                  | 1                |                  |                  |                  | 2                |                  |                  |                  |                  | 2                |                  |           |                    |                  |   |   | 3 |   |   |   |  |
| Pars Intermedia, Angiectasis                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 2                |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |   |   |   |   |   |   |  |
| Pars Intermedia, Cyst                        |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |           |                    |                  |   |   |   |   |   |   |  |
| Thyroid Gland<br>C-cell, Hyperplasia         | +                | +                | +                | +                | +                | +                | +                | +                | A                | +                | +                | A                | A                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | + | + | + | + | + | + |  |
| Follicle, Cyst                               |                  |                  | 1                | 1                |                  |                  | 3                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    | 1                |   |   |   |   |   | 1 |  |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Coagulating Gland  
Inflammation, Chronic

+

3

Epididymis  
Inflammation, Chronic

+ + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

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Lab: SRI

| FISCHER 344 RATS MALE<br><br>10 MG/KG | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |   |   |   |
|---------------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|---|---|---|
|                                       | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    | 0 |   |   |   |
|                                       | 2           | 7 | 6 | 7 | 6 | 7 | 7 | 7 | 4 | 7 | 7 | 6 | 6 | 5 | 7 | 7 | 7 | 7 | 6 | 7 |                    | 7 | 5 | 7 | 7 |
| 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 | 0 | 0 | 0 | 0 | 0 | 0                  | 0 | 0 | 0 |   |
|                                       | 5           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7                  | 7 | 7 | 7 |   |
|                                       | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1                  | 2 | 3 | 4 | 5 |
| Preputial Gland                       | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                  | + | + | + |   |
| Cyst                                  |             |   |   | X |   |   |   |   | X |   | X |   |   |   |   |   |   |   |   |   |                    |   |   |   |   |
| Inflammation, Chronic                 |             |   | 3 |   | 3 |   |   |   | 2 | 2 | 3 |   |   |   |   |   |   | 2 | 2 | 2 | 2                  | 2 | 2 | 2 |   |
| Prostate                              | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                  | + | + | + |   |
| Inflammation, Chronic                 | 1           | 3 |   | 2 | 1 |   | 2 | 1 | 2 | 3 |   | 2 | 2 | 3 | 1 | 2 | 3 | 2 |   | 2 | 3                  | 2 | 1 | 2 | 4 |
| Epithelium, Hyperplasia               |             |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   | 1 | 1 |   | 1 |                    |   |   |   |   |
| Seminal Vesicle                       | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                  | + | + | + |   |
| Testes                                | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                  | + | + | + |   |
| Artery, Inflammation, Chronic         |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |   |   |
| Germinal Epithelium, Atrophy          |             | 3 | 3 | 1 |   | 3 | 2 | 2 |   | 3 |   |   | 1 |   | 1 | 2 | 1 | 4 |   | 3 | 4                  | 2 |   | 4 | 3 |
| Interstitial Cell, Hyperplasia        |             |   |   |   | 2 | 3 |   |   |   | 2 |   |   |   |   |   |   |   |   | 1 |   | 2                  | 1 |   | 2 |   |

HEMATOPOIETIC SYSTEM

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hyperplasia                          |   |   | 2 |   |   |   |   |   |   |   | 2 | 3 |   |   |   |   |   |   |   |   |   |   | 4 |   |
| Myelofibrosis                        |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Thrombosis                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node                           |   |   | + | + | + | + | + | + | + |   |   | + | + | + | + | + |   |   |   |   |   | + | + | + |
| Mediastinal, Ectasia                 |   |   |   |   |   | 3 | 3 | 2 |   |   |   |   |   | 3 |   |   |   |   |   |   |   | 3 |   |   |
| Mediastinal, Hemorrhage              |   |   |   | 2 |   |   |   |   | 1 | 3 |   |   |   | 3 | 1 | 1 |   |   |   |   |   |   | 1 | 3 |
| Mediastinal, Hyperplasia, Lymphoid   |   |   |   | 2 |   |   |   |   | 3 |   |   |   |   | 3 | 1 |   |   |   |   |   |   |   | 4 | 3 |
| Mediastinal, Pigmentation            |   |   |   | 2 |   |   |   |   |   | 3 |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |
| Pancreatic, Ectasia                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 |   |
| Pancreatic, Hemorrhage               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |
| Pancreatic, Hyperplasia, Histiocytic |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE             |  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |   |   |   |
|-----------------------------------|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|---|---|---|
| 10 MG/KG                          |  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    | 0 | 0 | 0 |   |
| ANIMAL ID                         |  | 2           | 7 | 6 | 7 | 6 | 7 | 7 | 7 | 4 | 7 | 7 | 6 | 6 | 5 | 7 | 7 | 7 | 7 | 6 | 7 |                    | 7 | 5 | 7 | 7 |
| Pancreatic, Hyperplasia, Lymphoid |  | 7           | 3 | 5 | 3 | 7 | 3 | 3 | 3 | 8 | 2 | 3 | 1 | 6 | 9 | 3 | 3 | 3 | 1 | 5 | 3 | 3                  | 3 | 5 | 3 | 3 |
| Pancreatic, Pigmentation          |  | 2           | 0 | 7 | 1 | 0 | 1 | 2 | 1 | 0 | 6 | 2 | 3 | 0 | 1 | 0 | 2 | 1 | 8 | 9 | 0 | 0                  | 1 | 4 | 1 | 1 |
| Lymph Node, Mandibular            |  | 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 |
| Lymph Node, Mesenteric            |  | 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 |
| Atrophy                           |  | 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 |
| Ectasia                           |  | 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 |
| Hemorrhage                        |  | 5           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7                  | 7 | 7 | 7 | 7 |
| Hyperplasia, Histiocytic          |  | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1                  | 2 | 3 | 4 | 5 |
| Hyperplasia, Lymphoid             |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |   |   |
| Pigmentation                      |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |   |   |
| Spleen                            |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |   |   |
| Accessory Spleen                  |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |   |   |
| Hematopoietic Cell Proliferation  |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |   |   |
| Necrosis                          |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |   |   |
| Pigmentation                      |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |   |   |
| Lymphoid Follicle, Atrophy        |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |   |   |
| Lymphoid Follicle, Hyperplasia    |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |   |   |
| Thymus                            |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |   |   |

**INTEGUMENTARY SYSTEM**

|                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Mammary Gland             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Hyperplasia               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Skin                      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cyst Epithelial Inclusion |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Inflammation, Chronic     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
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| FISCHER 344 RATS MALE | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | ANIMAL ID | males<br>(cont...) |
|-----------------------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-----------|--------------------|
|                       | 0<br>2      | 0<br>7 | 0<br>6 | 0<br>7 | 0<br>6 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>4 | 0<br>7 | 0<br>7 | 0<br>6 | 0<br>6 | 0<br>5 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>6 | 0<br>7 | 0<br>7 | 0<br>5 | 0<br>7 | 0<br>7 | 0<br>5 | 0<br>7 |           |                    |
| 10 MG/KG              | 7           | 3      | 5      | 3      | 7      | 3      | 3      | 3      | 8      | 2      | 3      | 1      | 6      | 9      | 3      | 3      | 3      | 1      | 5      | 3      | 3      | 3      | 5      | 3      | 3      | 5         | 3                  |
|                       | 2           | 0      | 7      | 1      | 0      | 1      | 2      | 1      | 0      | 6      | 2      | 3      | 0      | 1      | 0      | 2      | 1      | 8      | 9      | 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      | 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      | 0      | 0      | 0      | 0      | 0      | 0      | 0         |                    |
|                       | 5           | 5      | 5      | 5      | 5      | 5      | 5      | 5      | 5      | 6      | 6      | 6      | 6      | 6      | 6      | 6      | 6      | 6      | 6      | 7      | 7      | 7      | 7      | 7      | 7      | 7         |                    |
|                       | 1           | 2      | 3      | 4      | 5      | 6      | 7      | 8      | 9      | 0      | 1      | 2      | 3      | 4      | 5      | 6      | 7      | 8      | 9      | 0      | 1      | 2      | 3      | 4      | 5      |           |                    |

|   |   |  |  |   |  |  |  |   |   |  |  |  |  |  |   |   |   |  |   |   |  |  |   |  |   |  |  |   |  |  |  |  |   |   |  |   |  |  |  |  |  |  |  |
|---|---|--|--|---|--|--|--|---|---|--|--|--|--|--|---|---|---|--|---|---|--|--|---|--|---|--|--|---|--|--|--|--|---|---|--|---|--|--|--|--|--|--|--|
| Ulcer                                       |   |  |  |   |  |  |  | 4 |   |  |  |  |  |  |   | 4 | 4 |  |   |   |  |  |   |  | 4 |  |  |   |  |  |  |  |   |   |  |   |  |  |  |  |  |  |  |
| Control, Hyperkeratosis                     | 1 |  |  |   |  |  |  |   |   |  |  |  |  |  |   |   |   |  |   |   |  |  |   |  |   |  |  |   |  |  |  |  |   |   |  |   |  |  |  |  |  |  |  |
| Control Epidermis, Hyperplasia              | 1 |  |  | 1 |  |  |  |   |   |  |  |  |  |  | 1 |   |   |  |   |   |  |  | 1 |  |   |  |  |   |  |  |  |  |   |   |  |   |  |  |  |  |  |  |  |
| Epidermis, Hyperplasia                      |   |  |  |   |  |  |  | 3 |   |  |  |  |  |  |   | 4 | 2 |  |   |   |  |  |   |  | 1 |  |  |   |  |  |  |  | 3 | 3 |  |   |  |  |  |  |  |  |  |
| Epidermis, Site Of Application, Hyperplasia |   |  |  |   |  |  |  | 1 | 1 |  |  |  |  |  |   |   |   |  |   |   |  |  |   |  |   |  |  |   |  |  |  |  |   |   |  |   |  |  |  |  |  |  |  |
| Site Of Application, Hyperkeratosis         |   |  |  |   |  |  |  | 1 |   |  |  |  |  |  |   |   |   |  | 1 | 1 |  |  |   |  |   |  |  | 1 |  |  |  |  |   |   |  | 1 |  |  |  |  |  |  |  |

**MUSCULOSKELETAL SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibrous Osteodystrophy |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Skeletal Muscle        | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|--|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |  |  |  |
| Compression      | 3 |   | 2 |   |   |   | 4 |   |   |   | 4 |   |   |   | 3 |   |   |   | 4 |   |   |   | 2 |   |   |   | 1 |  |  |  |
| Hemorrhage       | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| Necrosis         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| Peripheral Nerve | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |  |  |  |
| Spinal Cord      | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |  |  |  |

**RESPIRATORY SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Edema                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |
| Hemorrhage                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |
| Infiltration Cellular, Histiocyte | 1 |   |   |   |   |   |   |   |   |   |   |   |   | 1 | 1 |   |   |   | 1 | 1 |   |   | 1 |   |   |   | 1 |

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

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| FISCHER 344 RATS MALE<br>10 MG/KG             | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | males<br>(cont...) |                  |                  |                  |                  |                  |
|---|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|--------------------|------------------|------------------|------------------|------------------|------------------|
|   | 0<br>2<br>7<br>2 | 0<br>7<br>3<br>0 | 0<br>6<br>5<br>7 | 0<br>7<br>3<br>1 | 0<br>6<br>7<br>0 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>4<br>8<br>0 | 0<br>7<br>2<br>6 | 0<br>7<br>3<br>2 | 0<br>6<br>1<br>3 | 0<br>6<br>6<br>0 | 0<br>5<br>9<br>1 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>6<br>5<br>8 | 0<br>7<br>3<br>9 | 0<br>6<br>3<br>0 |           |                    | 0<br>7<br>3<br>0 | 0<br>5<br>3<br>0 | 0<br>7<br>3<br>1 | 0<br>5<br>3<br>4 | 0<br>7<br>3<br>1 |
| Inflammation, Chronic<br>Metaplasia, Osseous  |                  |                  | 1                | 1                |                  | 2                |                  |                  | 2                |                  |                  |                  |                  |                  |                  | 1                |                  |                  | 1                |                  |           |                    | 2                | 1                | 2                |                  |                  |
| Nose  | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | A                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | +                | +                | +                | +                |
| Foreign Body                                  |                  |                  | X                | X                | X                | X                | X                | X                | X                |                  |                  |                  |                  | X                | X                |                  |                  |                  | X                |                  |           | X                  |                  |                  |                  |                  |                  |
| Fungus  |                  |                  |                  |                  | X                | X                | X                |                  |                  | X                |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |           | X                  |                  |                  |                  |                  |                  |
| Inflammation, Chronic                         |                  |                  | 1                | 2                | 1                | 2                | 3                | 3                | 1                |                  | 3                |                  |                  | 3                | 1                | 3                |                  |                  | 1                |                  | 1         | 3                  |                  |                  |                  |                  |                  |
| Olfactory Epithelium, Metaplasia, Respiratory |                  |                  | 1                |                  |                  | 2                | 1                | 1                |                  | 1                |                  |                  |                  |                  | 2                |                  |                  | 2                |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Respiratory Epithelium, Hyperplasia           |                  |                  | 1                | 2                | 2                | 2                | 2                |                  |                  | 3                |                  |                  |                  |                  | 2                |                  |                  | 2                |                  |                  |           | 3                  |                  |                  |                  |                  |                  |
| Respiratory Epithelium, Metaplasia, Squamous  |                  |                  |                  |                  |                  | 2                | 2                | 2                |                  |                  |                  |                  | 3                |                  |                  |                  |                  |                  |                  |                  |           | 3                  |                  |                  |                  |                  |                  |
| Trachea                                       | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | +                | +                | +                | +                |
| <b>SPECIAL SENSES SYSTEM</b>                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Eye   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | +                | +                | +                | +                |
| Inflammation, Acute                           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Harderian Gland                               | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | +                | +                | +                | +                |
| Atrophy                                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Inflammation, Chronic                         |                  |                  | 3                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Zymbal's Gland                                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  | +                |
| <b>URINARY SYSTEM</b>                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Kidney  | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | +                | +                | +                | +                |
| Cyst  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Inflammation, Suppurative                     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Inflammation, Chronic                         |                  |                  |                  |                  |                  |                  | 3                |                  |                  |                  |                  |                  |                  |                  | 2                | 3                |                  |                  |                  |                  | 2         |                    |                  | 3                |                  |                  |                  |
| Nephropathy                                   |                  |                  | 2                | 3                | 2                | 2                | 3                | 2                | 2                | 2                | 4                | 1                | 1                | 1                | 2                | 3                | 3                | 1                | 3                | 3                | 1         | 2                  | 3                | 1                | 1                | 4                |                  |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|                              |             | 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 |
|------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>FISCHER 344 RATS MALE</b> | DAY ON TEST | 2 | 7 | 6 | 7 | 6 | 7 | 7 | 7 | 4 | 7 | 7 | 6 | 6 | 5 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 5 | 7 | 7 |   |
|                              |             | 7 | 3 | 5 | 3 | 7 | 3 | 3 | 3 | 8 | 2 | 3 | 1 | 6 | 9 | 3 | 3 | 3 | 1 | 5 | 3 | 3 | 3 | 5 | 3 |   |
|                              |             | 2 | 0 | 7 | 1 | 0 | 1 | 2 | 1 | 0 | 6 | 2 | 3 | 0 | 1 | 0 | 2 | 1 | 8 | 9 | 0 | 0 | 1 | 4 | 1 |   |
| <b>10 MG/KG</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 |   |
|                              | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|                              |             | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 |   |
|                              | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 |   |   |

males  
(cont...)

Renal Tubule, Necrosis

Urethra

Urinary Bladder

Hemorrhage

Inflammation, Chronic

Transitional Epithelium, Hyperplasia

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
 + .. Tissue examined microscopically M .. Missing tissue  
 X .. Lesion present A .. Autolysis precludes evaluation  
 I .. Insufficient tissue BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:  
 1) Minimal 3) Moderate  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
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 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |
|-----------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
|                       | 0732        | 0733 | 0735 | 0737 | 0738 | 0739 | 0741 | 0742 | 0743 | 0744 | 0745 | 0746 | 0747 | 0748 | 0749 | 0751 | 0752 | 0753 | 0754 | 0755 | 0756 | 0757 | 0758 | 0759 |          |
| 10 MG/KG              | 0076        | 0077 | 0078 | 0079 | 0080 | 0081 | 0082 | 0083 | 0084 | 0085 | 0086 | 0087 | 0088 | 0089 | 0090 | 0091 | 0092 | 0093 | 0094 | 0095 | 0096 | 0097 | 0098 | 0099 | 50       |

**ALIMENTARY SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |     |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|-----|
| Esophagus                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50  |     |
| Intestine Large, Cecum            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 49  |     |
| Edema                             |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2   | 2.0 |
| Infiltration Cellular, Mixed Cell |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1   | 3.0 |
| Intestine Large, Colon            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50  |     |
| Intestine Large, Rectum           | + | I | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 48  |     |
| Intestine Small, Duodenum         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50  |     |
| Intestine Small, Ileum            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A  | 48  |     |
| Intestine Small, Jejunum          | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A  | 45  |     |
| Inflammation, Chronic Active      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1   | 3.0 |
| Liver                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50  |     |
| Angiectasis                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1   | 2.0 |
| Basophilic Focus                  |   |   | X |   | X | X |   | X |   |   |   |   |   | X | X |   | X |   | X |   |   |   |   | 23 |     |     |
| Clear Cell Focus                  | X | X |   | X |   | X | X |   |   |   | X |   |   | X |   |   | X |   | X |   |   |   |   | 19 |     |     |
| Degeneration, Cystic              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   | 1 |   | 4  | 1.5 |     |
| Eosinophilic Focus                |   |   |   |   |   |   | X |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 5  |     |     |
| Hepatodiaphragmatic Nodule        |   |   | X |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | 9  |     |     |
| Infiltration Cellular, Mixed Cell |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   | 2  | 2.0 |     |
| Mixed Cell Focus                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | X | 8  |     |     |
| Necrosis, Focal                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 | 1  | 1.0 |     |
| Thrombosis                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 | 1  | 4.0 |     |

\* .. 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  
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 1) Minimal 3) Moderate  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE                 | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |                       |                       |                       |            |
|---------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|-----------------------|-----------------------|-----------------------|------------|
|                                       | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>6<br>7<br>5      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>5<br>9<br>1      | 0<br>7<br>6<br>7      | 0<br>6<br>5<br>9      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>3<br>0<br>6      | 0<br>5<br>3<br>0      | 0<br>7<br>2<br>9      | 0<br>5<br>3<br>1      | 0<br>7<br>6<br>7      | 0<br>6<br>3<br>0      | 0<br>7<br>7<br>1      |          | 0<br>7<br>3<br>2      | 0<br>7<br>0<br>0      |                       |            |
| 10 MG/KG                              | ANIMAL ID             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |                       |                       |                       |            |
|                                       | 0<br>0<br>0<br>7<br>6 | 0<br>0<br>0<br>7<br>7 | 0<br>0<br>0<br>7<br>8 | 0<br>0<br>0<br>7<br>8 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>9<br>9 | 0<br>0<br>0<br>9<br>9 | 0<br>0<br>0<br>9<br>9 | 0<br>0<br>0<br>9<br>9 | 0<br>0<br>0<br>9<br>9 | 0<br>0<br>0<br>9<br>9 | 0<br>0<br>0<br>9<br>9 |          | 0<br>0<br>0<br>9<br>9 | 0<br>0<br>0<br>9<br>9 | 0<br>0<br>0<br>9<br>9 |            |
| Bile Duct, Hyperplasia                | 1                     | 1                     | 3                     | 1                     | 1                     |                       | 2                     | 1                     | 1                     | 3                     |                       |                       | 3                     | 2                     |                       |                       | 1                     | 2                     | 1                     | 3                     | 1                     | 1        | 2                     | 2                     | <b>31</b>             | <b>1.6</b> |
| Centrilobular, Necrosis               |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |                       | 4                     |                       |                       |                       |                       |                       |                       | 2                     |                       |                       |          |                       |                       | <b>5</b>              | <b>2.8</b> |
| Hepatocyte, Hyperplasia, Focal        |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |                       |                       |                       |                       |                       |                       |                       |          |                       |                       | <b>1</b>              | <b>2.0</b> |
| Hepatocyte, Vacuolization Cytoplasmic |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |                       |                       |                       |                       |                       | 3                     |                       | 2                     |                       |                       |                       |                       |          |                       |                       | <b>6</b>              | <b>2.3</b> |
| Kupffer Cell, Pigmentation            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |                       |                       | <b>1</b>              | <b>2.0</b> |
| Oval Cell, Hyperplasia                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |                       |                       | <b>1</b>              | <b>3.0</b> |
| Mesentery                             |                       |                       |                       |                       |                       | +                     |                       |                       |                       |                       |                       |                       | +                     | +                     | +                     |                       |                       |                       | +                     |                       | +                     | +        |                       |                       | <b>14</b>             |            |
| Accessory Spleen                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |                       |                       | <b>1</b>              |            |
| Hemorrhage                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |                       |                       | <b>1</b>              | <b>4.0</b> |
| Mineralization                        |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |                       |                       | <b>1</b>              | <b>3.0</b> |
| Fat, Necrosis                         |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     | 2                     |                       |                       | 2                     |                       | 2                     | 3                     |                       |          |                       |                       | <b>8</b>              | <b>2.4</b> |
| Oral Mucosa                           |                       |                       |                       |                       |                       |                       | +                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |                       |                       | <b>1</b>              |            |
| Pancreas                              | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | +                     |                       | <b>50</b>             |            |
| Atrophy                               |                       |                       |                       | 2                     | 3                     |                       | 2                     |                       |                       | 2                     | 1                     | 3                     |                       | 1                     | 1                     |                       |                       |                       | 2                     |                       |                       | 1        | 4                     | 4                     | <b>27</b>             | <b>2.1</b> |
| Cyst                                  |                       |                       |                       | X                     |                       |                       | X                     |                       |                       |                       |                       | X                     |                       |                       |                       |                       | X                     |                       |                       |                       |                       |          |                       |                       | <b>10</b>             |            |
| Acinus, Cytoplasmic Alteration        |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |                       |                       | <b>3</b>              | <b>3.0</b> |
| Acinus, Hyperplasia, Focal            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |                       |                       | <b>1</b>              | <b>3.0</b> |
| Salivary Glands                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | +                     |                       | <b>50</b>             |            |
| Atrophy                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |                       |                       | <b>1</b>              | <b>1.0</b> |
| Necrosis                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |                       |                       | <b>2</b>              | <b>2.0</b> |
| Stomach, Forestomach                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | +                     |                       | <b>50</b>             |            |
| Edema                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |                       |                       | <b>1</b>              | <b>3.0</b> |
| Inflammation, Chronic Active          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |                       |                       | <b>2</b>              | <b>2.5</b> |
| Ulcer                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       | 4                     | 1                     |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |                       |          |                       |                       | <b>6</b>              | <b>3.3</b> |
| Epithelium, Hyperplasia               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     | 2                     |                       |                       |          |                       |                       | <b>6</b>              | <b>2.8</b> |

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 + .. Tissue examined microscopically  
 X .. Lesion present  
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TDMS No. 95003 - 05  
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 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>10 MG/KG | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |      |      |      |      |      |
|-----------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|------|------|------|------|
|                                   | 0732        | 0733 | 0735 | 0737 | 0738 | 0739 | 0741 | 0742 | 0743 | 0744 | 0745 | 0746 | 0747 | 0748 | 0749 | 0750 | 0751 | 0752 | 0753 | 0754 |          | 0755 | 0756 | 0757 | 0758 | 0759 |
| ANIMAL ID                         | 0076        | 0077 | 0078 | 0079 | 0080 | 0081 | 0082 | 0083 | 0084 | 0085 | 0086 | 0087 | 0088 | 0089 | 0090 | 0091 | 0092 | 0093 | 0094 | 0095 | 0096     | 0097 | 0098 | 0099 | 0100 | 0101 |

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |       |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|
| Stomach, Glandular      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50    |
| Edema                   |   |   |   |   |   | 2 |   |   |   | 3 |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   | 3 2.3 |
| Erosion                 |   |   | 1 |   |   |   |   |   |   | 2 |   | 3 |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   | 5 2.2 |
| Mineralization          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 3.0 |
| Ulcer                   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   | 3 2.3 |
| Glands, Hyperplasia     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 2.5 |
| Tongue                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3     |
| Epithelium, Hyperplasia |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 2.0 |

**CARDIOVASCULAR SYSTEM**

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |       |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|-------|
| Heart          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |       |
| Cardiomyopathy | 3 | 1 | 3 | 3 | 3 | 3 | 3 | 3 |   | 3 | 3 | 1 | 3 | 3 | 1 | 2 | 1 |   | 3 | 1 | 3 | 3 | 2 | 3 |   | 42 2.5 |       |
| Thrombosis     | 3 |   | 2 |   |   | 3 |   |   |   | 4 |   |   |   |   |   |   |   |   |   | 4 |   |   |   |   |   |        | 8 3.4 |

**ENDOCRINE SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |        |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|--------|
| Adrenal Cortex                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |        |
| Accessory Adrenal Cortical Nodule | X |   |   |   |   | X | X | X |   | X |   |   |   | X |   |   | X |   | X |   |   |   | X | X |   | 21     |        |
| Atrophy                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        | 1 4.0  |
| Degeneration, Fatty               | 1 | 2 | 1 |   | 1 | 2 | 1 |   | 1 |   | 1 |   | 3 | 1 |   |   |   | 3 |   |   | 1 | 3 | 2 |   |   | 23 1.7 |        |
| Hyperplasia, Focal                |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   | 1 |   | 1 |   |   |   |   |   |   |        | 3 1.0  |
| Hypertrophy, Focal                |   |   |   |   | 1 |   |   |   |   | 2 |   |   |   | 1 |   |   |   |   |   | 1 | 2 | 3 |   |   |   |        | 11 1.7 |
| Necrosis                          |   |   |   |   |   |   |   |   |   |   |   | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |        | 1 4.0  |
| Adrenal Medulla                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |        |
| Hyperplasia                       | 3 |   |   | 1 |   | 1 |   |   | 2 | 1 | 3 |   | 2 |   | 1 |   |   |   |   | 1 | 2 |   | 3 |   |   |        | 17 1.8 |
| Islets, Pancreatic                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |        |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE<br>10 MG/KG            | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |
|--|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|
|  | 0732        | 0733  | 0735  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  |          |
| ANIMAL ID                                    | 00076       | 00077 | 00078 | 00079 | 00080 | 00081 | 00082 | 00083 | 00084 | 00085 | 00086 | 00087 | 00088 | 00089 | 00090 | 00091 | 00092 | 00093 | 00094 | 00095 | 00096 | 00097 | 00098 | 00099 | 00100    |
| Hyperplasia                                  |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 4 1.3    |
| Parathyroid Gland Hyperplasia                | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50 1 2.0 |
| Pituitary Gland Pigmentation                 | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 49 1 3.0 |
| Pars Distalis, Angiectasis                   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1 2.0    |
| Pars Distalis, Atrophy                       |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1 3.0    |
| Pars Distalis, Cyst                          |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 2 1 3.0  |
| Pars Distalis, Cytoplasmic Alteration, Focal |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 9 2.1    |
| Pars Distalis, Hyperplasia, Focal            |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1 2.0    |
| Pars Intermedia, Angiectasis                 |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 7        |
| Pars Intermedia, Cyst                        |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |
| Thyroid Gland C-cell, Hyperplasia            | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 45 9 1.2 |
| Follicle, Cyst                               |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 3        |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Coagulating Gland Inflammation, Chronic

1 1 3.0

Epididymis Inflammation, Chronic

+ 50 4 2.3

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE<br>10 MG/KG | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |        | * TOTALS |
|-----------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--------|----------|
|                                   | 0732        | 0733  | 0735  | 0737  | 0738  | 0739  | 0741  | 0742  | 0743  | 0744  | 0745  | 0746  | 0747  | 0748  | 0749  | 0750  | 0751  | 0752  | 0753  | 0754  | 0755  | 0756  | 0757  | 0758   |          |
| ANIMAL ID                         | 00076       | 00077 | 00078 | 00079 | 00080 | 00081 | 00082 | 00083 | 00084 | 00085 | 00086 | 00087 | 00088 | 00089 | 00090 | 00091 | 00092 | 00093 | 00094 | 00095 | 00096 | 00097 | 00098 | 00099  | 00100    |
| Preputial Gland                   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +      | 50       |
| Cyst                              |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |        | 4        |
| Inflammation, Chronic             |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |        | 19 2.2   |
| Prostate                          | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +      | 50       |
| Inflammation, Chronic             | 1           |       | 2     | 3     | 2     | 2     | 2     | 3     | 2     |       | 1     |       | 2     | 2     | 2     |       | 2     | 2     | 3     | 3     | 2     | 2     | 2     | 2      | 42 2.1   |
| Epithelium, Hyperplasia           |             |       |       | 1     |       |       |       |       | 3     |       |       |       |       |       |       |       |       |       | 1     | 1     |       |       | 2     |        | 9 1.3    |
| Seminal Vesicle                   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +      | 50       |
| Testes                            | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +      | 50       |
| Artery, Inflammation, Chronic     |             |       |       | 1     | 1     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |        | 2 1.0    |
| Germinal Epithelium, Atrophy      | 1           | 2     |       | 3     | 4     | 3     | 1     | 2     | 3     | 4     | 1     | 3     | 1     | 1     | 1     |       |       |       | 4     | 1     | 4     |       | 2     | 35 2.4 |          |
| Interstitial Cell, Hyperplasia    |             |       |       | 1     |       |       |       | 1     | 2     |       |       |       |       |       |       |       |       |       | 1     | 1     | 2     |       |       |        | 13 1.6   |

**HEMATOPOIETIC SYSTEM**

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |       |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|
| Bone Marrow                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50    |
| Hyperplasia                          |   |   |   |   |   |   | 3 |   |   |   |   |   |   | 3 |   |   |   |   |   |   | 3 |   |   |   | 7 2.9 |
| Myelofibrosis                        |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   | 2 2.5 |
| Thrombosis                           |   |   |   |   |   |   |   |   |   | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 4.0 |
| Lymph Node                           | + | + | + | + | + | + |   |   | + | + |   |   | + | + |   |   |   |   |   |   | + |   | + |   | 30    |
| Mediastinal, Ectasia                 |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   | 6 2.8 |
| Mediastinal, Hemorrhage              |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   | 9 1.9 |
| Mediastinal, Hyperplasia, Lymphoid   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   | 8 2.8 |
| Mediastinal, Pigmentation            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 2.3 |
| Pancreatic, Ectasia                  |   |   |   |   |   |   | 4 |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 3.3 |
| Pancreatic, Hemorrhage               |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   | 3 1.3 |
| Pancreatic, Hyperplasia, Histiocytic |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 3.0 |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>10 MG/KG | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |    |     |     |
|-----------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|----|-----|-----|
|                                   | 0732        | 0733  | 0735  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  |       |          |    |     |     |
| ANIMAL ID                         | 00076       | 00077 | 00078 | 00079 | 00080 | 00081 | 00082 | 00083 | 00084 | 00085 | 00086 | 00087 | 00088 | 00089 | 00090 | 00091 | 00092 | 00093 | 00094 | 00095 | 00096 | 00097 | 00098 | 00099 | 00100 |          |    |     |     |
| Pancreatic, Hyperplasia, Lymphoid |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 3        | 2  | 2.5 |     |
| Pancreatic, Pigmentation          |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 3  | 2   | 3.0 |
| Lymph Node, Mandibular            | M           | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     |          |    |     |     |
| Lymph Node, Mesenteric            | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     |          | 50 |     |     |
| Atrophy                           |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 2        | 2  | 2.5 |     |
| Ectasia                           |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 2        | 2  | 2.0 |     |
| Hemorrhage                        |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        | 3  | 1.3 |     |
| Hyperplasia, Histiocytic          |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1  | 3.0 |     |
| Hyperplasia, Lymphoid             |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 2        | 12 | 2.2 |     |
| Pigmentation                      |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 3        | 1  | 3.0 |     |
| Spleen                            | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     |          | 50 |     |     |
| Accessory Spleen                  |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1  |     |     |
| Hematopoietic Cell Proliferation  |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 2        | 21 | 1.7 |     |
| Necrosis                          |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        | 2  | 4.0 |     |
| Pigmentation                      |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 4        | 3  | 3.0 |     |
| Lymphoid Follicle, Atrophy        |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1  | 3.0 |     |
| Lymphoid Follicle, Hyperplasia    |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 3        | 1  | 3.0 |     |
| Thymus                            | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     |          | 50 |     |     |

**INTEGUMENTARY SYSTEM**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|
| Mammary Gland             | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   | 49 |     |
| Hyperplasia               |   | 3 | 2 | 4 | 4 | 3 | 2 | 4 | 1 |   |   |   |   | 4 | 4 |   | 3 | 2 |   | 3 | 2 | 3 | 3 | 4 | 4 |   | 33 | 3.0 |
| Skin                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   | 50 |     |
| Cyst Epithelial Inclusion |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |     |
| Inflammation, Chronic     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 | 1  | 4.0 |

\* .. 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



TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE<br>10 MG/KG | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |
|-----------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|
|                                   | 0732        | 0733  | 0735  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  | 0737  |          |
| ANIMAL ID                         | 00076       | 00077 | 00078 | 00079 | 00080 | 00081 | 00082 | 00083 | 00084 | 00085 | 00086 | 00087 | 00088 | 00089 | 00090 | 00091 | 00092 | 00093 | 00094 | 00095 | 00096 | 00097 | 00098 | 00099 | 00100    |

|   |   |  |  |   |   |   |   |  |   |   |   |   |   |   |  |  |  |  |   |  |   |  |   |  |  |               |
|---|---|--|--|---|---|---|---|--|---|---|---|---|---|---|--|--|--|--|---|--|---|--|---|--|--|---------------|
| Ulcer                                       |   |  |  |   | 4 | 4 |   |  |   | 3 |   |   | 4 | 4 |  |  |  |  | 3 |  | 4 |  | 4 |  |  | <b>12 3.8</b> |
| Control, Hyperkeratosis                     |   |  |  |   |   |   |   |  |   |   |   |   |   |   |  |  |  |  |   |  |   |  |   |  |  | <b>1 1.0</b>  |
| Control Epidermis, Hyperplasia              |   |  |  |   |   |   |   |  |   |   |   |   |   |   |  |  |  |  |   |  |   |  |   |  |  | <b>4 1.0</b>  |
| Epidermis, Hyperplasia                      |   |  |  |   | 3 | 4 | 4 |  |   | 3 |   |   | 3 | 3 |  |  |  |  | 3 |  | 3 |  | 3 |  |  | <b>14 3.1</b> |
| Epidermis, Site Of Application, Hyperplasia |   |  |  |   | 1 |   |   |  |   |   |   |   |   |   |  |  |  |  |   |  |   |  |   |  |  | <b>3 1.0</b>  |
| Site Of Application, Hyperkeratosis         | 1 |  |  | 1 |   | 1 |   |  | 1 |   | 1 | 1 |   |   |  |  |  |  | 1 |  | 1 |  |   |  |  | <b>13 1.0</b> |

**MUSCULOSKELETAL SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |              |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------|
| Bone                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b>    |
| Fibrous Osteodystrophy |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1 3.0</b> |
| Skeletal Muscle        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>3</b>     |

**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |              |               |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------|---------------|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b>    |               |
| Compression      |   |   | 3 | 2 | 3 |   |   |   | 4 |   |   |   |   | 2 | 2 |   |   | 3 |   |   | 2 |   | 3 |   | 2 | 3            | <b>19 2.7</b> |
| Hemorrhage       |   |   | 3 |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   | 1 | <b>4 1.8</b> |               |
| Necrosis         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 | <b>1 1.0</b> |               |
| Peripheral Nerve |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>4</b>     |               |
| Spinal Cord      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>4</b>     |               |

**RESPIRATORY SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |               |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------------|
| Lung                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b>     |
| Edema                             | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   | <b>3 2.0</b>  |
| Hemorrhage                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   | <b>2 1.5</b>  |
| Infiltration Cellular, Histiocyte | 3 |   | 1 |   |   | 1 |   |   |   | 3 |   | 1 |   |   |   |   |   |   | 1 |   | 1 | 3 |   | 1 |   | <b>15 1.4</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  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>10 MG/KG             | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |      |      |      |    |  |
|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|------|------|----|--|
|   | 0732        | 0735 | 0738 | 0741 | 0744 | 0747 | 0750 | 0753 | 0756 | 0759 | 0802 | 0805 | 0808 | 0811 | 0814 | 0817 | 0820 | 0823 | 0826 | 0829 |          | 0832 |      |      |    |  |
| ANIMAL ID                                     | 0076        | 0077 | 0078 | 0079 | 0080 | 0081 | 0082 | 0083 | 0084 | 0085 | 0086 | 0087 | 0088 | 0089 | 0090 | 0091 | 0092 | 0093 | 0094 | 0095 | 0096     | 0097 | 0098 | 0099 |    |  |
| Inflammation, Chronic                         |             |      |      |      |      |      |      |      | 1    |      |      |      |      | 1    |      |      |      |      |      |      |          |      |      |      | 13 |  |
| Metaplasia, Osseous                           |             |      |      |      |      |      |      |      |      |      |      |      |      | 1    |      |      |      |      |      |      |          |      |      |      | 2  |  |
| Nose  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | +    | +    | +    | 49 |  |
| Foreign Body                                  | X           | X    | X    |      |      | X    | X    | X    |      |      |      | X    |      |      |      |      |      | X    |      |      |          | X    |      |      | 21 |  |
| Fungus  |             |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |      | X    |      |          | X    |      |      | 9  |  |
| Inflammation, Chronic                         | 1           |      |      |      |      | 2    | 1    | 2    | 1    |      |      | 1    | 3    |      |      |      |      | 3    | 3    |      |          | 3    |      |      | 24 |  |
| Olfactory Epithelium, Metaplasia, Respiratory | 1           |      |      |      |      | 1    | 1    | 1    |      |      |      | 2    |      |      |      |      |      | 1    |      |      |          |      |      |      | 13 |  |
| Respiratory Epithelium, Hyperplasia           | 1           |      |      |      |      | 3    |      | 1    | 1    |      |      | 2    | 2    |      |      |      |      | 2    | 2    |      |          | 2    |      |      | 18 |  |
| Respiratory Epithelium, Metaplasia, Squamous  |             |      |      |      |      |      |      |      |      |      |      |      | 2    |      |      |      |      |      | 1    |      |          |      |      |      | 7  |  |
| Trachea                                       | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | +    | +    | +    | 50 |  |
| <b>SPECIAL SENSES SYSTEM</b>                  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |      |      |    |  |
| Eye   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | +    | +    | +    | 50 |  |
| Inflammation, Acute                           |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |      |      | 1  |  |
| Harderian Gland                               | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | +    | +    | +    | 50 |  |
| Atrophy                                       |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |      |      | 1  |  |
| Inflammation, Chronic                         |             |      |      |      |      | 3    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          | 2    |      |      | 2  |  |
| Zymbal's Gland                                |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |      |      | 1  |  |
| <b>URINARY SYSTEM</b>                         |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |      |      |    |  |
| Kidney  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | +    | +    | +    | 50 |  |
| Cyst  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          | X    |      |      | 2  |  |
| Inflammation, Suppurative                     |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      | 1    |      | 1  |  |
| Inflammation, Chronic                         | 3           |      |      |      | 2    | 3    |      |      |      | 2    | 2    |      |      |      |      |      |      | 2    |      |      | 2        |      | 3    |      | 14 |  |
| Nephropathy                                   | 3           | 2    | 3    | 2    | 3    | 1    | 2    | 2    | 3    | 2    | 2    | 1    | 3    | 4    | 2    |      |      | 3    | 2    |      | 3        | 2    | 2    | 1    | 3  |  |

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

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First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br><br>10 MG/KG | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |       | * TOTALS |
|---------------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|----------|
|                                       | 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     |          |
|                                       | 7           | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 7 | 6 | 6 | 7 | 7 | 3 | 5 | 7 | 5 | 7 | 6 | 7 | 7 | 7 | 7     |          |
| 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 | 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     |          |
|                                       | 7           | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0     |          |
|                                       | 6           | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0     |          |
| Renal Tubule, Necrosis                |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1     |          |
| Urethra                               |             |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1     |          |
| Urinary Bladder                       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 50    |          |
| Hemorrhage                            |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0 |          |
| Inflammation, Chronic                 |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0 |          |
| Transitional Epithelium, Hyperplasia  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 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

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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
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 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Methyl trans-styryl ketone

CAS Number: 1896-62-4

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First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

|                       |  | DAY ON TEST |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     | males<br>(cont...) |     |     |     |    |
|-----------------------|--|-------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|-----|-----|-----|----|
| FISCHER 344 RATS MALE |  | 07          | 06  | 07  | 06  | 07  | 06  | 07  | 07  | 07  | 07  | 06  | 07  | 07  | 07  | 07  | 07  | 06  | 07  | 05  | 07  |                    | 05  | 07  | 07  | 06 |
| 30 MG/KG              |  | 30          | 33  | 33  | 55  | 33  | 73  | 33  | 33  | 31  | 33  | 33  | 33  | 00  | 22  | 33  | 00  | 55  | 33  | 77  | 15  |                    | 55  | 33  | 33  | 66 |
| ANIMAL ID             |  | 001         | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001                | 001 | 001 | 001 |    |
|                       |  | 1           | 1   | 1   | 1   | 1   | 1   | 1   | 1   | 1   | 1   | 1   | 1   | 1   | 1   | 1   | 1   | 1   | 1   | 1   | 1   | 1                  | 1   | 1   | 1   |    |
|                       |  | 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           | 2   | 3   | 4   | 5   | 6   | 7   | 8   | 9   | 0   | 1   | 2   | 3   | 4   | 5   | 6   | 7   | 8   | 9   | 0   | 1                  | 2   | 3   | 4   | 5  |

ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + |   |
| Intestine Large, Cecum<br>Edema  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
|  |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Intestine Large, Colon<br>Inflammation, Chronic<br>Epithelium, Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Large, Rectum<br>Epithelium, Hyperplasia                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | I | + | + | + | + | + | + | + | + |   |
| Intestine Small, Duodenum<br>Epithelium, Hyperplasia                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
|  |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |
| Intestine Small, Ileum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Small, Jejunum<br>Epithelium, Hyperplasia                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |
| Liver  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Basophilic Focus   | X | X |   |   |   | X | X |   |   |   |   | X | X |   | X |   |   |   | X |   | X | X |   | X | X |   |
| Clear Cell Focus   | X |   |   |   |   |   | X | X | X |   |   |   | X |   |   | X | X |   |   |   |   |   | X | X |   |   |
| Degeneration, Cystic   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |
| Eosinophilic Focus   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibrosis   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatodiaphragmatic Nodule   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | X |   |   |
| Infiltration Cellular, Mixed Cell  |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |

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

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

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| FISCHER 344 RATS MALE<br>30 MG/KG   | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID | males<br>(cont...) |
|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|--------------------|
|   | 0730        | 0633 | 0733 | 0635 | 0737 | 0637 | 0737 | 0737 | 0737 | 0637 | 0737 | 0737 | 0737 | 0637 | 0737 | 0737 | 0737 | 0637 | 0737 | 0537 | 0737 | 0537 | 0737 | 0737 | 0637 |           |                    |
| Mixed Cell Focus  |             |      |      | X    |      |      |      |      |      |      |      |      | X    |      |      |      |      |      | X    | X    |      |      |      |      |      |           |                    |
| Bile Duct, Hyperplasia<br>Centrilobular, Necrosis   | 2           | 1    | 3    | 1    |      | 1    |      | 1    | 2    |      |      | 1    |      | 1    | 1    | 2    | 3    |      | 3    | 1    | 1    | 1    |      | 1    | 1    |           |                    |
| Hepatocyte, Hyperplasia, Focal<br>Hepatocyte, Vacuolization Cytoplasmic                     |             |      |      |      |      |      |      |      | 4    |      |      |      | 3    |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |
| Mesentery<br>Fat, Necrosis  |             |      | +    |      |      | +    |      |      |      |      |      | +    |      |      |      |      |      | +    |      | +    |      |      |      |      |      |           |                    |
| Pancreas<br>Atrophy<br>Cyst<br>Acinus, Cytoplasmic Alteration<br>Acinus, Hyperplasia, Focal | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |           |                    |
|   | 3           |      |      | 3    | 2    | 2    |      |      |      |      |      |      |      | 2    | 2    |      |      |      |      | 3    | 1    | 3    | 3    | 2    |      |           |                    |
|   |             |      |      | X    |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |           |                    |
|   |             |      |      | 3    |      |      |      |      | 3    |      |      | 3    |      |      |      |      |      |      |      |      |      |      | 3    |      |      |           |                    |
|   |             |      |      |      |      |      |      | 3    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |
| Salivary Glands   | +           | M    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |           |                    |
| Stomach, Forestomach<br>Edema<br>Erosion<br>Perforation<br>Ulcer<br>Epithelium, Hyperplasia | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |           |                    |
|   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 3    | 3    |      |      |      |      | 2    |      |           |                    |
|   |             |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |
|   |             |      |      | 4    |      |      |      |      | 4    |      |      |      |      |      |      | 4    | 3    |      |      |      |      |      |      |      |      |           |                    |
|   |             |      |      |      |      |      |      |      | 3    |      |      |      | 4    |      |      |      | 2    |      |      |      |      |      |      |      |      |           |                    |
| Stomach, Glandular<br>Edema<br>Erosion<br>Ulcer   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |           |                    |
|   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 2    |           |                    |
|   |             |      |      |      | 2    |      |      |      |      |      |      |      | 3    |      |      |      |      |      |      | 1    |      |      |      |      |      |           |                    |
| Tongue  |             |      |      |      |      |      |      |      |      |      |      | +    | +    |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |

\* .. 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  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| DAY ON TEST | FISCHER 344 RATS MALE |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | ANIMAL ID | males<br>(cont...) |    |    |
|-------------|-----------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|-----------|--------------------|----|----|
|             | 07                    | 06 | 07 | 06 | 07 | 06 | 07 | 07 | 07 | 07 | 06 | 07 | 07 | 07 | 07 | 07 | 06 | 07 | 05 | 07 |           |                    | 05 | 07 |
| 30 MG/KG    | 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  | 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  | 1  | 1  | 1         | 1                  | 1  | 1  |
| 0           | 0                     | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 1  | 1  | 1  | 1  | 1  | 1  | 1  | 1  | 1  | 2  | 2  | 2         | 2                  | 2  | 2  |
| 1           | 2                     | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 0  | 1  | 2  | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 0  | 1  | 2         | 3                  | 4  | 5  |

|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Pars Intermedia, Hyperplasia, Focal |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |
| Thyroid Gland                       | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + |
| Ultimobranchial Cyst                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| C-cell, Hyperplasia                 |   | 1 | 3 |   |   |   | 2 |   |   |   |   | 3 | 1 |   |   | 1 |   |   |   |   |   | 1 | 1 |   |
| Follicle, Cyst                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Follicle, Degeneration, Focal       |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Epididymis                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Granuloma Sperm              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |
| Inflammation, Chronic        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |
| Preputial Gland              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Inflammation, Chronic        |   | 2 |   |   |   |   |   |   |   |   | 2 | 2 |   |   |   | 2 | 2 | 2 |   |   |   | 2 |   | 2 |
| Prostate                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Inflammation, Chronic        | 1 | 2 | 2 |   |   |   | 2 | 1 | 1 | 3 |   | 2 | 1 | 3 | 2 | 3 | 3 | 2 | 3 | 3 |   | 3 | 3 |   |
| Epithelium, Hyperplasia      |   |   |   |   |   |   |   |   |   | 1 |   | 2 |   |   |   |   |   |   | 1 |   |   |   |   |   |
| Seminal Vesicle              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Inflammation                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Inflammation, Chronic        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Testes                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Germinal Epithelium, Atrophy | 3 |   | 1 |   | 3 |   | 2 | 2 |   | 3 |   | 1 | 3 | 3 | 4 |   | 1 | 2 | 3 | 1 | 4 |   | 2 | 2 |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
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 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST                    | FISCHER 344 RATS MALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID | males<br>(cont...) |   |   |   |   |   |
|--------------------------------|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|--------------------|---|---|---|---|---|
|                                | 0                     | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |           |                    | 0 |   |   |   |   |
| 7                              | 6                     | 7 | 6 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 5 | 7 | 5 | 7         | 7                  | 6 | 0 |   |   |   |
| 3                              | 3                     | 3 | 5 | 3 | 7 | 3 | 3 | 3 | 3 | 1 | 3 | 3 | 3 | 0 | 2 | 3 | 0 | 5 | 3 | 7 | 1         | 5                  | 3 | 3 | 6 | 0 |   |
| 0                              | 3                     | 1 | 7 | 1 | 3 | 1 | 0 | 1 | 0 | 2 | 0 | 1 | 8 | 9 | 1 | 4 | 9 | 0 | 5 | 6 | 4         | 1                  | 0 | 7 | 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 | 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 | 1 | 1 | 1         | 1                  | 1 | 1 | 0 |   |   |
| 0                              | 0                     | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2         | 2                  | 2 | 2 | 0 |   |   |
| 1                              | 2                     | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2         | 3                  | 4 | 5 | 1 |   |   |
| Interstitial Cell, Hyperplasia |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |   |   | 1 | 3 | 1 |

### HEMATOPOIETIC SYSTEM

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hyperplasia                          |   |   |   |   | 4 |   |   |   |   | 2 |   | 2 |   |   |   |   |   |   | 2 |   | 3 |   |   |   |
| Myelofibrosis                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node                           |   |   | + | + | + |   | + |   |   |   |   | + |   | + |   | + | + | + | + |   |   | + |   | + |
| Deep Cervical, Ectasia               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |
| Deep Cervical, Hyperplasia, Lymphoid |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |
| Mediastinal, Ectasia                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 |
| Mediastinal, Hemorrhage              |   |   |   | 1 | 3 |   | 4 |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |
| Mediastinal, Hyperplasia, Lymphoid   |   |   |   | 3 |   |   | 3 |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   | 3 |
| Mediastinal, Pigmentation            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pancreatic, Ectasia                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 |   |
| Pancreatic, Hemorrhage               |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pancreatic, Pigmentation             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node, Mandibular               | + | M | M | M | M | M | M | M | + | M | M | + | M | M | M | M | M | M | M | M | M | M | M | M |
| Ectasia                              |   |   |   |   |   |   |   |   |   |   |   | 4 |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node, Mesenteric               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Ectasia                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hemorrhage                           |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |
| Hyperplasia, Lymphoid                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 |   |   |   | 2 |   |   | 2 | 2 |
| Pigmentation                         |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |
| Spleen                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibrosis                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |
| Hematopoietic Cell Proliferation     | 2 | 2 |   | 3 | 2 |   | 1 | 2 | 3 |   | 2 |   | 1 | 1 | 1 |   |   |   |   | 1 | 2 |   |   |   |

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 Lab: SRI

| FISCHER 344 RATS MALE | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID | males<br>(cont...) |
|-----------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|--------------------|
|                       | 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 |           |                    |
| 30 MG/KG              | 7           | 6 | 7 | 6 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 6 | 7 | 5 | 7 | 5 | 7 | 7 | 6         |                    |
|                       | 3           | 3 | 3 | 5 | 3 | 7 | 3 | 3 | 3 | 1 | 3 | 3 | 3 | 0 | 2 | 3 | 3 | 0 | 5 | 3 | 7 | 1 | 5 | 3 | 3 | 6         |                    |
|                       | 0           | 3 | 1 | 7 | 1 | 3 | 1 | 0 | 1 | 0 | 2 | 0 | 1 | 8 | 9 | 1 | 4 | 9 | 0 | 5 | 6 | 4 | 1 | 0 | 7 |           |                    |
|                       | 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 | 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 | 1 | 1 | 1 | 1 | 1 | 1 |           |                    |
|                       | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 |           |                    |
|                       | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 |           |                    |

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Hemorrhage                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Necrosis                       | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pigmentation                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymphoid Follicle, Atrophy     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymphoid Follicle, Hyperplasia | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Thymus                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Inflammation, Chronic          |   |   |   |   |   |   |   |   |   |   |   |   | I |   |   |   |   |   |   |   |   |   |   |   | M | + |

INTEGUMENTARY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hyperplasia                                 |   |   | 4 | 2 | 3 |   | 3 |   | 1 | 3 | 4 | 3 | 2 | 3 | 3 |   | M | + | + | + | + | + | + | + | + |
| Skin  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Inflammation, Suppurative                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Inflammation, Chronic                       | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Ulcer                                       |   | 4 |   | 3 | 3 |   | 3 |   | 4 |   |   | 3 | 4 |   |   |   |   |   |   |   |   |   |   | 4 | 2 |
| Control, Hyperkeratosis                     | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Control Epidermis, Hyperplasia              |   | 1 |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   | 1 |   |   |   |
| Epidermis, Hyperplasia                      |   | 4 |   | 3 | 3 |   | 4 |   | 4 |   |   | 3 | 3 |   | 2 |   |   |   |   |   | 1 |   |   |   |   |
| Epidermis, Site Of Application, Hyperplasia |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Site Of Application, Hyperkeratosis         | 1 | 1 | 1 | 1 | 1 | 1 |   |   |   | 1 | 1 | 1 | 1 | 2 | 1 |   | 2 |   | 1 |   | 1 | 1 | 1 | 1 | 1 |

MUSCULOSKELETAL SYSTEM

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Femur, Osteopetrosis |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Skeletal Muscle      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST | FISCHER 344 RATS MALE |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID | males<br>(cont...) |
|-------------|-----------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|--------------------|
|             | 0730                  | 0633 | 0733 | 0635 | 0737 | 0636 | 0737 | 0737 | 0737 | 0737 | 0636 | 0737 | 0737 | 0737 | 0737 | 0737 | 0636 | 0737 | 0535 | 0737 | 0535 | 0737 | 0737 | 0636 | 0737 |           |                    |
| 30 MG/KG    | 0010                  | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 |           |                    |

Atrophy

**NERVOUS SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Compression                                  |   |   | 3 | 2 |   |   |   |   |   | 3 | 4 |   |   | 2 |   |   | 3 | 4 | 3 |   |   | 2 |   |   |
| Fungus                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hemorrhage                                   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pigmentation                                 |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |
| Perivascular, Inflammation, Pyogranulomatous |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Peripheral Nerve                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |
| Spinal Cord                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |

**RESPIRATORY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Foreign Body                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hemorrhage                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Infiltration Cellular, Histiocyte             | 1 | 1 |   |   |   | 1 |   |   |   |   | 1 |   |   |   |   |   |   | 1 |   | 1 | 1 |   | 1 |   |
| Inflammation, Granulomatous                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Inflammation, Chronic                         |   |   |   |   |   |   |   |   |   |   | 1 |   | 1 | 1 |   |   |   |   |   | 1 |   |   | 1 |   |
| Metaplasia, Osseous                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Alveolar Epithelium, Hyperplasia              |   | 1 |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Nose  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Foreign Body                                  |   |   | X | X | X |   | X |   |   |   |   | X |   | X |   |   |   | X | X |   |   | X | X |   |
| Fungus  |   |   | X | X |   | X |   |   |   |   |   | X | X |   |   |   |   | X | X |   |   | X |   |   |
| Inflammation, Chronic                         | 1 |   | 3 | 3 | 1 | 3 | 1 | 1 |   |   |   | 1 | 4 | 2 | 1 |   |   | 3 | 3 | 1 | 1 | 3 | 1 |   |
| Olfactory Epithelium, Metaplasia, Respiratory |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |

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 + .. Tissue examined microscopically  
 X .. Lesion present  
 I .. Insufficient tissue  
 M .. Missing tissue  
 A .. Autolysis precludes evaluation  
 BLANK .. Not examined microscopically

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 2) Mild 4) Marked



TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

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Date Report Requested: 07/06/2010  
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 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

|                              |             |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                            |
|------------------------------|-------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----------------------------|
| <b>FISCHER 344 RATS MALE</b> | DAY ON TEST | 07  | 06  | 07  | 06  | 07  | 06  | 07  | 07  | 07  | 07  | 06  | 07  | 07  | 07  | 07  | 07  | 06  | 07  | 05  | 07  | 05  | 07  | 07  | 06  | <b>males<br/>(cont...)</b> |
|                              |             | 30  | 33  | 31  | 35  | 33  | 37  | 33  | 33  | 31  | 33  | 33  | 30  | 32  | 33  | 30  | 35  | 33  | 37  | 31  | 35  | 33  | 33  | 36  |     |                            |
|                              | ANIMAL ID   | 001 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 |                            |

Angiectasis

Urinary Bladder  
 Hemorrhage  
 Inflammation, Suppurative

+ +

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 + .. Tissue examined microscopically  
 X .. Lesion present  
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**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**

Methyl trans-styryl ketone  
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Date Report Requested: 07/06/2010  
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 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST | FISCHER 344 RATS MALE |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |      |      |      |      |      |
|-------------|-----------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|------|------|------|------|
|             | 0731                  | 0685 | 0534 | 0630 | 0694 | 0662 | 0770 | 0773 | 0773 | 0362 | 0467 | 0671 | 0599 | 0693 | 0762 | 0673 | 0663 | 0723 | 0735 | 0664 |          | 0772 | 0554 | 0674 | 0525 | 0675 |
| ANIMAL ID   | 001                   | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001      | 001  | 001  | 001  | 001  | 001  |
|             | 1                     | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1        | 1    | 1    | 1    | 1    | 1    |
|             | 2                     | 2    | 2    | 2    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 4    | 4    | 4    | 4    | 4        | 4    | 4    | 4    | 4    | 4    |
|             | 6                     | 7    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6        | 7    | 8    | 9    | 0    | 0    |

**ALIMENTARY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |       |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|----|
| Esophagus  | I | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47    |    |
| Intestine Large, Cecum Edema   | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49    |    |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 2.5 |    |
| Intestine Large, Colon Inflammation, Chronic Epithelium, Hyperplasia | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50    |    |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0 |    |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 3.0 |    |
| Intestine Large, Rectum Epithelium, Hyperplasia                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | I | + | + | + | + | + | + | + | 48    |    |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0 |    |
| Intestine Small, Duodenum Epithelium, Hyperplasia                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50    |    |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 2.7 |    |
| Intestine Small, Ileum   | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49    |    |
| Intestine Small, Jejunum Epithelium, Hyperplasia                     | + | + | + | + | + | + | + | + | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | + | A | A | +     | 45 |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0 |    |
| Liver  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50    |    |
| Basophilic Focus   | X |   |   |   | X |   |   | X | X |   |   |   | X |   |   | X |   | X |   | X |   |   |   |   |   |   | 19    |    |
| Clear Cell Focus   | X |   |   |   |   |   | X | X | X |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | 14    |    |
| Degeneration, Cystic   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   | 3 1.7 |    |
| Eosinophilic Focus   |   |   |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2     |    |
| Fibrosis   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0 |    |
| Hepatodiaphragmatic Nodule   |   |   | X |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   | 6     |    |
| Infiltration Cellular, Mixed Cell                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   | 1 |   |   |   |   | 4 1.8 |    |

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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>30 MG/KG     | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |     |
|---------------------------------------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|-----|
|                                       | 0731        | 0685   | 0533   | 0669   | 0664   | 0662   | 0770   | 0773   | 0773   | 0366   | 0464   | 0673   | 0569   | 0679   | 0673   | 0676   | 0772   | 0773   | 0554   | 0664   | 0774   | 0562   | 0674   | 0554   |          |     |
| ANIMAL ID                             | 001267      | 000112 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 | 000111 |          |     |
| Mixed Cell Focus                      | X           |        |        |        |        |        | X      |        |        |        |        | X      | X      |        |        |        |        |        |        |        |        |        |        |        | 8        |     |
| Bile Duct, Hyperplasia                | 2           | 1      |        | 1      |        | 2      |        | 1      |        | 2      |        | 2      |        | 3      |        | 1      | 1      |        |        |        | 2      | 3      |        |        | 29       | 1.6 |
| Centrilobular, Necrosis               |             |        |        | 4      |        |        |        |        |        |        |        |        |        | 2      |        |        |        |        |        |        |        | 1      |        |        | 4        | 2.5 |
| Hepatocyte, Hyperplasia, Focal        |             | 2      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        | 2.0 |
| Hepatocyte, Vacuolization Cytoplasmic |             |        |        | 3      |        | 3      |        | 3      |        | 2      |        |        |        |        |        |        |        |        | 3      |        |        |        |        |        | 6        | 3.0 |
| Mesentery                             |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 7        |     |
| Fat, Necrosis                         |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 3      |        | 3      |        |        |        |        | 6        | 2.5 |
| Pancreas                              | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | A      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 49     |          |     |
| Atrophy                               |             | 2      | 1      | 3      | 2      |        | 1      | 2      | 1      |        |        | 3      | 2      | 3      | 3      | 2      | 3      | 1      |        |        |        | 3      | 2      | 27     | 2.2      |     |
| Cyst                                  |             |        | X      |        |        |        | X      |        |        |        |        |        |        |        |        | X      | X      |        |        | X      |        |        |        | 7      |          |     |
| Acinus, Cytoplasmic Alteration        |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 4      | 3.0      |     |
| Acinus, Hyperplasia, Focal            |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1      | 3.0      |     |
| Salivary Glands                       | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | M      | +      | +      | +      | +      | +      | 48     |          |     |
| Stomach, Forestomach                  | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50     |          |     |
| Edema                                 |             |        |        |        |        | 3      |        |        |        |        |        |        |        | 4      |        |        |        |        |        |        |        | 4      |        | 6      | 3.2      |     |
| Erosion                               |             |        |        |        |        | 2      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1      | 2.0      |     |
| Perforation                           |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1      |          |     |
| Ulcer                                 |             |        |        |        |        |        |        |        |        | 4      |        |        | 3      | 4      |        |        |        |        |        |        |        | 4      |        | 8      | 3.8      |     |
| Epithelium, Hyperplasia               |             |        |        |        |        | 3      |        |        |        |        |        |        | 3      | 3      |        | 3      |        |        |        |        |        | 2      |        | 8      | 2.9      |     |
| Stomach, Glandular                    | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50     |          |     |
| Edema                                 |             |        |        |        |        |        | 2      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2      | 2.0      |     |
| Erosion                               |             | 3      |        |        |        |        |        |        |        |        |        | 3      |        |        |        |        |        |        |        |        |        | 2      |        | 6      | 2.3      |     |
| Ulcer                                 |             |        |        |        |        |        |        |        | 2      |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1      | 2.0      |     |
| Tongue                                |             |        |        |        |        |        |        |        |        |        |        |        |        |        | +      |        |        |        |        |        | +      |        |        | 4      |          |     |

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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST | FISCHER 344 RATS MALE |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |
|-------------|-----------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
|             | 0731                  | 0685 | 0533 | 0669 | 0663 | 0773 | 0773 | 0773 | 0346 | 0464 | 0673 | 0567 | 0673 | 0673 | 0673 | 0673 | 0673 | 0673 | 0673 | 0673 | 0673 | 0673 | 0673 | 0673 |          |
| ANIMAL ID   | 001                   | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001      |
|             | 6                     | 7    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0        |

Epithelium, Hyperplasia

1

1 1.0

**CARDIOVASCULAR SYSTEM**

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| Heart                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |
| Cardiomyopathy        | 3 | 3 | 2 | 3 | 3 | 1 | 2 | 3 | 3 | 2 | 3 | 3 |   | 1 | 3 |   | 2 |   | 3 |   | 3 | 2 | 3 | 1 | 46 2.6 |
| Inflammation, Chronic |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0  |
| Thrombosis            |   |   |   |   |   | 4 |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   | 3 3.0  |

**ENDOCRINE SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| Adrenal Cortex                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |
| Accessory Adrenal Cortical Nodule            | X | X |   |   | X | X |   |   | X | X |   | X |   |   |   | X | X |   |   | X |   | X |   |   | 23     |
| Atrophy                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   | 1 3.0  |
| Degeneration, Fatty                          | 1 |   |   |   |   |   |   | 2 |   |   |   |   | 2 |   | 1 | 2 |   | 2 |   |   |   |   | 3 |   | 20 2.3 |
| Hyperplasia, Focal                           | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 2.3  |
| Hypertrophy, Focal                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 | 2 |   |   |   |   | 6 1.8  |
| Adrenal Medulla                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |
| Hyperplasia                                  | 1 |   |   | 1 | 1 |   |   |   |   |   |   |   | 1 |   |   |   |   | 1 | 1 |   | 1 |   | 3 |   | 11 1.3 |
| Islets, Pancreatic                           | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | 49     |
| Hyperplasia                                  |   |   |   |   |   |   |   |   |   |   |   |   | 2 | 1 |   |   |   |   |   |   |   |   |   |   | 6 1.7  |
| Parathyroid Gland                            | + | + | + | + | M | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | 47     |
| Pituitary Gland                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |
| Pigmentation                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 |   | 2 3.5  |
| Pars Distalis, Cyst                          |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3      |
| Pars Distalis, Cytoplasmic Alteration, Focal |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   | 1 2.0  |
| Pars Distalis, Hyperplasia, Focal            |   |   | 2 |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   | 5 2.4  |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE<br>30 MG/KG | DAY ON TEST |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | * TOTALS |          |
|-----------------------------------|-------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
|                                   | 07<br>31    | 06<br>85 | 05<br>34 | 06<br>30 | 06<br>94 | 06<br>32 | 07<br>70 | 07<br>73 | 07<br>30 | 07<br>33 | 07<br>33 | 07<br>33 | 07<br>33 | 07<br>33 | 07<br>33 | 07<br>33 | 07<br>33 | 07<br>33 | 07<br>33 | 07<br>33 | 07<br>33 | 07<br>33 | 07<br>33 | 07<br>33 |          | 07<br>33 |
| ANIMAL ID                         | 001         | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      |
|                                   | 6           | 7        | 8        | 9        | 0        | 1        | 2        | 3        | 4        | 5        | 6        | 7        | 8        | 9        | 0        | 1        | 2        | 3        | 4        | 5        | 6        | 7        | 8        | 9        | 0        |          |

Pars Intermedia, Hyperplasia, Focal 1 2.0

|                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |               |
|-------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------------|
| Thyroid Gland                 | + | A | + | + | + | + | + | + | + | + | A | A | + | A | + | + | + | + | + | + | + | A | + | + | <b>43</b>     |
| Ultimobranchial Cyst          |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1 3.0</b>  |
| C-cell, Hyperplasia           |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   | 1 |   | 2 | 2 |   |   | 2 |   | <b>13 1.6</b> |
| Follicle, Cyst                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | <b>1</b>      |
| Follicle, Degeneration, Focal |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1 2.0</b>  |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |               |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|---------------|
| Epididymis                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | <b>50</b>     |
| Granuloma Sperm              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1 3.0</b>  |
| Inflammation, Chronic        |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |           | <b>3 2.0</b>  |
| Preputial Gland              | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>49</b> |               |
| Inflammation, Chronic        |   | 2 | 2 |   |   |   |   |   | 2 |   |   | 3 | 3 |   | 2 |   | 2 |   |   |   |   | 2 | 2 | 2         | <b>18 2.1</b> |
| Prostate                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |               |
| Inflammation, Chronic        | 3 | 3 |   | 3 | 4 | 1 | 1 | 2 | 3 | 3 | 3 |   | 2 | 3 |   | 2 | 2 |   | 1 | 3 | 2 | 4 | 2 | 2         | <b>39 2.3</b> |
| Epithelium, Hyperplasia      |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>4 1.5</b>  |
| Seminal Vesicle              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |               |
| Inflammation                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |           | <b>1 3.0</b>  |
| Inflammation, Chronic        |   |   |   |   |   | 2 |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>2 2.5</b>  |
| Testes                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |               |
| Germinal Epithelium, Atrophy | 2 |   |   |   |   |   |   | 3 | 2 | 2 |   |   |   |   |   |   | 3 | 1 | 3 | 2 |   | 4 |   | 1         | <b>27 2.3</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  
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 BLANK .. Not examined microscopically  
 1-4 .. Lesion qualified as:  
 1) Minimal 3) Moderate  
 2) Mild 4) Marked



TDMS No. 95003 - 05  
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CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

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First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| DAY ON TEST                    | FISCHER 344 RATS MALE |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |       |
|--------------------------------|-----------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|-------|
|                                | 0731                  | 0685 | 0533 | 0669 | 0663 | 0773 | 0773 | 0773 | 0346 | 0464 | 0673 | 0567 | 0673 | 0676 | 0767 | 0567 | 0673 | 0672 | 0733 | 0567 | 0664 | 0767 | 0566 |          | 0767  |
| ANIMAL ID                      | 001                   | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001  | 001      | 8 1.6 |
| Interstitial Cell, Hyperplasia |                       |      | 1    |      |      |      |      |      |      |      |      |      |      | 2    |      | 2    | 2    |      |      | 1    |      |      |      |          |       |

HEMATOPOIETIC SYSTEM

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |  |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|--|
| Bone Marrow                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |  |
| Hyperplasia                          |   |   | 1 |   |   |   |   |   |   |   | 3 |   |   |   |   |   | 2 |   | 3 |   |   |   | 3 | 10 2.5 |  |
| Myelofibrosis                        |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   | 1 3.0  |  |
| Lymph Node                           |   |   |   |   | + | + |   | + |   |   |   | + |   |   |   | + | + |   |   | + |   | + | + | 21     |  |
| Deep Cervical, Ectasia               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 3.0  |  |
| Deep Cervical, Hyperplasia, Lymphoid |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 2.7  |  |
| Mediastinal, Ectasia                 |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   | 3 3.0  |  |
| Mediastinal, Hemorrhage              |   |   |   |   | 4 | 2 |   | 3 |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   | 8 2.4  |  |
| Mediastinal, Hyperplasia, Lymphoid   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 | 3 |   |   |   | 2 |   |   |   | 7 2.7  |  |
| Mediastinal, Pigmentation            |   |   |   |   | 3 |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   | 3 2.7  |  |
| Pancreatic, Ectasia                  |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   | 2 3.5  |  |
| Pancreatic, Hemorrhage               |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   | 2 2.5  |  |
| Pancreatic, Pigmentation             |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0  |  |
| Lymph Node, Mandibular               | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 3      |  |
| Ectasia                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 4.0  |  |
| Lymph Node, Mesenteric               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |  |
| Ectasia                              |   |   |   |   | 3 |   |   |   |   |   | 2 |   |   | 1 |   |   |   |   |   |   |   |   |   | 3 2.0  |  |
| Hemorrhage                           |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   | 2 |   |   |   | 4 1.8  |  |
| Hyperplasia, Lymphoid                |   |   |   |   |   |   |   |   |   |   | 2 | 2 |   |   |   |   |   |   |   | 2 |   |   |   | 7 2.3  |  |
| Pigmentation                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 3.0  |  |
| Spleen                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |  |
| Fibrosis                             |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 3.0  |  |
| Hematopoietic Cell Proliferation     |   |   |   |   | 2 |   | 2 | 2 |   |   | 3 |   | 1 |   | 3 |   | 2 | 1 | 3 | 1 |   | 1 |   | 24 1.8 |  |

\* .. 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

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| FISCHER 344 RATS MALE<br>30 MG/KG | DAY ON TEST |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | * TOTALS |
|-----------------------------------|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|
|                                   | 07          | 06 | 05 | 06 | 06 | 06 | 07 | 07 | 07 | 03 | 04 | 06 | 07 | 05 | 06 | 07 | 06 | 07 | 05 | 06 | 07 | 05 | 06 | 07 |          |
| ANIMAL ID                         | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 |          |
|                                   | 11          | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 |          |
|                                   | 22          | 22 | 22 | 22 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 |          |
|                                   | 66          | 77 | 88 | 99 | 00 | 11 | 22 | 33 | 44 | 55 | 66 | 77 | 88 | 99 | 00 | 11 | 22 | 33 | 44 | 55 | 66 | 77 | 88 | 99 |          |

|                                |  |  |  |  |  |  |   |  |  |   |   |   |  |   |  |  |  |  |  |  |  |  |  |   |   |     |     |
|--------------------------------|--|--|--|--|--|--|---|--|--|---|---|---|--|---|--|--|--|--|--|--|--|--|--|---|---|-----|-----|
| Hemorrhage                     |  |  |  |  |  |  |   |  |  |   |   |   |  |   |  |  |  |  |  |  |  |  |  | 4 | 1 | 4.0 |     |
| Necrosis                       |  |  |  |  |  |  |   |  |  |   |   |   |  |   |  |  |  |  |  |  |  |  |  |   | 4 | 2   | 3.5 |
| Pigmentation                   |  |  |  |  |  |  | 3 |  |  |   | 3 | 3 |  | 3 |  |  |  |  |  |  |  |  |  | 3 | 3 | 6   | 3.0 |
| Lymphoid Follicle, Atrophy     |  |  |  |  |  |  |   |  |  |   |   | 2 |  |   |  |  |  |  |  |  |  |  |  |   |   | 1   | 2.0 |
| Lymphoid Follicle, Hyperplasia |  |  |  |  |  |  |   |  |  | 2 |   |   |  |   |  |  |  |  |  |  |  |  |  |   |   | 2   | 2.0 |

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |     |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|-----|
| Thymus                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 |   |     |
| Inflammation, Chronic |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  | 1 | 4.0 |

**INTEGUMENTARY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |    |     |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|----|-----|
| Mammary Gland                               | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |   |    |     |
| Hyperplasia                                 |   | 4 |   | 3 | 4 | 2 |   |   | 3 |   |   | 2 |   | 4 |   |   | 4 |   | 1 | 4 | 4 |   | 4 | 2  | 4 | 30 | 3.1 |
| Skin  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |    |     |
| Inflammation, Suppurative                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   | 1  | 4.0 |
| Inflammation, Chronic                       |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   | 2  | 3.0 |
| Ulcer                                       | 4 | 4 | 3 |   |   | 3 |   |   |   |   |   |   |   | 4 |   | 3 |   |   | 3 |   |   |   | 4 |    |   | 17 | 3.4 |
| Control, Hyperkeratosis                     |   |   |   |   |   |   |   |   |   |   |   |   | 1 | 1 |   |   |   |   |   |   |   |   |   |    |   | 5  | 1.0 |
| Control Epidermis, Hyperplasia              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   | 3  | 1.3 |
| Epidermis, Hyperplasia                      | 4 | 4 | 3 |   |   | 3 | 3 |   |   |   |   |   |   | 2 |   | 4 |   |   | 4 |   |   |   | 3 |    |   | 18 | 3.3 |
| Epidermis, Site Of Application, Hyperplasia |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   | 3  | 1.0 |
| Site Of Application, Hyperkeratosis         | 1 |   |   | 1 | 2 |   | 1 |   |   | 2 | 2 |   | 2 | 1 | 1 |   | 2 |   |   | 2 |   | 1 | 1 | 1  |   | 33 | 1.2 |

**MUSCULOSKELETAL SYSTEM**

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |     |  |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|-----|--|
| Bone                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |     |  |
| Femur, Osteopetrosis |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  | 1 | 4.0 |  |
| Skeletal Muscle      |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |    |   | 2   |  |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |  | * TOTALS |
|-----------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|--|----------|
|                       | 0731        | 0685 | 0533 | 0669 | 0663 | 0662 | 0770 | 0773 | 0773 | 0336 | 0464 | 0673 | 0569 | 0673 | 0667 | 0763 | 0673 | 0667 | 0763 | 0554 | 0664 | 0774 | 0567 | 0675 |  |          |
| 30 MG/KG              | 001         | 001  | 001  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  | 000  |  |          |
|                       | 1           | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    |  |          |
|                       | 2           | 2    | 2    | 2    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 4    | 4    | 4    | 4    | 4    | 4    | 4    | 4    | 4    | 5    |  |          |
|                       | 6           | 7    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    |  |          |

Atrophy 1 1 1.0

**NERVOUS SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| Brain  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |
| Compression                                  |   |   |   | 3 | 2 |   |   |   | 4 | 3 |   | 2 | 3 |   |   |   |   | 4 | 2 |   | 3 |   |   | 20 2.9 |
| Fungus                                       |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1      |
| Hemorrhage                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   | 2 1.5  |
| Pigmentation                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 1.0  |
| Perivascular, Inflammation, Pyogranulomatous |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0  |
| Peripheral Nerve                             |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   | + |   | 4      |
| Spinal Cord                                  |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   | + |   | 4      |

**RESPIRATORY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |
| Foreign Body                                  |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1      |
| Hemorrhage                                    |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 1.0  |
| Infiltration Cellular, Histiocyte             |   |   | 3 | 1 |   | 2 |   |   | 1 | 1 |   | 1 |   | 1 |   |   |   |   | 1 | 1 |   |   |   | 17 1.2 |
| Inflammation, Granulomatous                   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0  |
| Inflammation, Chronic                         |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   | 7 1.1  |
| Metaplasia, Osseous                           |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   | 2 2.0  |
| Alveolar Epithelium, Hyperplasia              |   |   |   |   |   |   | 3 |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   | 4 2.0  |
| Nose  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |
| Foreign Body                                  |   |   | X |   |   | X | X | X | X |   |   |   |   | X |   |   |   |   | X |   | X | X | X | 21     |
| Fungus  |   |   |   |   |   |   |   | X |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   | 11     |
| Inflammation, Chronic                         |   |   | 1 | 2 |   | 1 | 1 | 1 | 3 | 1 |   | 1 | 3 |   |   |   | 3 |   |   | 1 | 1 |   | 1 | 31 1.7 |
| Olfactory Epithelium, Metaplasia, Respiratory |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   | 1 |   | 2 |   | 2 | 6 1.8  |

\* .. 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  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST | FISCHER 344 RATS MALE |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID |   |      |      |      |
|-------------|-----------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|---|------|------|------|
|             | 0731                  | 0685 | 0533 | 0639 | 0663 | 0667 | 0777 | 0777 | 0773 | 0466 | 0767 | 0566 | 0767 | 0667 | 0676 | 0766 | 0776 | 0575 | 0666 | 0775 | 0666 | 0776 | 0575 | 0666 |           |   | 0775 | 0666 | 0775 |
| 30 MG/KG    | 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    | 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    | 1    | 1    | 1    | 1    | 1    | 1         | 1 | 1    | 1    |      |
|             | 2                     | 2    | 2    | 2    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 4    | 4    | 4    | 4    | 4    | 4    | 4    | 4    | 4    | 4    | 4         | 4 | 4    | 5    |      |
|             | 6                     | 7    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0         |   |      |      |      |
|             | <b>* TOTALS</b>       |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |   |      |      |      |

|  |  |  |  |   |  |  |   |   |   |   |  |  |   |  |  |  |   |   |  |  |   |   |  |  |  |  |  |  |  |  |               |
|--|--|--|--|---|--|--|---|---|---|---|--|--|---|--|--|--|---|---|--|--|---|---|--|--|--|--|--|--|--|--|---------------|
| Respiratory Epithelium, Hyperplasia          |  |  |  | 1 |  |  | 1 | 1 | 1 | 1 |  |  |   |  |  |  |   | 3 |  |  | 1 | 1 |  |  |  |  |  |  |  |  | <b>18 1.7</b> |
| Respiratory Epithelium, Metaplasia, Squamous |  |  |  |   |  |  | 1 | 1 | 3 | 1 |  |  | 3 |  |  |  | 3 |   |  |  |   |   |  |  |  |  |  |  |  |  | <b>15 2.3</b> |

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|

**SPECIAL SENSES SYSTEM**

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |              |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|--------------|
| Eye                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |              |
| Cataract              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1 3.0</b> |
| Inflammation, Chronic |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |           | <b>1 3.0</b> |
| Cornea, Hyperplasia   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |           | <b>1 2.0</b> |
| Retina, Degeneration  |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |           | <b>3 3.3</b> |

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |              |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|--------------|
| Harderian Gland       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |              |
| Hyperplasia, Focal    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1 1.0</b> |
| Inflammation, Chronic |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1 2.0</b> |

|                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |
|----------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----------|
| Zymbal's Gland |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | <b>2</b> |
|----------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----------|

**URINARY SYSTEM**

|                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |               |
|--------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|---------------|
| Kidney                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |               |
| Cyst                     |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>2</b>      |
| Glomerulosclerosis       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1 3.0</b>  |
| Hydronephrosis           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1 2.0</b>  |
| Inflammation, Chronic    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>16 2.4</b> |
| Nephropathy              | 2 | 2 | 2 | 3 | 4 | 3 | 2 | 3 | 2 |   | 3 |   | 3 |   | 2 | 3 | 2 | 2 | 2 | 2 | 3 | 3 |   |   |   |   | 2 | 2 | 3 | 1         | <b>46 2.5</b> |
| Papilla, Necrosis        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1 3.0</b>  |
| Renal Tubule, Dilatation |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1 3.0</b>  |

|         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |
|---------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----------|
| Urethra |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | <b>1</b> |
|---------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----------|

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
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 X .. Lesion present  
 I .. Insufficient tissue

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

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 1) Minimal 3) Moderate  
 2) Mild 4) Marked

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>30 MG/KG | DAY ON TEST |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | * TOTALS |
|-----------------------------------|-------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
|                                   | 07<br>31    | 06<br>85 | 05<br>34 | 06<br>30 | 06<br>94 | 06<br>22 | 07<br>00 | 07<br>00 | 07<br>33 | 07<br>33 | 07<br>00 | 07<br>00 | 07<br>00 | 07<br>00 | 07<br>00 | 07<br>00 | 07<br>00 | 07<br>00 | 07<br>00 | 07<br>00 | 07<br>00 | 07<br>00 | 07<br>00 | 07<br>00 | 07<br>00 |          |
| ANIMAL ID                         | 001         | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      | 001      |
| Angiectasis                       | 3           |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1 3.0    |
| Urinary Bladder                   | +           |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 50       |
| Hemorrhage                        |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 4 1 4.0  |
| Inflammation, Suppurative         |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 3 1 3.0  |

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
 + .. Tissue examined microscopically  
 X .. Lesion present  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID | males<br>(cont...) |      |
|-----------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|--------------------|------|
|                       | 0732        | 0731 | 0730 | 0728 | 0721 | 0715 | 0714 | 0713 | 0712 | 0711 | 0710 | 0709 | 0708 | 0707 | 0706 | 0705 | 0704 | 0703 | 0702 | 0701 |           |                    | 0700 |
| 90 MG/KG              | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0         | 001151             |      |
|                       | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0         | 001152             |      |
|                       | 1           | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1         | 001153             |      |
|                       | 5           | 5    | 5    | 5    | 5    | 5    | 5    | 5    | 5    | 6    | 6    | 6    | 6    | 6    | 6    | 6    | 6    | 6    | 7    | 7    | 7         | 001154             |      |
|                       | 1           | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0    | 1         | 001155             |      |

ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum<br>Angiectasis<br>Edema | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon<br>Edema                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum<br>Edema               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum<br>Hemorrhage           | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum                       | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | A | + | + | + | + | + | + |
| Liver<br>Angiectasis                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Basophilic Focus                               | X | X | X |   | X | X |   | X | X | X |   | X | X | X | X |   |   |   |   |   |   |   |   |   |
| Clear Cell Focus                               | X |   |   |   |   |   |   |   |   |   | X |   | X |   |   | X |   |   |   |   |   |   |   |   |
| Degeneration, Cystic                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Eosinophilic Focus                             |   |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Hematopoietic Cell Proliferation               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatodiaphragmatic Nodule                     |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |
| Infiltration Cellular, Mixed Cell              |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   | 2 |   |   |   |   |   |   |   |   |

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 + .. Tissue examined microscopically  
 X .. Lesion present  
 I .. Insufficient tissue  
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1-4 .. Lesion qualified as:  
 1) Minimal 3) Moderate  
 2) Mild 4) Marked

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>90 MG/KG     | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID | males<br>(cont...) |      |      |
|---------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|--------------------|------|------|
|                                       | 0732        | 0733 | 0730 | 0738 | 0731 | 0752 | 0744 | 0770 | 0777 | 0777 | 0777 | 0766 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0766 | 0777 |           |                    | 0777 | 0777 |
| Mixed Cell Focus                      |             |      |      |      | X    |      |      | X    |      | X    |      |      |      |      |      |      |      |      | X    |      | X         | X                  |      |      |
| Necrosis, Focal                       |             |      |      |      |      |      | 3    |      |      |      |      |      |      |      |      |      |      |      | 2    |      |           |                    |      |      |
| Bile Duct, Hyperplasia                | 1           | 1    | 2    | 3    |      |      |      | 2    | 1    | 2    | 1    | 1    |      | 1    | 3    | 3    | 1    | 3    | 3    | 2    | 1         | 1                  | 1    |      |
| Centrilobular, Necrosis               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 3    |      |           |                    |      |      |
| Hepatocyte, Hyperplasia, Focal        |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1    |      |      |           |                    |      |      |
| Hepatocyte, Vacuolization Cytoplasmic |             | 2    | 2    |      | 3    | 2    |      |      |      |      |      |      |      |      |      |      |      | 3    |      |      |           |                    | 2    |      |
| Kupffer Cell, Pigmentation            |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |
| Mesentery                             |             |      |      |      |      | +    |      |      |      | +    | +    |      | +    | +    |      |      | +    |      | +    |      |           | +                  |      |      |
| Accessory Spleen                      |             |      |      |      |      |      |      |      |      | X    |      | X    |      |      |      |      |      | X    |      |      |           |                    |      |      |
| Fat, Necrosis                         |             |      |      |      | 2    |      |      |      | 1    | 2    |      |      | 3    |      |      |      | 3    |      |      |      |           |                    | 3    |      |
| Oral Mucosa                           |             |      |      |      | +    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |
| Pancreas                              | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         | +                  | +    |      |
| Atrophy                               | 3           |      |      |      |      | 3    |      | 3    | 3    | 1    | 3    | 2    |      |      |      | 4    |      | 2    |      | 2    |           | 3                  | 3    | 3    |
| Cyst                                  |             |      |      |      |      |      |      | X    |      | X    |      |      |      |      |      |      |      | X    |      | X    |           | X                  | X    |      |
| Acinus, Cytoplasmic Alteration        |             | 3    |      |      |      | 3    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |
| Acinus, Hyperplasia, Focal            |             |      |      |      |      | 3    |      |      |      | 3    |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |
| Salivary Glands                       | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         | +                  | +    |      |
| Stomach, Forestomach                  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         | +                  | +    |      |
| Edema                                 |             | 3    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |
| Fibrosis                              |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |
| Ulcer                                 |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |
| Epithelium, Hyperplasia               |             | 2    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 2         |                    |      |      |
| Stomach, Glandular                    | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         | +                  | +    |      |
| Cyst                                  |             |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |
| Edema                                 |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |

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 I .. Insufficient tissue  
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 BLANK .. Not examined microscopically  
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TDMS No. 95003 - 05  
Test Type: CHRONIC  
Route: SKIN APPLICATION  
Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
Methyl trans-styryl ketone  
CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
Time Report Requested: 12:57:38  
First Dose M/F: 04/05/04 / 04/05/04  
Lab: SRI

|                       |          | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | males<br>(cont...) |
|-----------------------|----------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|--------------------|
| FISCHER 344 RATS MALE | 90 MG/KG | ANIMAL ID   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                    |
|                       |          | 0732        | 0733 | 0730 | 0738 | 0731 | 0752 | 0749 | 0770 | 0778 | 0771 | 0779 | 0763 | 0776 | 0777 | 0773 | 0772 | 0775 | 0725 | 0723 | 0733 |                    |

|                         |   |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |     |
|-------------------------|---|--|--|--|--|--|--|--|--|--|-----|--|--|--|--|--|--|--|--|--|-----|
| Erosion                 | 1 |  |  |  |  |  |  |  |  |  | 2 2 |  |  |  |  |  |  |  |  |  |     |
| Ulcer                   |   |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |     |
| Epithelium, Hyperplasia |   |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  | 2 3 |
| Glands, Hyperplasia     |   |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |     |
| Tongue                  |   |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  | +   |
| Epithelium, Hyperplasia |   |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  | 2   |

CARDIOVASCULAR SYSTEM

|                |   |   |   |   |   |   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------|---|---|---|---|---|---|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Heart          | + |   |   |   |   |   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Cardiomyopathy | 3 | 3 | 2 | 1 | 3 | 3 |  | 3 | 2 | 3 | 3 | 3 | 3 | 3 | 1 | 3 | 3 | 3 | 2 | 3 | 2 | 3 | 2 |
| Thrombosis     |   |   |   |   |   |   |  |   |   |   | 4 |   |   |   |   |   |   |   |   |   |   |   |   |

ENDOCRINE SYSTEM

|                                   |   |   |   |   |   |   |       |   |   |   |   |         |   |   |   |   |         |   |   |   |   |   |   |
|-----------------------------------|---|---|---|---|---|---|-------|---|---|---|---|---------|---|---|---|---|---------|---|---|---|---|---|---|
| Adrenal Cortex                    | + |   |   |   |   |   |       |   |   |   |   |         |   |   |   |   |         |   |   |   |   |   |   |
| Accessory Adrenal Cortical Nodule |   |   |   |   |   | X | X X X |   |   |   |   | X X X X |   |   |   |   | X X X X |   |   |   |   | X |   |
| Degeneration, Fatty               | 2 | 2 | 2 | 3 |   |   | 1     |   | 3 | 1 | 1 |         | 1 | 1 | 2 | 3 |         | 2 | 3 |   | 2 | 3 | 1 |
| Hyperplasia, Focal                |   |   |   |   |   |   |       |   |   |   | 3 |         |   |   |   | 2 |         |   |   |   |   |   |   |
| Hypertrophy, Focal                | 2 |   |   |   |   |   |       |   |   |   | 2 |         |   |   |   | 1 | 2       |   |   |   |   |   |   |
| Adrenal Medulla                   | + |   |   |   |   |   |       |   |   |   |   |         |   |   |   |   |         |   |   |   |   |   |   |
| Hyperplasia                       | 2 | 2 | 1 | 2 | 3 | 1 | 2     | 2 |   | 2 | 1 |         | 2 |   | 2 |   | 2       |   |   |   |   | 2 | 3 |
| Islets, Pancreatic                | + |   |   |   |   |   |       |   |   |   |   |         |   |   |   |   |         |   |   |   |   |   |   |
| Hyperplasia                       |   |   |   |   |   |   |       |   |   |   |   |         |   |   |   |   |         |   |   |   |   |   |   |
| Parathyroid Gland                 | M | + | + | + | + | + | +     | + | + | + | + | +       | + | M | + | + | +       | + | + | + | + | + | + |
| Pituitary Gland                   | + |   |   |   |   |   |       |   |   |   |   |         |   |   |   |   |         |   |   |   |   |   |   |

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TDMS No. 95003 - 05

Test Type: CHRONIC

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Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE             |  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID | males<br>(cont...) |
|-----------------------------------|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|--------------------|
| 90 MG/KG                          |  | 0           | 0 | 0 | 0 | 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 | 5 | 4 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 |           |                    |
| Pars Distalis, Angiectasis        |  | 4           |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |           |                    |
| Pars Distalis, Hyperplasia        |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Pars Distalis, Hyperplasia, Focal |  | 2           |   |   | 2 | 2 |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 | 1 |           |                    |
| Pars Intermedia, Angiectasis      |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Pars Intermedia, Cyst             |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Thyroid Gland                     |  | +           | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + |   |           |                    |
| Ultimobranchial Cyst              |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| C-cell, Hyperplasia               |  | 2           | 1 | 1 |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   | 1 |   |           |                    |
| Follicle, Degeneration, Focal     |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| <b>GENERAL BODY SYSTEM</b>        |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Tissue NOS                        |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| <b>GENITAL SYSTEM</b>             |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Coagulating Gland                 |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Cyst                              |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Epididymis                        |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Preputial Gland                   |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Inflammation, Chronic             |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Prostate                          |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Hyperplasia                       |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Inflammation, Chronic             |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Epithelium, Hyperplasia           |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Seminal Vesicle                   |  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |

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| FISCHER 344 RATS MALE<br>90 MG/KG   | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | males<br>(cont...) |
|---|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|--------------------|
|   | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>8 | 0<br>7<br>3<br>1 | 0<br>5<br>6<br>2 | 0<br>4<br>4<br>9 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>9 | 0<br>6<br>3<br>3 | 0<br>7<br>2<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>9 | 0<br>7<br>3<br>0 | 0<br>7<br>2<br>1 | 0<br>7<br>2<br>9 | 0<br>6<br>5<br>8 | 0<br>7<br>3<br>9 | 0<br>6<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 |           |                    |
| Degeneration  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 3         |                    |
| Testes  | +                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |
| Artery, Inflammation, Chronic<br>Germinal Epithelium, Atrophy<br>Interstitial Cell, Hyperplasia | 2                | 3                | 2                | 1                | 1                |                  |                  | 2                | 2                | 3                | 2                | 2                | 1                | 3                | 2                |                  | 1                | 3                | 2                |                  | 1                | 3                | 1                | 1                | 2         |                    |
|   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                | 1                |                  |                  |                  |                  |                  |                  |                  | 1                |                  | 1                |                  | 1         |                    |
| <b>HEMATOPOIETIC SYSTEM</b>   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |
| Bone Marrow   | +                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |
| Hyperplasia   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 3         |                    |
| Myelofibrosis   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |
| Lymph Node  | +                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |
| Mediastinal, Ectasia  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 3         |                    |
| Mediastinal, Hemorrhage   | 2                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1         |                    |
| Mediastinal, Hyperplasia, Lymphoid  | 2                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 3         |                    |
| Mediastinal, Pigmentation   | 2                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |
| Pancreatic, Ectasia   | 3                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 3         |                    |
| Pancreatic, Hyperplasia, Lymphoid   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 2         |                    |
| Lymph Node, Mandibular  | M                | M                | M                | +                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M         |                    |
| Ectasia   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |
| Hyperplasia, Lymphoid   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |
| Lymph Node, Mesenteric  | +                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |
| Ectasia   | 2                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 2         |                    |
| Hemorrhage  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1         |                    |
| Hyperplasia, Lymphoid   | 2                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 2         |                    |
| Spleen  | +                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE<br>90 MG/KG | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID | males<br>(cont...) |
|-----------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|--------------------|
|                                   | 0           | 0 | 0 | 0 | 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 | 5 | 4 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 6 | 7 | 7 | 7 |           |                    |
|                                   | 3           | 3 | 3 | 0 | 3 | 6 | 4 | 3 | 3 | 3 | 2 | 3 | 2 | 2 | 3 | 3 | 2 | 3 | 5 | 2 | 3 | 3 | 3 |   |           |                    |
|                                   | 2           | 1 | 0 | 8 | 1 | 2 | 9 | 0 | 2 | 1 | 9 | 3 | 9 | 9 | 0 | 1 | 9 | 1 | 9 | 8 | 9 | 2 | 2 |   |           |                    |
|                                   | 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 | 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 | 1 | 1 | 1 | 1 |   |           |                    |
|                                   | 5           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 |   |           |                    |
|                                   | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 |   |           |                    |

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Accessory Spleen                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibrosis                         |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hematopoietic Cell Proliferation |   |   | 2 |   | 2 | 3 |   | 2 |   |   | 2 | 1 | 2 | 2 |   |   | 1 |   |   |   | 1 |   | 3 | 1 |
| Hemorrhage                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Necrosis                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 |   |   |   |   |   |
| Pigmentation                     |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   | 3 |   |   |
| Thymus                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

**INTEGUMENTARY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hyperplasia                                 | 3 | 4 | 4 |   | 4 | 2 |   | 4 |   | 2 | 3 | 3 | 4 | 4 | 3 | 3 | 3 | 3 | 2 | 3 |   | 2 | 4 | 3 |
| Skin  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Cyst Epithelial Inclusion                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hyperkeratosis                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Inflammation, Chronic                       |   |   |   |   |   | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Ulcer                                       | 3 |   | 4 | 4 |   | 4 |   | 3 |   |   |   | 4 | 4 | 4 | 4 |   | 3 | 4 |   | 4 | 4 |   | 4 | 4 |
| Control, Hyperkeratosis                     |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Control Epidermis, Hyperplasia              |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |
| Epidermis, Hyperplasia                      | 3 |   | 4 | 3 |   | 4 |   | 3 |   |   |   | 4 | 3 | 4 | 4 |   | 3 | 4 |   | 4 | 4 |   | 3 | 3 |
| Epidermis, Site Of Application, Hyperplasia |   | 1 |   |   |   | 1 | 1 |   | 1 | 1 |   | 1 |   |   | 1 | 1 |   | 1 | 1 | 1 |   | 1 | 1 | 1 |
| Site Of Application, Hyperkeratosis         | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 2 | 1 | 4 | 2 | 1 | 3 | 4 | 3 | 2 | 1 | 4 | 3 | 2 | 1 | 2 | 3 | 2 |
| Site Of Application, Inflammation, Chronic  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |

**MUSCULOSKELETAL SYSTEM**

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

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST | FISCHER 344 RATS MALE |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | ANIMAL ID | males<br>(cont...) |
|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|--------------------|
|             | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>8      | 0<br>7<br>3<br>1      | 0<br>5<br>6<br>2      | 0<br>4<br>4<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>1      | 0<br>6<br>2<br>3      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>2<br>9      | 0<br>6<br>5<br>8      | 0<br>7<br>2<br>9      | 0<br>6<br>3<br>2      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>2      |                       |                       |                       |           |                    |
| 90 MG/KG    | 0<br>0<br>1<br>5<br>1 | 0<br>0<br>0<br>5<br>2 | 0<br>0<br>1<br>5<br>3 | 0<br>0<br>1<br>5<br>4 | 0<br>0<br>1<br>5<br>5 | 0<br>0<br>1<br>5<br>6 | 0<br>0<br>1<br>5<br>7 | 0<br>0<br>1<br>5<br>8 | 0<br>0<br>1<br>5<br>9 | 0<br>0<br>1<br>6<br>0 | 0<br>0<br>1<br>6<br>1 | 0<br>0<br>1<br>6<br>2 | 0<br>0<br>1<br>6<br>3 | 0<br>0<br>1<br>6<br>4 | 0<br>0<br>1<br>6<br>5 | 0<br>0<br>1<br>6<br>6 | 0<br>0<br>1<br>6<br>7 | 0<br>0<br>1<br>6<br>8 | 0<br>0<br>1<br>6<br>9 | 0<br>0<br>1<br>7<br>0 | 0<br>0<br>1<br>7<br>1 | 0<br>0<br>1<br>7<br>2 | 0<br>0<br>1<br>7<br>3 | 0<br>0<br>1<br>7<br>4 | 0<br>0<br>1<br>7<br>5 |           |                    |

Skeletal Muscle

+

**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Compression      |   | 3 | 4 |   |   |   |   | 3 |   |   | 4 | 2 |   | 2 |   |   | 3 | 4 |   | 3 |   | 4 | 1 | 3 |  |
| Peripheral Nerve | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Spinal Cord      | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

**RESPIRATORY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Foreign Body                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |
| Hemorrhage                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Infiltration Cellular, Histiocyte               | 1 |   | 2 | 3 | 1 | 1 |   | 1 |   | 1 |   | 1 | 1 | 1 |   | 1 |   | 1 | 1 | 1 |   |   |   |   |
| Inflammation, Chronic                           |   |   |   |   |   | 1 | 1 |   |   |   | 1 |   | 1 |   |   |   |   |   |   |   |   | 1 |   |   |
| Metaplasia, Osseous                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |
| Alveolar Epithelium, Hyperplasia                |   |   |   | 2 | 3 |   | 1 |   |   |   |   |   | 3 |   |   |   |   |   |   |   | 1 |   |   |   |
| Nose  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Foreign Body                                    | X | X | X | X | X |   |   | X | X | X |   |   | X | X |   |   | X |   |   |   |   |   |   |   |
| Fungus  |   | X |   |   |   |   |   |   |   | X |   |   |   |   |   | X |   |   |   |   |   |   |   |   |
| Inflammation, Chronic                           | 3 | 3 | 1 | 1 | 3 |   |   | 1 | 3 | 3 | 1 |   | 3 | 1 | 1 | 3 | 1 |   |   |   |   | 2 |   |   |
| Olfactory Epithelium, Metaplasia, Respiratory   |   |   | 1 |   | 1 | 2 |   |   | 1 | 2 |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |
| Respiratory Epithelium, Hyperplasia             | 2 | 2 |   | 1 | 2 |   |   | 2 | 2 | 3 |   |   | 3 | 1 |   | 2 |   |   |   |   |   |   |   |   |
| Respiratory Epithelium, Metaplasia, Respiratory |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |
| Respiratory Epithelium, Metaplasia, Squamous    |   | 2 |   |   |   |   |   |   |   | 1 | 3 |   |   |   |   | 2 |   |   |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
 + .. Tissue examined microscopically  
 X .. Lesion present  
 I .. Insufficient tissue  
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 A .. Autolysis precludes evaluation  
 BLANK .. Not examined microscopically  
 1-4 .. Lesion qualified as:  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE<br><br>90 MG/KG | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |   |   |   |   |   |   |   |   |
|---------------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|---|---|---|---|---|---|---|---|
|                                       | 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 | 5 | 4 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 2 | 6 | 7 |                    | 7 |   |   |   |   |   |   |   |   |
|                                       | 3           | 3 | 3 | 0 | 3 | 6 | 4 | 3 | 3 | 3 | 2 | 3 | 2 | 2 | 3 | 3 | 2 | 3 | 5 | 2 | 6                  | 7 | 7 | 7 |   |   |   |   |   |   |
|                                       | 2           | 1 | 0 | 8 | 1 | 2 | 9 | 0 | 2 | 1 | 9 | 3 | 9 | 9 | 0 | 1 | 9 | 1 | 9 | 8 | 9                  | 2 | 3 | 3 | 3 | 3 | 0 | 0 | 3 | 2 |
|                                       | 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 | 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 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1                  | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                                       | 5           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7                  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|                                       | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1                  | 2 | 3 | 4 | 5 |   |   |   |   |   |

Trachea +

**SPECIAL SENSES SYSTEM**

|                      |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|----------------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Eye                  | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cataract             |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Retina, Degeneration | 2 3   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Harderian Gland      | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Hyperplasia, Focal   | 2   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Zymbal's Gland       | +   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**URINARY SYSTEM**

|                                      |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--------------------------------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Kidney                               | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Inflammation, Suppurative            |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Inflammation, Chronic                | 3 3 2 3 2 1 1 3 2 2 1 1 2 3 3 2 1                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Nephropathy                          | 3 4 2 1 4 3 2 1 3 3 1 3 3 1 3 2 2 2 1 2 3 3 2 1         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Renal Tubule, Dilatation             |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Renal Tubule, Hyperplasia            |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Renal Tubule, Pigmentation           | 2   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Transitional Epithelium, Hyperplasia | 3   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Urinary Bladder                      | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Transitional Epithelium, Hyperplasia | 2   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
 + .. Tissue examined microscopically M .. Missing tissue 1-4 .. Lesion qualified as:  
 X .. Lesion present A .. Autolysis precludes evaluation 1) Minimal 3) Moderate  
 I .. Insufficient tissue BLANK .. Not examined microscopically 2) Mild 4) Marked

| FISCHER 344 RATS MALE |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |   |   |
|-----------------------|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|---|
| DAY ON TEST           |           | 7 | 7 | 7 | 7 | 7 | 6 | 5 | 6 | 6 | 7 | 7 | 6 | 7 | 6 | 6 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 4        | 6 |   |
|                       |           | 2 | 3 | 3 | 1 | 2 | 3 | 6 | 5 | 7 | 0 | 3 | 6 | 0 | 6 | 9 | 1 | 3 | 3 | 2 | 3 | 3 | 2 | 3        | 6 | 5 |
|                       |           | 9 | 0 | 1 | 3 | 9 | 2 | 9 | 7 | 0 | 4 | 2 | 7 | 4 | 7 | 4 | 6 | 1 | 0 | 2 | 0 | 1 | 2 | 3        | 6 | 5 |
| 90 MG/KG              |           | 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 |
|                       | 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 |
|                       |           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1        | 1 | 2 |
|                       |           | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9        | 9 | 0 |
|                       |           | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8        | 9 | 0 |
|                       |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |   |   |

ALIMENTARY SYSTEM

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |       |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|
| Esophagus                         | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | 48    |
| Intestine Large, Cecum            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50    |
| Angiectasis                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 3.0 |
| Edema                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 |   |   |   |   |   |   |   |   | 1 4.0 |
| Intestine Large, Colon            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50    |
| Edema                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   | 1 3.0 |
| Intestine Large, Rectum           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   | + | + | + | + | + |   | + | 48    |
| Edema                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   | 1 3.0 |
| Intestine Small, Duodenum         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50    |
| Intestine Small, Ileum            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | 48    |
| Hemorrhage                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0 |
| Intestine Small, Jejunum          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48    |
| Liver                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50    |
| Angiectasis                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 1.0 |
| Basophilic Focus                  | X | X | X |   | X |   |   |   |   |   | X | X |   |   |   |   |   | X | X | X | X |   |   |   | 27    |
| Clear Cell Focus                  | X | X |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | X | X |   |   |   |   |   | 10    |
| Degeneration, Cystic              | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 1.0 |
| Eosinophilic Focus                |   | X |   |   | X | X |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   |   |   |   | 8     |
| Hematopoietic Cell Proliferation  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   | 1 1.0 |
| Hepatodiaphragmatic Nodule        |   | X |   |   |   |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | 7     |
| Infiltration Cellular, Mixed Cell |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>90 MG/KG   | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |      |    |     |     |     |     |
|---|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|------|----|-----|-----|-----|-----|
|   | 0729        | 0730  | 0731  | 0732  | 0733  | 0734  | 0735  | 0736  | 0737  | 0738  | 0739  | 0740  | 0741  | 0742  | 0743  | 0744  | 0745  | 0746  | 0747  | 0748  |          | 0749 |    |     |     |     |     |
| ANIMAL ID   | 00176       | 00177 | 00178 | 00179 | 00180 | 00181 | 00182 | 00183 | 00184 | 00185 | 00186 | 00187 | 00188 | 00189 | 00190 | 00191 | 00192 | 00193 | 00194 | 00195 | 00196    |      |    |     |     |     |     |
| Mixed Cell Focus<br>Necrosis, Focal   |             | X     |       |       | X     |       |       |       |       | X     |       |       |       | X     |       | X     |       | X     |       |       |          | 12   |    |     |     |     |     |
| Bile Duct, Hyperplasia<br>Centrilobular, Necrosis   | 2           | 1     | 1     |       | 1     |       | 1     | 3     | 3     | 1     | 1     | 2     |       | 1     | 3     | 2     |       | 1     | 1     | 1     | 2        | 1    | 37 | 1.6 |     |     |     |
| Hepatocyte, Hyperplasia, Focal<br>Hepatocyte, Vacuolization Cytoplasmic<br>Kupffer Cell, Pigmentation |             |       |       |       |       |       |       |       |       |       |       |       |       |       | 2     |       |       |       |       |       |          | 1    | 3  | 2.0 |     |     |     |
|   |             |       |       |       |       |       |       |       |       |       |       |       |       |       | 2     |       |       |       |       |       |          |      | 2  | 1   | 2.0 |     |     |
| Mesentery<br>Accessory Spleen<br>Fat, Necrosis  |             |       |       |       | +     | +     |       |       |       |       |       |       |       |       | +     |       |       |       | +     |       |          |      | 12 | 3   | 8   | 2.6 |     |
| Oral Mucosa   |             |       |       |       |       |       |       |       |       | +     |       |       |       |       |       |       |       |       |       |       |          |      |    | 2   |     |     |     |
| Pancreas<br>Atrophy<br>Cyst<br>Acinus, Cytoplasmic Alteration<br>Acinus, Hyperplasia, Focal           | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +    | 50 | 26  | 2.5 |     |     |
|   | 3           |       | 1     | 1     |       | 2     |       |       | 3     | 2     | 1     |       |       | 4     |       |       | 4     | 3     |       |       | 2        | 2    | 1  | 10  | 5   | 2.8 |     |
|   | X           | X     | X     |       |       |       |       |       |       |       |       |       |       |       | 3     | 3     |       |       |       | 2     |          |      | X  | 2   | 3.0 |     |     |
| Salivary Glands   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +    | 50 |     |     |     |     |
| Stomach, Forestomach<br>Edema<br>Fibrosis<br>Ulcer<br>Epithelium, Hyperplasia                         | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +    | 50 | 3   | 3.3 |     |     |
|   |             |       |       |       |       | 4     |       | 3     |       |       |       | 3     |       |       |       |       | 4     |       |       |       | 3        |      | 1  | 3.0 | 3   | 3.7 |     |
|   |             |       |       |       |       |       | 4     |       |       |       |       |       |       | 4     |       |       |       |       |       |       |          |      | 3  | 3   | 3.7 | 5   | 2.4 |
| Stomach, Glandular<br>Cyst<br>Edema   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +    | 50 | 1   | 1   | 2.0 |     |
|   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 2     |       |       |       |          |      |    |     |     |     |     |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>90 MG/KG | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |
|-----------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|
|                                   | 0729        | 0730  | 0731  | 0732  | 0733  | 0734  | 0735  | 0736  | 0737  | 0738  | 0739  | 0740  | 0741  | 0742  | 0743  | 0744  | 0745  | 0746  | 0747  | 0748  | 0749  | 0750  | 0751  | 0752  |          |
| ANIMAL ID                         | 00176       | 00177 | 00178 | 00179 | 00180 | 00181 | 00182 | 00183 | 00184 | 00185 | 00186 | 00187 | 00188 | 00189 | 00190 | 00191 | 00192 | 00193 | 00194 | 00195 | 00196 | 00197 | 00198 | 00199 |          |

|                         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |              |              |
|-------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|--------------|--------------|
| Erosion                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 | <b>4 1.5</b> |              |
| Ulcer                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 2 | <b>1 2.0</b> |              |
| Epithelium, Hyperplasia |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |              | <b>1 3.0</b> |
| Glands, Hyperplasia     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |              | <b>3 2.3</b> |

|                         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |              |
|-------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|--------------|
| Tongue                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 | <b>1 2.0</b> |
| Epithelium, Hyperplasia |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |              |

**CARDIOVASCULAR SYSTEM**

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |               |  |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------------|--|
| Heart          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50            |  |
| Cardiomyopathy | 2 | 2 | 3 | 3 | 3 | 2 |   | 2 | 2 | 2 | 3 | 2 | 2 | 3 | 3 |   |   | 3 |   | 1 | 2 | 2 | 1 | 1 | 3 |   | <b>45 2.4</b> |  |
| Thrombosis     |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   | <b>3 3.3</b>  |  |

**ENDOCRINE SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |               |  |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------------|--|
| Adrenal Cortex                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50            |  |
| Accessory Adrenal Cortical Nodule | X | X | X |   | X | X | X |   | X |   |   |   |   |   | X |   |   |   | X | X |   | X |   |   |   |   | <b>26</b>     |  |
| Degeneration, Fatty               |   |   | 1 |   | 1 |   |   |   | 1 |   | 1 |   | 1 | 3 |   | 1 | 1 |   | 1 |   |   |   |   | 2 |   |   | <b>25 1.6</b> |  |
| Hyperplasia, Focal                |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 | 1 |   |   |   |   |   |   | <b>6 2.0</b>  |  |
| Hypertrophy, Focal                |   |   |   |   |   |   |   |   |   |   |   |   | 2 | 2 |   |   |   |   |   |   |   |   |   |   |   |   | <b>6 1.8</b>  |  |

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |               |  |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------------|--|
| Adrenal Medulla | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50            |  |
| Hyperplasia     |   |   | 2 |   |   |   |   |   | 1 | 2 |   |   |   |   |   |   |   |   | 2 |   | 1 |   |   |   |   | 2 | <b>20 1.9</b> |  |

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |              |  |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------|--|
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |  |
| Hyperplasia        |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 | <b>2 1.0</b> |  |

|                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|
| Parathyroid Gland | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 |  |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|
| Pituitary Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |  |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|

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TDMS No. 95003 - 05  
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| FISCHER 344 RATS MALE<br>90 MG/KG | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |
|-----------------------------------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|
|                                   | 0729        | 0730   | 0731   | 0732   | 0733   | 0734   | 0735   | 0736   | 0737   | 0738   | 0739   | 0740   | 0741   | 0742   | 0743   | 0744   | 0745   | 0746   | 0747   | 0748   | 0749   | 0750   | 0751   | 0752   |          |
| ANIMAL ID                         | 001766      | 001767 | 001768 | 001769 | 001770 | 001771 | 001772 | 001773 | 001774 | 001775 | 001776 | 001777 | 001778 | 001779 | 001780 | 001781 | 001782 | 001783 | 001784 | 001785 | 001786 | 001787 | 001788 | 001789 |          |
| Pars Distalis, Angiectasis        | 2           |        | 3      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2      |        |        |          |
| Pars Distalis, Hyperplasia        |             |        | 2      |        |        |        | 2      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Pars Distalis, Hyperplasia, Focal | 2           |        |        |        |        |        |        |        |        |        | 3      |        |        |        | 3      |        |        |        |        |        |        | 2      |        |        |          |
| Pars Intermedia, Angiectasis      |             |        |        | 2      |        |        |        |        |        | 3      |        | 2      |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Pars Intermedia, Cyst             |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | X      |        |          |
| Thyroid Gland                     | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 49     |          |
| Ultimobranchial Cyst              |             |        |        |        |        | 3      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1 3.0  |          |
| C-cell, Hyperplasia               |             |        |        |        |        |        |        |        |        | 1      |        |        |        |        |        |        |        |        |        |        |        |        |        | 6 1.2  |          |
| Follicle, Degeneration, Focal     |             |        |        |        |        |        |        |        |        |        |        |        | 2      |        |        |        |        |        |        |        |        |        |        | 1 2.0  |          |
| <b>GENERAL BODY SYSTEM</b>        |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Tissue NOS                        |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1      |          |
| <b>GENITAL SYSTEM</b>             |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Coagulating Gland                 |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | +      | 1      |          |
| Cyst                              |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | X      | 1      |          |
| Epididymis                        | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50     |          |
| Preputial Gland                   | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50     |          |
| Inflammation, Chronic             |             |        |        |        |        |        |        | 3      | 2      |        |        | 2      |        |        | 3      | 2      | 2      |        | 2      |        |        |        | 3      | 13 2.2 |          |
| Prostate                          | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50     |          |
| Hyperplasia                       |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 4      |        | 1 4.0  |          |
| Inflammation, Chronic             | 2           |        | 2      | 1      | 3      | 3      |        |        |        | 2      | 2      | 3      | 3      | 3      |        | 1      | 3      |        | 3      | 2      | 1      | 3      | 1      | 42 2.4 |          |
| Epithelium, Hyperplasia           | 1           |        |        |        |        |        |        |        |        |        |        | 1      |        |        |        |        |        |        |        |        |        |        |        | 5 1.0  |          |
| Seminal Vesicle                   | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50     |          |

\* .. 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  
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 1-4 .. Lesion qualified as:  
 1) Minimal 3) Moderate  
 2) Mild 4) Marked

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>90 MG/KG  | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |       |       |       |        |        |  |
|------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------|-------|-------|--------|--------|--|
|                                    | 0729        | 0730  | 0731  | 0732  | 0733  | 0734  | 0735  | 0736  | 0737  | 0738  | 0739  | 0740  | 0741  | 0742  | 0743  | 0744  | 0745  | 0746  | 0747  | 0748  |          | 0749  |       |       |        |        |  |
| ANIMAL ID                          | 00176       | 00177 | 00178 | 00179 | 00180 | 00181 | 00182 | 00183 | 00184 | 00185 | 00186 | 00187 | 00188 | 00189 | 00190 | 00191 | 00192 | 00193 | 00194 | 00195 | 00196    | 00197 | 00198 | 00199 | 00200  |        |  |
| Degeneration                       |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |        | 1 3.0  |  |
| Testes                             | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | +     | +      | 50     |  |
| Artery, Inflammation, Chronic      |             |       |       | 2     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |        | 1 2.0  |  |
| Germinal Epithelium, Atrophy       | 1           | 4     | 2     |       | 3     |       |       | 1     | 1     |       | 3     |       | 2     |       | 1     | 4     | 4     | 4     |       | 2     |          | 2     |       | 2     | 36 2.1 |        |  |
| Interstitial Cell, Hyperplasia     |             |       | 2     |       | 2     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |        | 7 1.3  |  |
| <b>HEMATOPOIETIC SYSTEM</b>        |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |        |        |  |
| Bone Marrow                        | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | +     | +      | 50     |  |
| Hyperplasia                        |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       | 3     |        | 3 3.0  |  |
| Myelofibrosis                      |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       | 3     |        | 1 3.0  |  |
| Lymph Node                         |             |       |       | +     |       | +     | +     |       | +     | +     |       | +     | +     | +     | +     | +     | +     |       | +     |       | +        |       | +     |       | 26     |        |  |
| Mediastinal, Ectasia               |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 4     |       |          |       |       |       |        | 2 3.5  |  |
| Mediastinal, Hemorrhage            |             |       |       |       |       | 3     |       |       |       |       |       |       |       |       |       | 3     |       |       |       |       |          |       |       |       |        | 4 2.3  |  |
| Mediastinal, Hyperplasia, Lymphoid |             |       |       |       |       | 3     |       |       |       |       | 3     |       | 3     | 3     |       |       |       |       |       |       |          |       |       |       |        | 6 2.8  |  |
| Mediastinal, Pigmentation          |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |        | 1 2.0  |  |
| Pancreatic, Ectasia                |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       | 4     |       |        | 5 3.4  |  |
| Pancreatic, Hyperplasia, Lymphoid  |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 2     |          |       |       |       |        | 2 2.0  |  |
| Lymph Node, Mandibular             | M           | M     | M     | M     | M     | M     | M     | M     | M     | +     | M     | M     | +     | M     | M     | M     | M     | M     | M     | M     | +        | M     | M     | M     | 4      |        |  |
| Ectasia                            |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       | 2     |        | 1 2.0  |  |
| Hyperplasia, Lymphoid              |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       | 2     |       |        | 1 2.0  |  |
| Lymph Node, Mesenteric             | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | +     | 50     |        |  |
| Ectasia                            |             |       |       |       |       |       |       |       |       | 3     |       |       |       |       |       |       |       |       | 2     |       |          |       | 2     |       |        | 5 2.2  |  |
| Hemorrhage                         |             |       | 2     |       |       |       |       | 2     |       |       |       |       |       | 1     | 2     |       |       |       |       |       |          |       |       |       |        | 8 1.5  |  |
| Hyperplasia, Lymphoid              |             |       |       | 2     |       |       |       |       |       |       |       | 2     |       | 2     |       |       |       |       |       |       | 2        |       |       |       |        | 11 2.0 |  |
| Spleen                             | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | +     | 50     |        |  |

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
 + .. Tissue examined microscopically  
 X .. Lesion present  
 I .. Insufficient tissue  
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 1) Minimal 3) Moderate  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS MALE<br>90 MG/KG           | DAY ON TEST |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | * TOTALS |          |        |       |
|---|-------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--------|-------|
|   | 07<br>29    | 07<br>23 | 07<br>33 | 07<br>11 | 07<br>22 | 07<br>33 | 07<br>69 | 07<br>57 | 07<br>66 | 07<br>70 | 07<br>44 | 07<br>72 | 07<br>66 | 07<br>94 | 07<br>16 | 07<br>73 | 07<br>33 | 07<br>22 | 07<br>33 | 07<br>01 | 07<br>72 | 07<br>33 | 07<br>68 | 07<br>45 |          | 07<br>66 |        |       |
| ANIMAL ID                                   | 00176       | 00177    | 00178    | 00179    | 00180    | 00181    | 00182    | 00183    | 00184    | 00185    | 00186    | 00187    | 00188    | 00189    | 00190    | 00191    | 00192    | 00193    | 00194    | 00195    | 00196    | 00197    | 00198    | 00199    | 00200    | 00201    |        |       |
| Accessory Spleen                            |             |          |          |          | X        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1      |       |
| Fibrosis                                    |             |          |          |          |          |          |          |          |          |          | 2        |          |          |          |          | 3        |          |          |          |          |          |          |          |          |          |          |        | 3 2.3 |
| Hematopoietic Cell Proliferation            | 2           |          | 2        |          | 3        |          |          |          |          |          |          |          |          |          |          |          |          |          | 2        | 1        | 1        |          |          |          | 3        |          | 19 1.9 |       |
| Hemorrhage                                  |             |          |          | 4        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |        | 1 4.0 |
| Necrosis                                    |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 3        |          |          |          |          |          |          |          |          |          |          |        | 2 3.5 |
| Pigmentation                                |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 3        |          |          |          |          |          |        | 3 3.0 |
| Thymus                                      | +           | +        | +        | +        | +        | +        | +        | +        | M        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | 49     |       |
| <b>INTEGUMENTARY SYSTEM</b>                 |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |        |       |
| Mammary Gland                               | +           | +        | +        | +        | +        | +        | +        | M        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | 49     |       |
| Hyperplasia                                 |             | 3        | 2        | 2        |          | 4        |          |          |          |          | 2        | 2        | 4        | 2        | 3        | 4        | 1        | 3        |          | 2        | 2        | 2        | 3        | 2        |          | 2        | 38 2.8 |       |
| Skin  | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | 50     |       |
| Cyst Epithelial Inclusion                   |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | X        |          |          |          | 1      |       |
| Hyperkeratosis                              |             |          |          |          |          |          |          | 2        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1 2.0  |       |
| Inflammation, Chronic                       |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 2 3.5  |       |
| Ulcer                                       |             |          | 4        |          | 4        | 4        |          |          | 4        |          |          |          | 4        |          |          |          |          |          |          |          |          | 4        |          | 4        |          |          | 22 3.9 |       |
| Control, Hyperkeratosis                     |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1 1.0  |       |
| Control Epidermis, Hyperplasia              |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1        | 1        |          |          |          |          |          |          |          |          |          | 5 1.2  |       |
| Epidermis, Hyperplasia                      |             |          | 3        |          | 4        | 3        |          | 2        | 4        |          |          |          | 4        |          |          |          |          |          |          |          |          | 1        |          | 4        |          | 4        | 24 3.5 |       |
| Epidermis, Site Of Application, Hyperplasia | 2           | 1        | 1        | 1        | 1        |          | 1        |          |          |          |          | 1        | 1        |          | 1        | 1        |          | 1        | 1        | 1        |          | 1        | 1        |          | 1        | 29 1.0   |        |       |
| Site Of Application, Hyperkeratosis         | 3           | 4        | 2        | 1        | 2        |          | 2        | 3        | 1        | 1        | 2        | 2        | 2        |          | 2        | 1        | 1        | 3        | 2        | 2        | 2        | 3        | 2        |          | 4        | 47 2.4   |        |       |
| Site Of Application, Inflammation, Chronic  |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1 2.0  |       |
| <b>MUSCULOSKELETAL SYSTEM</b>               |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |        |       |
| Bone  | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | 50     |       |

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 X .. Lesion present  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
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P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
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 Lab: SRI

| FISCHER 344 RATS MALE<br>90 MG/KG | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |
|-----------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|
|                                   | 0729        | 0730  | 0731  | 0732  | 0733  | 0734  | 0735  | 0736  | 0737  | 0738  | 0739  | 0740  | 0741  | 0742  | 0743  | 0744  | 0745  | 0746  | 0747  | 0748  | 0749  | 0750  | 0751  | 0752  |          |
| ANIMAL ID                         | 00176       | 00177 | 00178 | 00179 | 00180 | 00181 | 00182 | 00183 | 00184 | 00185 | 00186 | 00187 | 00188 | 00189 | 00190 | 00191 | 00192 | 00193 | 00194 | 00195 | 00196 | 00197 | 00198 | 00199 |          |

Skeletal Muscle

1

**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |        |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--------|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |        |
| Compression      |   |   | 3 |   |   | 2 |   |   |   |   | 3 |   |   | 3 |   |   | 2 |   |   | 3 |   |   |   |   |    | 18 2.9 |
| Peripheral Nerve |   |   |   |   |   | + |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |        |
| Spinal Cord      |   |   |   |   |   | + |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |        |

**RESPIRATORY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Foreign Body                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 1   |
| Hemorrhage                                      | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 1.0 |
| Infiltration Cellular, Histiocyte               |   |   |   |   | 1 |   |   |   | 2 |   |   | 1 | 1 |   |   |   | 1 |   |   | 1 | 1 |   |   | 1 | 22 | 1.2 |
| Inflammation, Chronic                           |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   | 1 | 2 |   |   |   | 3 |   | 9  | 1.3 |
| Metaplasia, Osseous                             |   |   | 1 | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   | 4  | 1.0 |
| Alveolar Epithelium, Hyperplasia                | 2 |   |   |   |   |   |   |   |   |   | 1 |   |   | 1 |   |   |   |   |   |   |   |   |   |   | 8  | 1.8 |
| Nose  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Foreign Body                                    | X | X | X | X |   | X |   | X | X |   | X | X |   | X |   |   |   |   |   |   | X | X |   |   | 24 |     |
| Fungus  |   |   |   |   |   | X |   | X | X |   | X |   |   |   |   |   | X |   |   | X | X | X |   |   | 12 |     |
| Inflammation, Chronic                           |   |   | 1 | 1 | 1 | 1 | 3 |   | 3 | 3 |   | 3 | 1 | 3 | 1 |   |   | 3 |   |   | 3 | 4 | 3 |   | 30 | 2.1 |
| Olfactory Epithelium, Metaplasia, Respiratory   |   |   |   | 1 | 1 |   |   |   |   |   |   | 2 |   | 2 |   |   |   |   |   | 2 | 1 |   |   |   | 12 | 1.5 |
| Respiratory Epithelium, Hyperplasia             |   |   | 2 | 2 |   | 2 |   | 2 | 3 |   | 2 |   | 2 | 1 | 1 |   |   | 2 |   |   | 2 | 3 | 1 |   | 23 | 2.0 |
| Respiratory Epithelium, Metaplasia, Respiratory |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 2.0 |
| Respiratory Epithelium, Metaplasia, Squamous    |   |   |   | 1 |   | 3 |   | 3 | 2 |   | 2 |   | 2 |   |   |   |   | 2 |   |   | 3 | 1 |   |   | 13 | 2.1 |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS MALE<br>90 MG/KG    | DAY ON TEST |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | * TOTALS |
|--------------------------------------|-------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
|                                      | 07<br>29    | 07<br>23 | 07<br>31 | 07<br>13 | 07<br>22 | 07<br>30 | 07<br>19 | 07<br>28 | 07<br>16 | 07<br>25 | 07<br>14 | 07<br>24 | 07<br>12 | 07<br>21 | 07<br>10 | 07<br>20 | 07<br>08 | 07<br>18 | 07<br>06 | 07<br>17 |          |
| ANIMAL ID                            | 00176       | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    | 00011    |
| Trachea                              | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | 50       |
| <b>SPECIAL SENSES SYSTEM</b>         |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |
| Eye                                  | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | 50       |
| Cataract                             |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 3        |
| Retina, Degeneration                 |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 4        |
| Harderian Gland                      | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | 50       |
| Hyperplasia, Focal                   |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1        |
| Zymbal's Gland                       |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1        |
| <b>URINARY SYSTEM</b>                |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |
| Kidney                               | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | 50       |
| Inflammation, Suppurative            |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1        |
| Inflammation, Chronic                | 2           | 2        | 2        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 2        |
| Nephropathy                          | 3           | 3        | 3        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 3        |
| Renal Tubule, Dilatation             |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 3        |
| Renal Tubule, Hyperplasia            |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 2        |
| Renal Tubule, Pigmentation           |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 2        |
| Transitional Epithelium, Hyperplasia |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1        |
| Urinary Bladder                      | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | 50       |
| Transitional Epithelium, Hyperplasia |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1        |

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

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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST | FISCHER 344 RATS FEMALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID | females<br>(cont...) |
|-------------|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|----------------------|
|             | 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 |           |                      |
| 7           | 6                       | 6 | 7 | 6 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 6 | 7 | 4 | 7 | 7 | 0         |                      |
| 3           | 7                       | 5 | 3 | 2 | 3 | 3 | 1 | 4 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 5 | 3 | 3 | 2 | 3 | 3 | 0         |                      |
| 3           | 5                       | 9 | 3 | 9 | 3 | 3 | 0 | 4 | 6 | 3 | 6 | 3 | 2 | 3 | 3 | 6 | 6 | 6 | 0 | 2 | 2 | 6 | 2 | 2 | 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 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 0         |                      |
| 0           | 0                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 0         |                      |
| 1           | 2                       | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 0 |           |                      |

**ALIMENTARY SYSTEM**

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum Edema          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + |
| Intestine Small, Jejunum              | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Angiectasis                           |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |
| Basophilic Focus                      | X | X | X |   | X | X | X |   | X | X | X | X | X | X | X | X | X | X | X |   |   | X |   | X | X |
| Clear Cell Focus                      |   |   |   |   |   |   |   |   |   | X |   |   |   | X |   |   |   |   |   | X |   |   |   |   |   |
| Eosinophilic Focus                    |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   | X |   |   |   |   |   |   |   |   |   |
| Hematopoietic Cell Proliferation      |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatodiaphragmatic Nodule            |   |   |   |   |   |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |
| Infiltration Cellular, Mixed Cell     |   |   |   | 3 |   |   |   |   |   |   |   |   |   | 1 |   | 1 |   |   |   |   |   | 1 |   |   |   |
| Mixed Cell Focus                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |
| Bile Duct, Hyperplasia                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Centrilobular, Necrosis               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatocyte, Vacuolization Cytoplasmic |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |
| Kupffer Cell, Hyperplasia             |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>0 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | females<br>(cont...) |
|------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------------------|
|                                    | 0<br>7<br>3<br>3 | 0<br>6<br>7<br>5 | 0<br>6<br>5<br>9 | 0<br>7<br>3<br>9 | 0<br>6<br>2<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>1<br>0 | 0<br>6<br>4<br>6 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>6<br>3<br>6 | 0<br>6<br>3<br>6 | 0<br>6<br>3<br>6 | 0<br>7<br>3<br>3 | 0<br>4<br>2<br>6 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 |           |                      |
| Mesentery                          |                  | +                |                  |                  |                  |                  |                  |                  | +                | +                |                  |                  | +                | +                |                  |                  |                  |                  |                  |                  | +                | +                | +                |                  |                  |           |                      |
| Fibrosis                           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Hemorrhage                         |                  |                  |                  |                  |                  |                  |                  |                  | 3                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Fat, Necrosis                      |                  | 3                |                  |                  |                  |                  |                  |                  | 3                | 3                |                  |                  | 3                | 2                |                  |                  |                  | 3                | 3                | 3                |                  |                  | 3                | 3                | 3                |           |                      |
| Pancreas                           | +                | +                | +                | +                | A                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                |           |                      |
| Atrophy                            |                  |                  |                  | 2                |                  |                  |                  |                  | 3                |                  |                  | 1                |                  |                  |                  | 3                |                  | 1                |                  |                  | 2                | 3                |                  |                  |                  |           |                      |
| Cyst                               |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  | X                |                  |                  |                  |           |                      |
| Acinus, Cytoplasmic Alteration     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Salivary Glands                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                |           |                      |
| Atrophy                            |                  |                  |                  |                  | 1                |                  |                  |                  |                  |                  |                  | 2                |                  |                  |                  |                  |                  | 2                |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Cyst                               |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Stomach, Forestomach               | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                |           |                      |
| Edema                              |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 2                |                  |           |                      |
| Inflammation, Chronic Active       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 4                | 2                |                  |                  |           |                      |
| Ulcer                              |                  |                  |                  |                  |                  |                  |                  |                  | 4                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Epithelium, Hyperplasia            |                  |                  |                  |                  |                  |                  |                  | 3                |                  |                  | 1                |                  |                  |                  |                  |                  |                  |                  |                  |                  | 4                | 3                |                  |                  |                  |           |                      |
| Stomach, Glandular                 | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                |           |                      |
| Edema                              |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Erosion                            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Ulcer                              |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |

CARDIOVASCULAR SYSTEM

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Heart          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Cardiomyopathy | 2 | 1 |   | 2 | 1 | 3 | 2 |   | 2 | 1 | 1 | 3 |   |   |   |   | 1 | 2 | 2 | 1 | 2 |   | 2 |   |   |

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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| DAY ON TEST           | FISCHER 344 RATS FEMALE |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | ANIMAL ID             | females<br>(cont...)  |                       |                       |                       |
|-----------------------|-------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|                       | 0<br>7<br>3<br>3        | 0<br>6<br>7<br>5      | 0<br>6<br>5<br>9      | 0<br>7<br>3<br>3      | 0<br>6<br>2<br>9      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>1<br>0      | 0<br>6<br>4<br>4      | 0<br>7<br>3<br>6      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>6<br>5<br>6      | 0<br>6<br>3<br>2      | 0<br>6<br>3<br>2      | 0<br>7<br>3<br>2      |                       |                       | 0<br>4<br>2<br>6      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>3      |
| 0<br>0<br>2<br>0<br>1 | 0<br>0<br>0<br>0<br>2   | 0<br>0<br>0<br>0<br>3 | 0<br>0<br>0<br>0<br>4 | 0<br>0<br>0<br>0<br>5 | 0<br>0<br>0<br>0<br>6 | 0<br>0<br>0<br>0<br>7 | 0<br>0<br>0<br>0<br>8 | 0<br>0<br>0<br>0<br>9 | 0<br>0<br>0<br>0<br>0 | 0<br>0<br>0<br>0<br>1 | 0<br>0<br>0<br>0<br>1 | 0<br>0<br>0<br>0<br>2 | 0<br>0<br>0<br>0<br>3 | 0<br>0<br>0<br>0<br>4 | 0<br>0<br>0<br>0<br>5 | 0<br>0<br>0<br>0<br>6 | 0<br>0<br>0<br>0<br>7 | 0<br>0<br>0<br>0<br>8 | 0<br>0<br>0<br>0<br>9 | 0<br>0<br>0<br>0<br>0 | 0<br>0<br>0<br>0<br>1 | 0<br>0<br>0<br>0<br>2 | 0<br>0<br>0<br>0<br>3 | 0<br>0<br>0<br>0<br>4 | 0<br>0<br>0<br>0<br>5 |

**ENDOCRINE SYSTEM**

|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adrenal Cortex                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Accessory Adrenal Cortical Nodule   |   |   |   | X |   |   |   |   |   |   |   |   |   | X | X |   | X |   |   |   |   |   |   |
| Degeneration, Fatty                 | 1 |   |   |   | 2 |   | 3 |   | 1 | 3 | 3 |   |   |   |   |   |   | 4 | 3 | 3 |   | 3 | 2 |
| Hyperplasia, Focal                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 | 2 |   |   |   |   |   |
| Hypertrophy, Focal                  | 1 | 2 |   | 3 | 2 |   |   |   | 2 | 3 |   |   |   |   |   |   |   |   |   |   |   |   | 3 |
| Adrenal Medulla                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hyperplasia                         |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   | 3 | 2 |   |   |   |   |   |   |   |
| Islets, Pancreatic                  | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Parathyroid Gland                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pituitary Gland                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pars Distalis, Angiectasis          |   |   | 2 |   |   |   |   |   | 3 |   |   |   |   |   |   | 1 |   |   |   |   | 2 |   |   |
| Pars Distalis, Cyst                 |   |   | X |   | X | X | X |   | X |   | X | X | X | X |   |   |   |   |   | X |   | X | X |
| Pars Distalis, Hyperplasia, Focal   | 2 |   |   |   |   |   |   |   | 3 |   |   | 1 |   |   | 2 |   |   |   |   |   |   |   |   |
| Pars Intermedia, Angiectasis        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pars Intermedia, Cyst               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pars Intermedia, Hyperplasia, Focal |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Thyroid Gland                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Ultimobranchial Cyst                |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| C-cell, Hyperplasia                 |   |   |   |   | 1 | 1 |   |   | 1 | 1 |   |   | 1 |   |   |   | 3 |   |   |   |   | 1 | 1 |

**GENERAL BODY SYSTEM**

Tissue NOS

\* .. 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



TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| DAY ON TEST    | FISCHER 344 RATS FEMALE |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | ANIMAL ID             | females<br>(cont...)  |                       |                       |                       |                       |
|----------------|-------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|                | 0<br>7<br>3<br>3        | 0<br>6<br>7<br>5      | 0<br>6<br>5<br>9      | 0<br>7<br>3<br>2      | 0<br>6<br>3<br>9      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>1<br>0      | 0<br>6<br>4<br>4      | 0<br>7<br>3<br>6      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>3      | 0<br>6<br>3<br>6      | 0<br>6<br>5<br>6      | 0<br>6<br>3<br>0      | 0<br>6<br>3<br>2      |                       |                       | 0<br>7<br>3<br>2      | 0<br>4<br>2<br>6      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>3      |
| <b>0 MG/KG</b> | 0<br>0<br>2<br>0<br>1   | 0<br>0<br>2<br>0<br>2 | 0<br>0<br>2<br>0<br>3 | 0<br>0<br>2<br>0<br>4 | 0<br>0<br>2<br>0<br>5 | 0<br>0<br>2<br>0<br>6 | 0<br>0<br>2<br>0<br>7 | 0<br>0<br>2<br>0<br>8 | 0<br>0<br>2<br>0<br>9 | 0<br>0<br>2<br>0<br>0 | 0<br>0<br>2<br>0<br>1 | 0<br>0<br>2<br>0<br>1 | 0<br>0<br>2<br>0<br>2 | 0<br>0<br>2<br>0<br>3 | 0<br>0<br>2<br>0<br>4 | 0<br>0<br>2<br>0<br>5 | 0<br>0<br>2<br>0<br>6 | 0<br>0<br>2<br>0<br>7 | 0<br>0<br>2<br>0<br>8 | 0<br>0<br>2<br>0<br>9 | 0<br>0<br>2<br>0<br>0 | 0<br>0<br>2<br>0<br>1 | 0<br>0<br>2<br>0<br>2 | 0<br>0<br>2<br>0<br>3 | 0<br>0<br>2<br>0<br>4 | 0<br>0<br>2<br>0<br>5 |

**GENITAL SYSTEM**

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Clitoral Gland                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Cyst                           |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |
| Hyperplasia                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |
| Inflammation, Chronic          | 2 |   |   |   |   |   |   |   | 2 | 2 |   |   | 3 | 2 |   |   |   |   | 3 |   |   |   |   |   |   |
| Ovary                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Cyst                           | X |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | X |   |   |   | X | X |   |
| Interstitial Cell, Hyperplasia |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Uterus                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Hyperplasia, Cystic            |   |   |   |   | 4 | 3 |   | 1 | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Vagina                         |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |

**HEMATOPOIETIC SYSTEM**

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hyperplasia                        |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Infiltration Cellular, Histiocyte  |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node                         |   |   |   |   | + | + | + |   |   |   | + |   | + |   |   |   |   |   | + | + |   |   |   | + |
| Bronchial, Hyperplasia, Lymphoid   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mediastinal, Ectasia               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |
| Mediastinal, Hemorrhage            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |
| Mediastinal, Hyperplasia, Lymphoid |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   | 3 |
| Mediastinal, Pigmentation          |   |   |   |   |   | 3 |   |   |   |   | 3 |   | 3 |   |   |   |   |   |   |   |   |   |   | 3 |
| Pancreatic, Ectasia                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 |   |   |
| Pancreatic, Pigmentation           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
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TDMS No. 95003 - 05

Test Type: CHRONIC

Route: SKIN APPLICATION

Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE<br><br>0 MG/KG | DAY ON TEST |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | females<br>(cont...) |    |
|--|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------------------|----|
|  | 07          | 06 | 06 | 07 | 06 | 07 | 07 | 07 | 06 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 06 | 06 | 07 | 04 | 07 |                      | 07 |
|  | 33          | 75 | 33 | 23 | 39 | 33 | 13 | 43 | 36 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 35 | 33 | 33 | 23 |                      | 33 |
| ANIMAL ID                              | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00                   | 00 |
|  | 22          | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22                   | 22 |
|  | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 02 | 02 | 02 | 02                   | 02 |

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lymph Node, Mandibular           | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M |   |
| Lymph Node, Mesenteric           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Atrophy                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hemorrhage                       |   | 3 | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |
| Hyperplasia, Histiocytic         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |
| Hyperplasia, Lymphoid            | 3 | 2 |   |   |   |   |   |   | 2 |   |   |   |   | 3 | 2 |   |   | 2 |   | 2 |   |   | 2 |   |   |
| Pigmentation                     |   | 3 |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   | 3 | 3 |   |   |   |   |
| Spleen                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Fibrosis                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hematopoietic Cell Proliferation | 2 | 2 | 3 |   |   |   | 1 | 3 | 3 | 1 | 2 | 2 | 1 |   |   | 2 | 2 | 1 |   | 2 | 2 | 2 | 2 | 1 | 2 |
| Hemorrhage                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Necrosis                         |   |   |   |   |   |   |   | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pigmentation                     |   |   |   |   | 3 |   |   |   | 3 |   |   | 3 |   |   |   | 3 | 3 | 3 |   | 3 |   |   |   |   |   |
| Thymus                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |

**INTEGUMENTARY SYSTEM**

|                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Hyperplasia                     | 2 | 2 | 3 | 2 | 3 | 4 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 4 | 3 | 2 | 3 | 3 | 3 | 4 | 3 | 4 | 2 | 2 | 3 |
| Skin                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Cyst Epithelial Inclusion       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hyperkeratosis                  |   |   |   |   |   |   |   | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Inflammation, Chronic           |   |   |   | 4 |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |
| Ulcer                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   | 4 |   |   |   |
| Control, Hyperkeratosis         |   |   |   |   |   |   |   |   |   |   | 1 |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |
| Control, Epidermis, Hyperplasia |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
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 X .. Lesion present  
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 1-4 .. Lesion qualified as:  
 1) Minimal 3) Moderate  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID | females<br>(cont...) |
|-------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|----------------------|
|                         | 0733        | 0675 | 0663 | 0773 | 0662 | 0773 | 0777 | 0777 | 0676 | 0777 | 0677 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0676 | 0666 | 0777 | 0474 | 0777 |           |                      |
| 0 MG/KG                 | 0000        | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000      |                      |
|                         | 2           | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2         |                      |
|                         | 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           | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 2    | 2    | 2    | 2    | 2    | 2         |                      |

Control Epidermis, Hyperplasia 1  
 Epidermis, Hyperplasia 4 2 4 3 3  
 Epidermis, Ulcer  
 Epidermis, Site Of Application, Hyperplasia 1  
 Site Of Application, Hyperkeratosis 1 1 1 1

**MUSCULOSKELETAL SYSTEM**

Bone +  
 Skeletal Muscle

**NERVOUS SYSTEM**

Brain +  
 Compression 3 3 2 3 4 2 2 3 4 4 4 3  
 Hemorrhage 3 1 2 2 1 2  
 Necrosis 2

Peripheral Nerve

Spinal Cord

**RESPIRATORY SYSTEM**

Lung +  
 Hemorrhage 2 2  
 Infiltration Cellular, Histiocyte 1 1 1 1  
 Inflammation, Chronic 2 2 1 1  
 Metaplasia, Osseous  
 Pigmentation 2 1

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
 + .. Tissue examined microscopically M .. Missing tissue 1-4 .. Lesion qualified as:  
 X .. Lesion present A .. Autolysis precludes evaluation 1) Minimal 3) Moderate  
 I .. Insufficient tissue BLANK .. Not examined microscopically 2) Mild 4) Marked

TDMS No. 95003 - 05  
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**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**

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 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST                                   | FISCHER 344 RATS FEMALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID | females<br>(cont...) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
|---|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|
|   | 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 |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| 7   | 6                       | 6 | 7 | 6 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 6 | 7 | 4 | 7 | 7 | 0 |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| 3   | 7                       | 5 | 3 | 2 | 3 | 3 | 1 | 4 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 5 | 3 | 3 | 2 | 3 | 3 | 0 |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| 3   | 5                       | 9 | 3 | 9 | 3 | 3 | 0 | 4 | 6 | 3 | 6 | 3 | 2 | 3 | 3 | 6 | 6 | 6 | 0 | 2 | 2 | 6 | 2 | 2 | 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 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 0 |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| 0   | 0                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 0 |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| 1   | 2                       | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 0 |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Alveolar Epithelium, Hyperplasia              |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Serosa, Hyperplasia                           |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Nose  |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
| Foreign Body                                  |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Inflammation, Chronic                         |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Olfactory Epithelium, Metaplasia, Respiratory |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Respiratory Epithelium, Hyperplasia           |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Respiratory Epithelium, Metaplasia, Squamous  |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Trachea                                       |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
| <b>SPECIAL SENSES SYSTEM</b>                  |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Eye   |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
| Cataract                                      |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Retina, Degeneration                          |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Harderian Gland                               |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
| Atrophy                                       |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Hyperplasia, Focal                            |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| <b>URINARY SYSTEM</b>                         |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Kidney  |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
| Inflammation, Chronic                         |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Metaplasia, Lipocyte                          |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Nephropathy                                   |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      | 1 | 1 | 1 | 1 |   | 2 | 1 | 2 | 1 | 2 | 3 | 3 | 2 | 1 | 3 | 1 | 2 | 3 | 3 | 3 | 2 | 1 |   | 1 | 2 |   |  |  |
| Renal Tubule, Accumulation, Hyaline Droplet   |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Renal Tubule, Dilatation                      |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Renal Tubule, Pigmentation                    |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |

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 + .. Tissue examined microscopically  
 X .. Lesion present  
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 M .. Missing tissue  
 A .. Autolysis precludes evaluation  
 BLANK .. Not examined microscopically  
 1-4 .. Lesion qualified as:  
 1) Minimal 3) Moderate  
 2) Mild 4) Marked

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | ANIMAL ID | females<br>(cont...) |
|-------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|-----------|----------------------|
|                         | 0<br>7<br>3<br>3 | 0<br>6<br>7<br>5 | 0<br>6<br>5<br>9 | 0<br>7<br>3<br>3 | 0<br>6<br>2<br>9 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>1<br>0 | 0<br>6<br>4<br>4 | 0<br>7<br>3<br>6 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>6<br>5<br>6 | 0<br>6<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>4<br>2<br>6 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 |   |           |                      |
| 0 MG/KG                 | 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                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0 | 0         |                      |
|                         | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2 | 2         |                      |
|                         | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 2                | 2                | 2                | 2                | 2 | 2         |                      |
|                         | 1                | 2                | 3                | 4                | 5                | 6                | 7                | 8                | 9                | 0                | 1                | 2                | 3                | 4                | 5                | 6                | 7                | 8                | 9                | 0                | 1                | 2                | 3                | 4                | 5 |           |                      |

Transitional Epithelium, Hyperplasia

Urinary Bladder  
 Hemorrhage

+  
 3

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
 + .. Tissue examined microscopically M .. Missing tissue  
 X .. Lesion present A .. Autolysis precludes evaluation  
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 Lab: SRI

| DAY ON TEST | FISCHER 344 RATS FEMALE |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |      |      |      |
|-------------|-------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|------|------|
|             | 0736                    | 0738 | 0735 | 0733 | 0736 | 0731 | 0733 | 0733 | 0737 | 0732 | 0732 | 0730 | 0730 | 0734 | 0733 | 0732 | 0733 | 0734 | 0731 | 0732 |          | 0736 | 0737 | 0733 |
| 0 MG/KG     | 0022                    | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022     | 0022 | 0022 | 0022 |
| ANIMAL ID   | 67                      | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6    | 7        | 8    | 9    | 0    |

**ALIMENTARY SYSTEM**

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |             |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------------|
| Esophagus                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50          |
| Intestine Large, Cecum<br>Edema       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>2 2.0 |
| Intestine Large, Colon                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50          |
| Intestine Large, Rectum               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50          |
| Intestine Small, Duodenum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50          |
| Intestine Small, Ileum                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | 48          |
| Intestine Small, Jejunum              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | A | + | + | + | + | 46          |
| Liver                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50          |
| Angiectasis                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 1.0       |
| Basophilic Focus                      | X |   | X | X | X |   |   | X | X | X |   | X | X |   | X |   | X | X |   | X | X | X |   | X | 37          |
| Clear Cell Focus                      |   |   |   |   |   |   |   | X | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 6           |
| Eosinophilic Focus                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 5           |
| Hematopoietic Cell Proliferation      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 2.0       |
| Hepatodiaphragmatic Nodule            | X |   | X |   |   |   |   | X |   |   | X |   |   |   | X |   |   |   |   | X |   |   |   |   | 9           |
| Infiltration Cellular, Mixed Cell     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 6 1.8       |
| Mixed Cell Focus                      | X |   |   |   |   | X |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | X |   | X | 6           |
| Bile Duct, Hyperplasia                | 1 | 3 | 1 |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 5 1.6       |
| Centrilobular, Necrosis               |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   | 1 1.0       |
| Hepatocyte, Vacuolization Cytoplasmic |   |   |   |   |   |   | 3 |   | 2 |   |   |   |   |   | 4 |   |   | 2 |   |   |   | 2 |   |   | 6 2.5       |
| Kupffer Cell, Hyperplasia             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 3.0       |

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Methyl trans-styryl ketone

CAS Number: 1896-62-4

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First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE<br>0 MG/KG | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS         |
|------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|
|                                    | 0<br>7<br>3<br>6      | 0<br>7<br>0<br>8      | 0<br>6<br>0<br>5      | 0<br>7<br>3<br>6      | 0<br>7<br>3<br>6      | 0<br>6<br>2<br>9      | 0<br>7<br>1<br>4      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>6<br>7<br>7      | 0<br>0<br>2<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>2<br>2      | 0<br>5<br>5<br>4      | 0<br>6<br>3<br>3      | 0<br>7<br>3<br>6      | 0<br>7<br>3<br>0      | 0<br>6<br>4<br>1      | 0<br>7<br>3<br>2      | 0<br>6<br>4<br>6      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      |                       |                  |
| ANIMAL ID                          | 0<br>0<br>2<br>2<br>6 | 0<br>0<br>2<br>2<br>7 | 0<br>0<br>2<br>2<br>8 | 0<br>0<br>2<br>2<br>9 | 0<br>0<br>2<br>3<br>0 | 0<br>0<br>2<br>3<br>1 | 0<br>0<br>2<br>3<br>2 | 0<br>0<br>2<br>3<br>3 | 0<br>0<br>2<br>3<br>4 | 0<br>0<br>2<br>3<br>5 | 0<br>0<br>2<br>3<br>6 | 0<br>0<br>2<br>3<br>7 | 0<br>0<br>2<br>3<br>8 | 0<br>0<br>2<br>3<br>9 | 0<br>0<br>2<br>4<br>0 | 0<br>0<br>2<br>4<br>1 | 0<br>0<br>2<br>4<br>2 | 0<br>0<br>2<br>4<br>3 | 0<br>0<br>2<br>4<br>4 | 0<br>0<br>2<br>4<br>5 | 0<br>0<br>2<br>4<br>6 | 0<br>0<br>2<br>4<br>7 | 0<br>0<br>2<br>4<br>8 | 0<br>0<br>2<br>4<br>9 | 0<br>0<br>5<br>0 |
| Mesentery                          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 23               |
| Fibrosis                           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1 2.0            |
| Hemorrhage                         |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1 3.0            |
| Fat, Necrosis                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 22 3.0           |
| Pancreas                           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 49               |
| Atrophy                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 14 1.9           |
| Cyst                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 13               |
| Acinus, Cytoplasmic Alteration     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2 3.5            |
| Salivary Glands                    |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 50               |
| Atrophy                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3 1.7            |
| Cyst                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                |
| Stomach, Forestomach               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 50               |
| Edema                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3 3.0            |
| Inflammation, Chronic Active       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3 3.0            |
| Ulcer                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 4 3.8            |
| Epithelium, Hyperplasia            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 9 2.7            |
| Stomach, Glandular                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 50               |
| Edema                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1 2.0            |
| Erosion                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2 2.0            |
| Ulcer                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1 3.0            |
| <b>CARDIOVASCULAR SYSTEM</b>       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  |
| Heart                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 50               |
| Cardiomyopathy                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 36 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST | FISCHER 344 RATS FEMALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |
|-------------|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|             | 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 MG/KG     | 7                       | 7 | 6 | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 0 | 7 | 7 | 5 | 6 | 7 | 7 | 6 | 7 | 6 | 7 | 7 | 6 | 7 |          |
| ANIMAL ID   | 3                       | 0 | 0 | 3 | 3 | 2 | 1 | 3 | 3 | 7 | 2 | 3 | 2 | 5 | 5 | 3 | 3 | 3 | 4 | 0 | 3 | 4 | 3 | 3 |          |
|             | 6                       | 8 | 5 | 6 | 6 | 9 | 4 | 3 | 3 | 7 | 2 | 2 | 0 | 4 | 3 | 2 | 6 | 3 | 0 | 1 | 2 | 6 | 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 |          |
|             | 2                       | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |          |
|             | 2                       | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |          |
|             | 6                       | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |          |

**ENDOCRINE SYSTEM**

|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |    |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|----|
| Adrenal Cortex                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +      | 50 |
| Accessory Adrenal Cortical Nodule   |   |   |   |   |   |   |   |   |   |   | X | X |   | X | X |   |   |   |   |   | X | X |   | 10     |    |
| Degeneration, Fatty                 | 3 |   |   |   |   |   |   | 1 |   |   |   |   |   | 1 |   |   |   | 2 |   | 2 |   |   | 2 | 17 2.3 |    |
| Hyperplasia, Focal                  | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   | 1 |   | 5 1.4  |    |
| Hypertrophy, Focal                  |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   | 1 | 2 |   | 2 |   |   | 1 | 12 1.9 |    |
| Adrenal Medulla                     | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | 49     |    |
| Hyperplasia                         |   | 1 |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   | 5 1.8  |    |
| Islets, Pancreatic                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49     |    |
| Parathyroid Gland                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |    |
| Pituitary Gland                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |    |
| Pars Distalis, Angiectasis          |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   | 3 | 7 2.4  |    |
| Pars Distalis, Cyst                 | X | X | X | X | X |   |   | X | X |   |   |   | X |   |   |   |   |   |   |   | X | X |   | 22     |    |
| Pars Distalis, Hyperplasia, Focal   | 1 |   |   | 1 | 2 |   |   |   |   |   |   |   |   | 3 |   |   |   |   | 2 |   |   |   | 1 | 10 1.8 |    |
| Pars Intermedia, Angiectasis        |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 3.0  |    |
| Pars Intermedia, Cyst               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | 1      |    |
| Pars Intermedia, Hyperplasia, Focal |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0  |    |
| Thyroid Gland                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |    |
| Ultimobranchial Cyst                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 3.0  |    |
| C-cell, Hyperplasia                 |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   | 1 | 1 | 12 1.3 |    |

**GENERAL BODY SYSTEM**

|            |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
|------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|
| Tissue NOS | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |
|------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|

\* .. 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  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |
|-------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|                         | 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 MG/KG                 | 7           | 7 | 6 | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 0 | 7 | 7 | 5 | 6 | 7 | 7 | 6 | 7 | 7 | 6 | 7 | 7 | 7 |          |
|                         | 3           | 0 | 0 | 3 | 3 | 2 | 1 | 3 | 3 | 7 | 2 | 3 | 2 | 5 | 5 | 3 | 3 | 3 | 4 | 0 | 3 | 4 | 3 | 3 |          |
|                         | 6           | 8 | 5 | 6 | 6 | 9 | 4 | 3 | 3 | 7 | 2 | 2 | 0 | 4 | 3 | 2 | 6 | 3 | 0 | 1 | 2 | 6 | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
|                         | 2           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |          |
|                         | 2           | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |          |
|                         | 6           | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0        |

**GENITAL SYSTEM**

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|
| Clitoral Gland                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Cyst                           | X |   |   | X |   |   |   | X |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   | 6  |     |
| Hyperplasia                    |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   | 3  | 1.3 |
| Inflammation, Chronic          |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   | 2 |   |   |   | 3 |   |   |   |   |   | 9  | 2.3 |
| Ovary                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Cyst                           |   |   |   |   |   | X |   | X |   |   | X |   |   |   | X |   |   |   |   |   |   | X |   |   | 10 |     |
| Interstitial Cell, Hyperplasia |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 3.0 |
| Uterus                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Hyperplasia, Cystic            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 | 5  | 2.6 |
| Vagina                         |   | + |   |   |   | + |   |   |   |   |   |   |   | + |   |   |   |   | + |   |   |   |   |   | 6  |     |

**HEMATOPOIETIC SYSTEM**

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|
| Bone Marrow                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Hyperplasia                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   | 3 |   |   |   | 3  | 2.7 |
| Infiltration Cellular, Histiocyte  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 2.0 |
| Lymph Node                         |   | + |   |   |   |   |   |   |   |   | + |   |   | + | + |   |   |   | + | + |   |   | + | + | 16 |     |
| Bronchial, Hyperplasia, Lymphoid   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   | 1  | 3.0 |
| Mediastinal, Ectasia               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 3.0 |
| Mediastinal, Hemorrhage            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 3.0 |
| Mediastinal, Hyperplasia, Lymphoid |   |   |   |   |   |   |   |   |   | 2 |   |   |   | 2 |   |   |   |   |   | 2 |   |   |   |   | 5  | 2.4 |
| Mediastinal, Pigmentation          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   | 5  | 2.8 |
| Pancreatic, Ectasia                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 4.0 |
| Pancreatic, Pigmentation           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 3.0 |

\* .. 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  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
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 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>0 MG/KG | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |
|------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|                                    | 0<br>7<br>3<br>6      | 0<br>7<br>0<br>8      | 0<br>6<br>0<br>5      | 0<br>7<br>3<br>6      | 0<br>7<br>3<br>6      | 0<br>7<br>2<br>9      | 0<br>7<br>1<br>4      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>6<br>7<br>7      | 0<br>7<br>3<br>7      | 0<br>7<br>2<br>2      | 0<br>7<br>3<br>2      | 0<br>5<br>5<br>4      | 0<br>6<br>3<br>3      | 0<br>7<br>3<br>6      | 0<br>7<br>3<br>3      | 0<br>6<br>4<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>4<br>2      | 0<br>6<br>3<br>6      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      |                       |                       |
| ANIMAL ID                          | 0<br>0<br>2<br>2<br>6 | 0<br>0<br>2<br>2<br>7 | 0<br>0<br>2<br>2<br>8 | 0<br>0<br>2<br>2<br>9 | 0<br>0<br>2<br>3<br>0 | 0<br>0<br>2<br>3<br>1 | 0<br>0<br>2<br>3<br>2 | 0<br>0<br>2<br>3<br>3 | 0<br>0<br>2<br>3<br>4 | 0<br>0<br>2<br>3<br>5 | 0<br>0<br>2<br>3<br>6 | 0<br>0<br>2<br>3<br>7 | 0<br>0<br>2<br>3<br>8 | 0<br>0<br>2<br>3<br>9 | 0<br>0<br>2<br>4<br>0 | 0<br>0<br>2<br>4<br>1 | 0<br>0<br>2<br>4<br>2 | 0<br>0<br>2<br>4<br>3 | 0<br>0<br>2<br>4<br>4 | 0<br>0<br>2<br>4<br>5 | 0<br>0<br>2<br>4<br>6 | 0<br>0<br>2<br>4<br>7 | 0<br>0<br>2<br>4<br>8 | 0<br>0<br>2<br>4<br>9 | 0<br>0<br>2<br>5<br>0 |
| Lymph Node, Mandibular             | M                     | +                     | M                     | M                     | M                     | M                     | M                     | +                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | 3                     |
| Lymph Node, Mesenteric             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |
| Atrophy                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |                       | 1 2.0                 |                       |
| Hemorrhage                         |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |                       |                       |                       |                       |                       |                       |                       | 4 1.5                 |                       |
| Hyperplasia, Histiocytic           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1 3.0                 |                       |
| Hyperplasia, Lymphoid              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |                       |                       |                       |                       |                       | 2                     |                       | 3                     |                       |                       | 11 2.3                |                       |
| Pigmentation                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |                       |                       |                       | 3                     |                       |                       |                       |                       | 6 3.0                 |                       |
| Spleen                             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |
| Fibrosis                           |                       |                       | 3                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1 3.0                 |                       |
| Hematopoietic Cell Proliferation   | 2                     |                       |                       | 3                     | 2                     |                       |                       |                       | 2                     |                       | 2                     | 1                     |                       | 3                     | 2                     |                       |                       | 2                     | 2                     |                       | 1                     | 1                     | 1                     | 2                     | 33 1.9                |
| Hemorrhage                         |                       |                       |                       | 4                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1 4.0                 |                       |
| Necrosis                           |                       |                       |                       | 4                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2 4.0                 |                       |
| Pigmentation                       |                       |                       |                       |                       | 3                     |                       | 3                     |                       | 3                     |                       |                       |                       | 3                     |                       | 3                     |                       | 3                     |                       | 3                     | 3                     |                       |                       |                       | 15 3.0                |                       |
| Thymus                             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |
| <b>INTEGUMENTARY SYSTEM</b>        |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| Mammary Gland                      | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |
| Hyperplasia                        | 2                     | 3                     | 2                     | 3                     | 2                     | 3                     | 3                     | 3                     | 3                     |                       | 3                     | 3                     | 2                     | 4                     | 4                     | 2                     | 4                     | 3                     |                       | 4                     | 3                     | 3                     | 2                     | 4                     | 48 2.9                |
| Skin                               | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |
| Cyst Epithelial Inclusion          |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |
| Hyperkeratosis                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1 4.0                 |                       |
| Inflammation, Chronic              |                       |                       | 3                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |                       | 3                     |                       |                       |                       |                       |                       |                       | 5 3.2                 |                       |
| Ulcer                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     | 3 3.3                 |                       |
| Control, Hyperkeratosis            |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |                       |                       |                       |                       | 1                     |                       |                       |                       | 1                     | 1                     |                       |                       |                       |                       | 6 1.0                 |                       |
| Control, Epidermis, Hyperplasia    |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     | 1 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST | FISCHER 344 RATS FEMALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |
|-------------|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|             | 0                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
| 7           | 7                       | 6 | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 0 | 7 | 7 | 5 | 6 | 7 | 7 | 6 | 7 | 6 | 7 | 7        |
| 3           | 0                       | 0 | 3 | 3 | 2 | 1 | 3 | 3 | 7 | 2 | 3 | 2 | 5 | 5 | 3 | 3 | 4 | 0 | 3 | 4 | 3        |
| 6           | 8                       | 5 | 6 | 6 | 9 | 4 | 3 | 3 | 7 | 2 | 2 | 0 | 4 | 3 | 2 | 6 | 3 | 0 | 1 | 2 | 6        |
|             | 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 | 0 | 0 | 0        |
|             | 2                       | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2        |
|             | 2                       | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4        |
|             | 6                       | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6        |
|             | 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 | 0 | 0 | 0        |
|             | 2                       | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4        |
|             | 2                       | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4        |
|             | 6                       | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6        |

|   |   |  |  |  |   |  |   |  |  |   |  |  |  |  |   |  |   |   |  |  |   |           |            |
|---|---|--|--|--|---|--|---|--|--|---|--|--|--|--|---|--|---|---|--|--|---|-----------|------------|
| Control Epidermis, Hyperplasia              |   |  |  |  | 1 |  |   |  |  | 1 |  |  |  |  |   |  |   |   |  |  | 1 | <b>5</b>  | <b>1.0</b> |
| Epidermis, Hyperplasia                      | 4 |  |  |  |   |  |   |  |  |   |  |  |  |  | 4 |  | 3 |   |  |  | 3 | <b>10</b> | <b>3.3</b> |
| Epidermis, Ulcer                            |   |  |  |  |   |  |   |  |  |   |  |  |  |  |   |  |   |   |  |  | 1 | <b>1</b>  | <b>1.0</b> |
| Epidermis, Site Of Application, Hyperplasia |   |  |  |  |   |  |   |  |  |   |  |  |  |  |   |  |   |   |  |  |   | <b>1</b>  | <b>1.0</b> |
| Site Of Application, Hyperkeratosis         |   |  |  |  | 1 |  | 1 |  |  |   |  |  |  |  |   |  |   | 2 |  |  |   | <b>9</b>  | <b>1.1</b> |

**MUSCULOSKELETAL SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Bone            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Skeletal Muscle | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |

**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |            |            |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|------------|------------|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | <b>50</b>  |            |
| Compression      |   |   |   |   | 4 |   |   |   |   |   | 2 |   |   | 3 | 3 |   | 3 | 2 | 3 | 4 | 2 | <b>21</b> | <b>3.0</b> |            |
| Hemorrhage       |   |   |   |   |   |   |   |   |   | 1 | 1 |   |   |   |   |   |   |   |   | 3 |   | <b>8</b>  | <b>1.8</b> |            |
| Necrosis         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1         | <b>1</b>   | <b>2.0</b> |
| Peripheral Nerve |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1</b>   |            |
| Spinal Cord      |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1</b>   |            |

**RESPIRATORY SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |            |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|------------|
| Lung                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |            |
| Hemorrhage                        |   |   |   |   | 3 |   |   |   |   | 1 |   |   |   |   | 1 |   |   | 3 |   | 3 |   |   | <b>7</b>  | <b>2.1</b> |
| Infiltration Cellular, Histiocyte | 1 |   |   | 1 | 1 |   | 1 |   | 2 |   | 1 | 2 | 1 |   |   |   |   |   |   |   |   | 1 | <b>14</b> | <b>1.1</b> |
| Inflammation, Chronic             |   |   |   | 1 |   |   |   |   |   |   |   |   |   | 1 | 1 |   |   | 1 |   | 1 |   |   | <b>10</b> | <b>1.2</b> |
| Metaplasia, Osseous               | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  | <b>1.0</b> |
| Pigmentation                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   | 1 | <b>4</b>  | <b>1.5</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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| DAY ON TEST | FISCHER 344 RATS FEMALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |
|-------------|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|             | 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 MG/KG     | 7                       | 7 | 6 | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 0 | 7 | 7 | 5 | 6 | 7 | 7 | 6 | 7 | 6 | 7 | 7 | 6 | 7 |          |
| ANIMAL ID   | 3                       | 0 | 0 | 3 | 3 | 2 | 1 | 3 | 3 | 7 | 2 | 3 | 2 | 5 | 5 | 3 | 3 | 3 | 4 | 0 | 3 | 4 | 3 | 3 |          |
|             | 6                       | 8 | 5 | 6 | 6 | 9 | 4 | 3 | 3 | 7 | 2 | 2 | 0 | 4 | 3 | 2 | 6 | 3 | 0 | 1 | 2 | 6 | 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 |          |
|             | 2                       | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |          |
|             | 2                       | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |          |
|             | 6                       | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |          |

Alveolar Epithelium, Hyperplasia 5 1.2  
 Serosa, Hyperplasia 2 1 2.0

Nose + + + + + + + + + + + + + + + + + A + A + + + 48  
 Foreign Body X 2  
 Inflammation, Chronic 1 1 1 8 1.1  
 Olfactory Epithelium, Metaplasia, Respiratory 1 2 1.0  
 Respiratory Epithelium, Hyperplasia 1 5 1.2  
 Respiratory Epithelium, Metaplasia, Squamous 1 1 1.0

Trachea + 50

**SPECIAL SENSES SYSTEM**

Eye + 50  
 Cataract 3 2 2 2.5  
 Retina, Degeneration 4 3 3 4 3.0  
 Harderian Gland + 50  
 Atrophy 1 2.0  
 Hyperplasia, Focal 1 2 1.0

**URINARY SYSTEM**

Kidney + 50  
 Inflammation, Chronic 3 2 2 4 2.3  
 Metaplasia, Lipocyte 1 3.0  
 Nephropathy 2 1 1 1 1 3 3 1 4 3 1 1 3 3 1 2 2 2 1 2 1 2 45 1.8  
 Renal Tubule, Accumulation, Hyaline Droplet 3 1 3.0  
 Renal Tubule, Dilatation 3 1 3.0  
 Renal Tubule, Pigmentation 2 1 2.0

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
 + .. Tissue examined microscopically M .. Missing tissue  
 X .. Lesion present A .. Autolysis precludes evaluation  
 I .. Insufficient tissue BLANK .. Not examined microscopically  
 1-4 .. Lesion qualified as:  
 1) Minimal 3) Moderate  
 2) Mild 4) Marked

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST                          | FISCHER 344 RATS FEMALE |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |    |     |     |
|--------------------------------------|-------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|----|-----|-----|
|                                      | 0736                    | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   | 0736   |          |    |     |     |
| ANIMAL ID                            | 0 MG/KG                 |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |    |     |     |
| 002226                               | 002226                  | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 | 002226 |          |    |     |     |
| Transitional Epithelium, Hyperplasia |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2        | 1  | 2.0 |     |
| Urinary Bladder Hemorrhage           | +                       | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50 | 1   | 3.0 |

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
 + .. Tissue examined microscopically  
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 M .. Missing tissue  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
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**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID | females<br>(cont...) |
|-------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|----------------------|
|                         | 0736        | 0734 | 0732 | 0730 | 0728 | 0726 | 0724 | 0722 | 0720 | 0718 | 0716 | 0714 | 0712 | 0710 | 0708 | 0706 | 0704 | 0702 | 0700 | 0698 | 0696 | 0694 | 0692 | 0690 |           |                      |
| 10 MG/KG                | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0051      |                      |

**CARDIOVASCULAR SYSTEM**

Blood Vessel

Heart

Cardiomyopathy

Thrombosis

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| 2 |   |   | 3 | 2 | 3 |   | 2 |   | 3 | 2 | 1 | 2 |   | 2 | 2 |   | 1 | 1 | 1 | 1 | 2 | 2 | 1 |   |
|   | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |

**ENDOCRINE SYSTEM**

Adrenal Cortex

Accessory Adrenal Cortical Nodule

Atrophy

Degeneration, Fatty

Hyperplasia, Focal

Hypertrophy, Focal

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| X |   | X |   | X |   |   |   | X |   | X | X |   |   | X |   | X | X |   | X |   |   |   | X |
| 4 | 3 |   | 3 | 2 | 3 |   |   | 4 | 2 |   |   |   |   |   |   |   | 1 | 1 | 1 | 1 |   |   |   |
| 3 |   |   |   |   |   |   |   |   |   | 2 |   | 3 |   | 2 |   |   | 1 |   |   | 2 |   |   |   |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 | 1 | 1 |   |   |   |

Adrenal Medulla

Hyperplasia

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|   |   |   |   |   |   |   |   | 3 |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |

Islets, Pancreatic

Hyperplasia

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

Parathyroid Gland

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

Pituitary Gland

Pars Distalis, Angiectasis

Pars Distalis, Cyst

Pars Distalis, Cytoplasmic Alteration, Focal

Pars Distalis, Hyperplasia, Focal

Pars Intermedia, Angiectasis

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|   |   | X | X |   |   | X |   |   |   | X |   |   |   | X |   |   |   |   |   |   |   |   | X |
|   |   |   |   |   |   | 3 |   |   |   | 2 |   |   |   |   |   |   |   | 3 |   |   |   |   |   |

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

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M .. Missing tissue

A .. Autolysis precludes evaluation

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2) Mild 4) Marked



TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>10 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | ANIMAL ID             | females<br>(cont...) |
|-------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|-----------------------|----------------------|
|                                     | 0<br>7<br>3<br>6 | 0<br>7<br>2<br>4 | 0<br>3<br>7<br>2 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>6 | 0<br>7<br>1<br>5 | 0<br>7<br>3<br>6 | 0<br>7<br>0<br>8 | 0<br>7<br>0<br>3 | 0<br>7<br>3<br>6 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>1<br>6 | 0<br>7<br>3<br>6 | 0<br>5<br>3<br>2 | 0<br>5<br>9<br>1 | 0<br>7<br>3<br>6 | 0<br>6<br>4<br>2 | 0<br>6<br>3<br>2 | 0<br>7<br>3<br>3 | 0<br>5<br>7<br>8 | 0<br>7<br>3<br>6 | 0<br>6<br>2<br>4 | 0<br>7<br>3<br>6 |   |                       |                      |
|                                     | 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<br>0<br>2<br>5<br>1 |                      |

Pars Intermedia, Cyst

X

Thyroid Gland

+ +

C-cell, Hyperplasia

1

1

2

2

1

Follicle, Cyst

Follicular Cell, Hyperplasia

1

**GENERAL BODY SYSTEM**

Tissue NOS

**GENITAL SYSTEM**

Clitoral Gland

+ +

Cyst

X

X

Hyperplasia

1

Inflammation, Chronic

3

3

Ovary

+ +

Cyst

X

X

X

X

Uterus

+ +

Hyperplasia, Cystic

3

2

Vagina

+

+

+

+

Cyst

X

**HEMATOPOIETIC SYSTEM**

Bone Marrow

+ +

Angiectasis

3

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

+ .. Tissue examined microscopically

M .. Missing tissue

1-4 .. Lesion qualified as:

X .. Lesion present

A .. Autolysis precludes evaluation

1) Minimal 3) Moderate

I .. Insufficient tissue

BLANK .. Not examined microscopically

2) Mild 4) Marked

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>10 MG/KG  | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | females<br>(cont...) |
|--------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------------------|
|                                      | 0<br>7<br>3<br>6 | 0<br>7<br>2<br>4 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>6 | 0<br>7<br>1<br>5 | 0<br>7<br>3<br>6 | 0<br>7<br>0<br>8 | 0<br>7<br>0<br>3 | 0<br>7<br>3<br>6 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>1<br>6 | 0<br>7<br>3<br>6 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>7 | 0<br>7<br>3<br>9 | 0<br>7<br>3<br>1 | 0<br>7<br>4<br>6 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>8 | 0<br>7<br>3<br>6 | 0<br>7<br>3<br>4 | 0<br>7<br>2<br>2 |           |                      |
| Hyperplasia                          | 2                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Infiltration Cellular, Histiocyte    |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Myelofibrosis                        |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Lymph Node                           |                  | +                |                  | +                |                  |                  |                  |                  | +                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Deep Cervical, Hemorrhage            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Deep Cervical, Pigmentation          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Mediastinal, Ectasia                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Mediastinal, Hemorrhage              |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Mediastinal, Hyperplasia, Lymphoid   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Mediastinal, Pigmentation            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Pancreatic, Ectasia                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Pancreatic, Hemorrhage               |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Pancreatic, Hyperplasia, Histiocytic |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Pancreatic, Pigmentation             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Lymph Node, Mandibular               | M                | M                | M                | M                | M                | +                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M                | M         | M                    |
| Ectasia                              |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Hemorrhage                           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Hyperplasia, Lymphoid                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Lymph Node, Mesenteric               | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    |
| Ectasia                              |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Hemorrhage                           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Hyperplasia, Histiocytic             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |
| Hyperplasia, Lymphoid                | 2                |                  | 2                |                  |                  |                  | 2                |                  | 2                |                  |                  |                  |                  | 3                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 3         |                      |
| Pigmentation                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           | 3                    |
| Spleen                               | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    |
| Hematopoietic Cell Proliferation     | 3                |                  | 1                | 2                |                  |                  | 2                | 2                | 2                | 3                | 3                |                  | 1                | 3                | 2                | 2                |                  | 3                | 2                |                  |                  | 2                | 1                |                  |                  | 2         |                      |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | females<br>(cont...) |
|-------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|--|----------------------|
|                         | 0<br>7<br>3<br>6 | 0<br>7<br>2<br>4 | 0<br>3<br>7<br>2 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>6 | 0<br>7<br>1<br>5 | 0<br>7<br>3<br>6 | 0<br>7<br>0<br>8 | 0<br>7<br>0<br>3 | 0<br>7<br>3<br>6 | 0<br>7<br>3<br>3 | 0<br>7<br>1<br>6 | 0<br>7<br>3<br>6 | 0<br>5<br>3<br>2 | 0<br>5<br>9<br>1 | 0<br>7<br>3<br>6 | 0<br>6<br>4<br>2 | 0<br>6<br>3<br>2 | 0<br>7<br>3<br>3 | 0<br>5<br>7<br>8 | 0<br>7<br>3<br>6 | 0<br>6<br>2<br>4 | 0<br>5<br>3<br>2 |  |                      |
| 10 MG/KG                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 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                | 0                | 0                | 0                |  |                      |
| 2                       | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 2                |  |                      |
| 5                       | 5                | 5                | 5                | 5                | 5                | 5                | 5                | 5                | 5                | 6                | 6                | 6                | 6                | 6                | 6                | 6                | 6                | 6                | 7                | 7                | 7                | 7                | 7                |  |                      |
| 1                       | 2                | 3                | 4                | 5                | 6                | 7                | 8                | 9                | 0                | 1                | 2                | 3                | 4                | 5                | 6                | 7                | 8                | 9                | 0                | 1                | 2                | 3                | 4                |  | 5                    |

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Necrosis     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Pigmentation | 3 |   |   | 3 |   |   | 3 |   |   | 3 |   |   | 3 |   |   | 3 |   |   | 3 |   |   | 3 |   |  |
| Thymus       | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + |  |
| Atrophy      |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |  |

**INTEGUMENTARY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |   |
| Hyperplasia                                 | 2 | 3 |   | 1 | 3 | 3 | 3 | 2 | 3 | 3 | 3 | 2 | 2 | 2 | 4 | 3 | 3 | 3 | 2 | 1 | 2 | 4 | 3 | 3 | 2 |
| Inflammation, Chronic                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   | 4 |   |
| Skin  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Hyperkeratosis                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 |   |   |   |   |
| Inflammation, Chronic                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |
| Ulcer                                       |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |
| Control, Hyperkeratosis                     |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Control Epidermis, Hyperplasia              | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Epidermis, Hyperplasia                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   | 3 | 3 |   |   |
| Epidermis, Site Of Application, Hyperplasia |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |
| Site Of Application, Hyperkeratosis         |   |   |   |   |   |   | 1 | 1 | 1 | 1 |   |   |   |   |   | 1 |   |   |   | 1 |   |   |   |   |   |

**MUSCULOSKELETAL SYSTEM**

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Femur, Osteopetrosis |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Skeletal Muscle      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**NERVOUS SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
 + .. Tissue examined microscopically  
 X .. Lesion present  
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 Lab: SRI

| FISCHER 344 RATS FEMALE<br>10 MG/KG | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID | females<br>(cont...) |
|-------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|----------------------|
|                                     | 0736        | 0734 | 0732 | 0733 | 0735 | 0737 | 0736 | 0738 | 0739 | 0730 | 0731 | 0732 | 0733 | 0734 | 0735 | 0736 | 0737 | 0738 | 0739 | 0740 | 0741 | 0742 | 0743 | 0744 |           |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0051      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0052      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0053      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0054      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0055      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0056      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0057      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0058      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0059      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0060      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0061      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0062      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0063      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0064      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0065      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0066      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0067      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0068      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0069      |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0070      |                      |

Brain +  
 Compression 1 1 4 3 3 2 4 3 3  
 Hemorrhage  
 Necrosis

Peripheral Nerve +

Spinal Cord +  
 Atrophy

**RESPIRATORY SYSTEM**

Lung +  
 Edema 2  
 Hemorrhage 1  
 Infiltration Cellular, Histiocyte 2 1 1 1 3 1 3 1  
 Inflammation, Chronic 1 1 1 2 1  
 Metaplasia, Osseous 1  
 Pigmentation 1 3 2  
 Alveolar Epithelium, Hyperplasia 2

Nose +  
 Foreign Body  
 Inflammation, Chronic 2

Trachea +

**SPECIAL SENSES SYSTEM**

Eye +  
 Cataract 3

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
 + .. Tissue examined microscopically M .. Missing tissue 1-4 .. Lesion qualified as:  
 X .. Lesion present A .. Autolysis precludes evaluation 1) Minimal 3) Moderate  
 I .. Insufficient tissue BLANK .. Not examined microscopically 2) Mild 4) Marked

TDMS No. 95003 - 05  
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| FISCHER 344 RATS FEMALE<br>10 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | ANIMAL ID        | females<br>(cont...) |
|-------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|------------------|----------------------|
|                                     | 0<br>7<br>3<br>6 | 0<br>7<br>2<br>4 | 0<br>3<br>7<br>2 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>6 | 0<br>7<br>1<br>5 | 0<br>7<br>3<br>6 | 0<br>7<br>0<br>8 | 0<br>7<br>0<br>3 | 0<br>7<br>3<br>6 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>1<br>6 | 0<br>7<br>3<br>6 | 0<br>5<br>3<br>2 | 0<br>5<br>9<br>1 | 0<br>7<br>3<br>6 | 0<br>6<br>4<br>2 | 0<br>6<br>3<br>2 | 0<br>7<br>3<br>3 | 0<br>5<br>7<br>8 | 0<br>7<br>3<br>6 | 0<br>6<br>2<br>4 | 0<br>0<br>0<br>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<br>0<br>5<br>1 |                      |

Inflammation, Acute  
 Inflammation, Chronic Active  
 Retina, Degeneration

4

Harderian Gland  
 Atrophy  
 Hyperplasia, Focal  
 Inflammation, Chronic

+ +

1 1

**URINARY SYSTEM**

Kidney  
 Cyst  
 Inflammation, Chronic  
 Inflammation, Chronic Active  
 Nephropathy  
 Renal Tubule, Accumulation, Hyaline Droplet  
 Renal Tubule, Pigmentation

+ +

2  
 2 1 2 3 1 1 1 3 2 1 3 1 2 3 3 1 1 2 1 2 2 1  
 2 2  
 3

Urinary Bladder  
 Metaplasia, Squamous

+ +

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |  | * TOTALS |
|-------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|--|----------|
|                         | 04          | 07   | 07   | 07   | 07   | 07   | 06   | 05   | 07   | 07   | 05   | 05   | 06   | 06   | 07   | 07   | 07   | 05   | 07   | 06   | 07   | 07   | 07   |  |          |
| 10 MG/KG                | 93          | 76   | 73   | 73   | 30   | 86   | 57   | 32   | 36   | 55   | 00   | 00   | 66   | 69   | 36   | 33   | 13   | 47   | 32   | 15   | 36   | 33   | 33   |  |          |
| ANIMAL ID               | 0076        | 0077 | 0078 | 0079 | 0080 | 0081 | 0082 | 0083 | 0084 | 0085 | 0086 | 0087 | 0088 | 0089 | 0090 | 0091 | 0092 | 0093 | 0094 | 0095 | 0096 | 0097 | 0098 |  |          |

**ALIMENTARY SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |             |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------------|
| Esophagus                         | + | + | + | + | + | + | + | + | M | + | I | + | + | + | + | + | + | + | + | + | + | + | + | + | 47          |
| Intestine Large, Cecum Edema      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>3 2.7 |
| Intestine Large, Colon            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50          |
| Intestine Large, Rectum           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50          |
| Intestine Small, Duodenum         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50          |
| Intestine Small, Ileum            | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48          |
| Intestine Small, Jejunum          | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | 45          |
| Liver                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50          |
| Angiectasis                       |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 1.5       |
| Basophilic Focus                  |   | X | X | X | X | X |   |   | X | X | X |   | X | X |   | X | X |   | X |   | X | X |   |   | 37          |
| Clear Cell Focus                  |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | X |   | 10          |
| Degeneration, Cystic              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 3.0       |
| Eosinophilic Focus                |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | 3           |
| Hematopoietic Cell Proliferation  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 1.0       |
| Hemorrhage                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 3.0       |
| Hepatodiaphragmatic Nodule        | X |   |   |   |   |   |   | X |   |   | X |   |   |   |   |   |   | X |   |   |   |   |   |   | 6           |
| Infiltration Cellular, Mixed Cell |   |   | 3 |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   | 1 |   |   |   |   | 7 1.4       |
| Mixed Cell Focus                  |   |   |   | X |   |   |   |   | X | X |   |   |   |   |   |   | X |   |   |   |   | X |   |   | 11          |
| Necrosis, Focal                   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   | 2 1.0       |
| Necrosis, Diffuse                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0       |

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 + .. Tissue examined microscopically  
 X .. Lesion present  
 I .. Insufficient tissue  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>10 MG/KG   | DAY ON TEST          |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | * TOTALS             |                      |
|---------------------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
|                                       | 04<br>09<br>33       | 07<br>27<br>36       | 07<br>73<br>33       | 07<br>73<br>36       | 07<br>73<br>22       | 07<br>73<br>36       | 06<br>58<br>76       | 05<br>75<br>72       | 07<br>73<br>26       | 07<br>73<br>56       | 05<br>53<br>50       | 05<br>52<br>00       | 06<br>61<br>66       | 06<br>67<br>99       | 07<br>73<br>66       | 07<br>73<br>36       | 07<br>73<br>37       | 05<br>54<br>27       | 07<br>63<br>15       | 06<br>73<br>63       |                      | 07<br>73<br>33       |
| ANIMAL ID                             | 00<br>00<br>27<br>66 | 00<br>00<br>77<br>77 | 00<br>00<br>77<br>77 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 | 00<br>00<br>88<br>88 |
| Bile Duct, Hyperplasia                |                      |                      |                      |                      | 1                    |                      |                      |                      |                      | 1                    |                      |                      |                      |                      |                      |                      |                      | 1                    | 3                    |                      |                      | 6 1.5                |
| Centrilobular, Necrosis               |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 3                    |                      |                      | 3 2.7                |
| Hepatocyte, Hyperplasia, Focal        |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 3                    |                      | 3 2.3                |
| Hepatocyte, Vacuolization Cytoplasmic |                      |                      |                      |                      | 2                    |                      |                      |                      |                      |                      |                      |                      | 4                    |                      |                      |                      |                      |                      |                      |                      |                      | 6 2.8                |
| Kupffer Cell, Hyperplasia             |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 1 3.0                |
| Kupffer Cell, Pigmentation            |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 1 2.0                |
| Mesentery                             |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 18                   |
| Fat, Necrosis                         |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 17 2.9               |
| Pancreas                              |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 50                   |
| Atrophy                               |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 8 1.5                |
| Cyst                                  |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 16                   |
| Acinus, Cytoplasmic Alteration        |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 2 2.0                |
| Acinus, Hyperplasia, Focal            |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 1 1.0                |
| Salivary Glands                       |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 50                   |
| Atrophy                               |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 2 1.0                |
| Stomach, Forestomach                  |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 50                   |
| Edema                                 |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 5 2.6                |
| Hyperplasia                           |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 1 2.0                |
| Inflammation, Chronic Active          |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 2 3.0                |
| Ulcer                                 |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 8 3.5                |
| Epithelium, Hyperplasia               |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 3 3.3                |
| Stomach, Glandular                    |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 50                   |
| Edema                                 |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 2 2.0                |
| Erosion                               |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 4 2.0                |
| Ulcer                                 |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      |                      | 1 1.0                |

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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE | DAY ON TEST |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | * TOTALS |    |    |
|-------------------------|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|----|----|
|                         | 04          | 07 | 07 | 07 | 07 | 07 | 06 | 05 | 07 | 07 | 05 | 05 | 05 | 06 | 06 | 07 | 07 | 07 | 05 | 07 |          | 06 | 07 |
| 10 MG/KG                | 93          | 76 | 73 | 73 | 30 | 78 | 57 | 32 | 36 | 55 | 00 | 00 | 00 | 06 | 06 | 03 | 03 | 01 | 03 | 04 | 03       | 01 | 03 |
| ANIMAL ID               | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00       | 00 | 00 |
|                         | 27          | 27 | 27 | 27 | 88 | 88 | 88 | 88 | 88 | 88 | 88 | 88 | 88 | 88 | 99 | 99 | 99 | 99 | 99 | 99 | 99       | 99 | 99 |
|                         | 66          | 67 | 68 | 69 | 00 | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 00 | 01 | 02 | 03 | 04 | 05 | 06       | 07 | 08 |

**CARDIOVASCULAR SYSTEM**

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |    |     |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|----|-----|
| Blood Vessel   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + | 1 |    |   |    |     |
| Heart          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |    |     |
| Cardiomyopathy | 1 | 2 |   | 3 | 3 | 1 |   |   | 2 | 3 |   |   | 1 |   | 1 | 1 | 2 | 2 | 2 |   | 1 | 3 | 3  | 2 | 35 | 1.9 |
| Thrombosis     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |    |   | 3  | 3.0 |

**ENDOCRINE SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|
| Adrenal Cortex                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Accessory Adrenal Cortical Nodule            | X | X | X |   |   |   |   |   | X | X |   |   | X | X |   |   | X |   |   |   |   |   |   | 19 |     |
| Atrophy                                      |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 3.0 |
| Degeneration, Fatty                          |   | 2 |   |   | 3 | 1 | 3 |   | 1 | 2 |   |   |   |   |   | 3 |   |   | 2 | 1 | 3 |   | 1 | 22 | 2.1 |
| Hyperplasia, Focal                           |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 7  | 2.0 |
| Hypertrophy, Focal                           |   |   |   |   | 3 | 3 |   |   | 1 | 2 |   |   |   |   | 2 |   | 3 |   | 2 |   |   |   | 2 | 11 | 1.9 |
| Adrenal Medulla                              | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | 49 |     |
| Hyperplasia                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   | 3  | 1.7 |
| Islets, Pancreatic                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Hyperplasia                                  |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  | 1.5 |
| Parathyroid Gland                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Pituitary Gland                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |     |
| Pars Distalis, Angiectasis                   |   |   |   |   |   | 4 |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   | 2  | 3.5 |
| Pars Distalis, Cyst                          | X |   | X | X |   |   | X |   | X |   |   |   |   |   | X |   |   |   | X | X |   |   |   | 14 |     |
| Pars Distalis, Cytoplasmic Alteration, Focal |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 3.0 |
| Pars Distalis, Hyperplasia, Focal            | 2 |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  | 2.3 |
| Pars Intermedia, Angiectasis                 |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 2.0 |

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 + .. Tissue examined microscopically  
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 I .. Insufficient tissue  
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 BLANK .. Not examined microscopically  
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 2) Mild 4) Marked



TDMS No. 95003 - 05  
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 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE<br>10 MG/KG | DAY ON TEST |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | * TOTALS |    |    |
|-------------------------------------|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|----|----|
|                                     | 04          | 07 | 07 | 07 | 07 | 07 | 06 | 05 | 07 | 07 | 05 | 05 | 05 | 06 | 06 | 07 | 07 | 07 | 05 | 07 |          | 06 | 07 |
| ANIMAL ID                           | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00       | 00 | 00 |
|                                     | 22          | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22       | 22 | 23 |
|                                     | 77          | 77 | 77 | 77 | 88 | 88 | 88 | 88 | 88 | 88 | 88 | 88 | 88 | 88 | 99 | 99 | 99 | 99 | 99 | 99 | 99       | 99 | 00 |
|                                     | 66          | 67 | 68 | 69 | 00 | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 00 | 01 | 02 | 03 | 04 | 05 | 06       | 07 | 08 |

Pars Intermedia, Cyst X 2

Thyroid Gland + 50  
 C-cell, Hyperplasia 3 1 1 1 10 1.4  
 Follicle, Cyst X X 2  
 Follicular Cell, Hyperplasia 1 1.0

**GENERAL BODY SYSTEM**

Tissue NOS + 1

**GENITAL SYSTEM**

Clitoral Gland + 50  
 Cyst 2  
 Hyperplasia 1 1.0  
 Inflammation, Chronic 2 3 2 5 2.6

Ovary + 50  
 Cyst X X X 7

Uterus + 50  
 Hyperplasia, Cystic 3 3 4 2.8

Vagina + 6  
 Cyst 1

**HEMATOPOIETIC SYSTEM**

Bone Marrow + 50  
 Angiectasis 1 3.0

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
 + .. Tissue examined microscopically M .. Missing tissue 1-4 .. Lesion qualified as:  
 X .. Lesion present A .. Autolysis precludes evaluation 1) Minimal 3) Moderate  
 I .. Insufficient tissue BLANK .. Not examined microscopically 2) Mild 4) Marked

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| FISCHER 344 RATS FEMALE<br>10 MG/KG  | DAY ON TEST |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |        | * TOTALS |
|--------------------------------------|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|--------|----------|
|                                      | 04          | 07 | 07 | 07 | 07 | 07 | 06 | 05 | 07 | 07 | 05 | 05 | 06 | 06 | 07 | 07 | 07 | 05 | 07 | 06 | 07 | 07 | 07 |        |          |
| ANIMAL ID                            | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 |        |          |
|                                      | 27          | 27 | 27 | 27 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 29 | 29 | 29 | 29 | 29 | 29 | 29 | 29 | 29 |        |          |
|                                      | 67          | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 89 |        |          |
| Hyperplasia                          |             |    |    |    |    |    |    |    |    | 3  |    | 4  |    |    |    |    |    |    |    |    |    |    |    | 6 2.7  |          |
| Infiltration Cellular, Histiocyte    |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1 2.0  |          |
| Myelofibrosis                        |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 2  |    |    |    | 1 2.0  |          |
| Lymph Node                           | +           |    |    |    |    |    |    | +  |    |    |    |    |    | +  | +  |    |    |    |    |    |    |    | +  | 13     |          |
| Deep Cervical, Hemorrhage            |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1 2.0  |          |
| Deep Cervical, Pigmentation          |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1 3.0  |          |
| Mediastinal, Ectasia                 |             |    |    |    |    |    |    |    |    |    |    | 3  |    |    |    |    |    |    |    |    |    |    |    | 1 3.0  |          |
| Mediastinal, Hemorrhage              | 3           |    |    |    |    |    |    |    |    |    |    |    |    |    | 1  |    | 3  |    |    |    |    |    |    | 6 2.3  |          |
| Mediastinal, Hyperplasia, Lymphoid   |             |    |    |    |    |    |    |    |    |    |    | 2  |    |    | 3  |    | 2  |    |    |    |    |    |    | 5 2.4  |          |
| Mediastinal, Pigmentation            | 3           |    |    |    |    |    |    |    |    |    |    |    |    |    | 2  |    | 3  |    |    |    |    |    |    | 8 2.8  |          |
| Pancreatic, Ectasia                  |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1 2.0  |          |
| Pancreatic, Hemorrhage               |             |    |    |    |    |    |    |    |    |    |    | 1  |    |    |    |    |    |    |    |    |    |    |    | 1 1.0  |          |
| Pancreatic, Hyperplasia, Histiocytic |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1 3.0  |          |
| Pancreatic, Pigmentation             |             |    |    |    |    |    |    |    |    |    |    | 3  |    |    |    |    |    |    |    |    |    |    |    | 2 3.0  |          |
| Lymph Node, Mandibular               | M           | M  | M  | M  | M  | M  | M  | M  | M  | M  | M  | M  | M  | M  | M  | M  | M  | M  | M  | M  | M  | M  | M  | 2      |          |
| Ectasia                              |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 3  |    |    | 1 3.0  |          |
| Hemorrhage                           |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1 3.0  |          |
| Hyperplasia, Lymphoid                |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1 2.0  |          |
| Lymph Node, Mesenteric               | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | I  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | 49     |          |
| Ectasia                              |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1 2.0  |          |
| Hemorrhage                           |             |    |    |    |    |    |    |    |    | 2  |    |    |    |    | 1  |    |    |    |    |    |    |    |    | 5 2.0  |          |
| Hyperplasia, Histiocytic             |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1 2.0  |          |
| Hyperplasia, Lymphoid                |             |    |    |    |    |    |    |    |    |    | 2  |    |    | 2  | 2  |    |    | 2  | 2  | 2  |    |    |    | 12 2.2 |          |
| Pigmentation                         |             |    |    |    |    |    |    |    |    | 3  |    |    |    |    |    |    |    |    |    |    |    | 3  |    | 3 3.0  |          |
| Spleen                               | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | 50     |          |
| Hematopoietic Cell Proliferation     | 2           | 1  | 2  | 2  | 2  |    |    |    |    | 2  | 2  | 3  | 2  | 4  | 2  |    | 2  | 2  | 2  | 2  |    | 2  | 3  | 34 2.1 |          |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>10 MG/KG | DAY ON TEST |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | * TOTALS |    |    |    |
|-------------------------------------|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|----|----|----|
|                                     | 04          | 07 | 07 | 07 | 07 | 07 | 06 | 05 | 07 | 07 | 05 | 05 | 05 | 06 | 06 | 07 | 07 | 07 | 05 | 07 |          | 06 | 07 | 07 |
| ANIMAL ID                           | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00       | 00 | 00 | 00 |
|                                     | 02          | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02       | 02 | 02 | 02 |
|                                     | 07          | 07 | 07 | 07 | 08 | 08 | 08 | 08 | 08 | 08 | 08 | 08 | 08 | 08 | 09 | 09 | 09 | 09 | 09 | 09 | 09       | 09 | 09 | 09 |
|                                     | 06          | 07 | 08 | 09 | 00 | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 00 | 01 | 02 | 03 | 04 | 05 | 06       | 07 | 08 | 09 |

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |     |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|-----|
| Necrosis       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 | 1  | 4.0 |     |
| Pigmentation   | 3 | 3 |   |   |   |   |   | 3 |   |   |   | 3 |   |   |   |   |   |   | 4 |   |   |   |   |   | 3 | 12 | 3.1 |     |
| Thymus Atrophy | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 | 1   | 3.0 |

**INTEGUMENTARY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |     |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|-----|
| Mammary Gland Hyperplasia Inflammation, Chronic   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 | 48 | 2.7 |
|   |   | 3 | 4 | 2 | 3 | 2 | 2 | 2 | 3 | 4 | 2 | 3 | 3 | 2 | 4 | 2 | 3 | 4 | 3 | 3 | 2 | 4 | 3 | 3 | 2 |    | 2  | 3.5 |
| Skin Hyperkeratosis Inflammation, Chronic Ulcer Control, Hyperkeratosis Control Epidermis, Hyperplasia Epidermis, Hyperplasia Epidermis, Site Of Application, Hyperplasia Site Of Application, Hyperkeratosis | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 | 1  | 4.0 |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  | 3.0 |
|   |   |   |   | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 |    | 4  | 3.5 |
|   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   | 1 |   |   |   |   | 1 |   |   |   |   | 1 |    | 5  | 1.0 |
|   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   | 1 |    | 4  | 1.0 |
|   |   |   |   |   | 4 |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   | 4 |    | 5  | 3.4 |
|   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  | 1.0 |
|   |   |   | 1 | 1 | 1 |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 11 | 1.0 |

**MUSCULOSKELETAL SYSTEM**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |   |     |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|---|-----|
| Bone Femur, Osteopetrosis | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |   |     |
|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 | 2 | 2.5 |
| Skeletal Muscle           | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   | 1 |     |

**NERVOUS 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>10 MG/KG | DAY ON TEST |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |  | * TOTALS |
|-------------------------------------|-------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--|----------|
|                                     | 04          | 07  | 07  | 07  | 07  | 07  | 06  | 05  | 07  | 07  | 05  | 05  | 05  | 06  | 06  | 07  | 07  | 07  | 05  | 07  | 06  | 07  | 07  |  |          |
| ANIMAL ID                           | 093         | 026 | 073 | 073 | 072 | 073 | 066 | 057 | 072 | 076 | 053 | 053 | 050 | 066 | 069 | 076 | 073 | 073 | 054 | 073 | 061 | 073 | 073 |  |          |
|                                     | 00          | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  | 00  |  |          |
|                                     | 276         | 277 | 277 | 277 | 288 | 288 | 288 | 288 | 288 | 288 | 288 | 288 | 288 | 288 | 299 | 299 | 299 | 299 | 299 | 299 | 299 | 299 | 299 |  |          |
|                                     | 67          | 78  | 83  | 86  | 90  | 91  | 92  | 93  | 94  | 95  | 96  | 97  | 98  | 99  | 00  | 01  | 02  | 03  | 04  | 05  | 06  | 07  | 08  |  |          |

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |     |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|-----|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |     |
| Compression      |   | 3 |   |   | 1 |   | 3 | 3 |   | 3 |   | 4 |   | 3 | 3 |   | 1 | 4 | 2 | 1 |   | 3 | 3 | 1  | 28 | 2.6 |
| Hemorrhage       |   | 3 |   |   |   |   |   |   |   |   |   |   |   | 4 | 2 |   |   |   |   |   |   |   |   |    | 3  | 3.0 |
| Necrosis         |   | 3 |   |   | 1 |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |    | 3  | 2.0 |
| Peripheral Nerve | + |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3  |     |
| Spinal Cord      | + |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3  |     |
| Atrophy          |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  | 3.0 |

**RESPIRATORY SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |     |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|-----|
| Lung                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |     |
| Edema                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  | 2.0 |
| Hemorrhage                        |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   | 1 |   |   |   | 1 |   |   |   |    | 4  | 1.3 |
| Infiltration Cellular, Histiocyte |   |   |   | 1 |   |   |   |   |   |   |   | 1 |   |   |   |   | 1 |   |   | 1 |   | 1 | 1 |    | 16 | 1.3 |
| Inflammation, Chronic             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   | 1 | 1 |    | 8  | 1.1 |
| Metaplasia, Osseous               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   | 1 |   |   |   |    | 3  | 1.0 |
| Pigmentation                      |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 4  | 2.0 |
| Alveolar Epithelium, Hyperplasia  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  | 2.0 |
| Nose                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |     |
| Foreign Body                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |    | 1  |     |
| Inflammation, Chronic             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  | 2.0 |
| Trachea                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |     |

**SPECIAL SENSES SYSTEM**

|          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |     |
|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|-----|
| Eye      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |     |
| Cataract |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |    | 3 | 2.3 |

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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>10 MG/KG      | DAY ON TEST |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | * TOTALS |     |   |     |
|--|-------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----|---|-----|
|  | 04<br>93    | 07<br>26 | 07<br>33 | 07<br>33 | 07<br>30 | 07<br>36 | 06<br>57 | 05<br>73 | 07<br>73 | 05<br>53 | 05<br>52 | 05<br>52 | 06<br>61 | 06<br>60 | 07<br>69 | 07<br>73 | 07<br>73 | 07<br>73 | 05<br>54 | 07<br>73 | 06<br>63 | 07<br>73 | 06<br>63 | 07<br>73 |          |     |   |     |
| ANIMAL ID                                | 0076        | 0077     | 0078     | 0079     | 0080     | 0081     | 0082     | 0083     | 0084     | 0085     | 0086     | 0087     | 0088     | 0089     | 0090     | 0091     | 0092     | 0093     | 0094     | 0095     | 0096     | 0097     | 0098     | 0099     | 0100     |     |   |     |
| Inflammation, Acute                      | 3           |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1        | 3.0 |   |     |
| Inflammation, Chronic Active             |             |          |          |          |          |          |          |          |          |          |          |          | 2        |          |          |          |          |          |          |          |          |          |          |          | 1        | 2.0 |   |     |
| Retina, Degeneration                     |             |          |          |          | 4        |          | 2        |          |          |          |          |          |          |          |          |          |          |          |          |          | 3        |          | 4        |          | 3.3      |     |   |     |
| Harderian Gland Atrophy                  | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | 50  | 1 | 2.0 |
| Hyperplasia, Focal Inflammation, Chronic |             |          |          |          |          |          | 2        |          |          |          |          |          |          |          |          |          |          |          |          |          | 2        |          | 1        |          | 2.0      |     |   |     |

**URINARY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |     |     |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|-----|-----|
| Kidney Cyst                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 | 1   |     |     |
| Inflammation, Chronic                       |   |   |   |   | 2 |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   | 2  |     | 6   | 2.0 |
| Inflammation, Chronic Active                |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   | 4 |   | 3 |   | 1 |   | 3 |   | 1 |   | 1  | 3.0 |     |     |
| Nephropathy                                 | 2 | 3 | 1 | 1 | 4 | 1 |   |   | 1 | 3 | 1 |   |   | 3 | 2 | 3 | 3 | 3 | 2 | 3 | 1 | 4 |   | 3 | 41 | 2.0 |     |     |
| Renal Tubule, Accumulation, Hyaline Droplet |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  | 2.0 |     |     |
| Renal Tubule, Pigmentation                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  | 3.0 |     |     |
| Urinary Bladder Metaplasia, Squamous        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 | 1   | 3.0 |     |

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 X .. Lesion present  
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 M .. Missing tissue  
 A .. Autolysis precludes evaluation  
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 2) Mild 4) Marked





TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | females<br>(cont...) |
|-------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------------------|
|                         | 0<br>5<br>8<br>3 | 0<br>7<br>3<br>2 | 0<br>7<br>0<br>3 | 0<br>7<br>3<br>6 | 0<br>7<br>0<br>2 | 0<br>7<br>3<br>8 | 0<br>7<br>0<br>6 | 0<br>4<br>5<br>5 | 0<br>6<br>8<br>7 | 0<br>7<br>3<br>3 | 0<br>7<br>5<br>6 | 0<br>7<br>8<br>3 | 0<br>7<br>3<br>6 | 0<br>7<br>2<br>1 | 0<br>7<br>3<br>2 | 0<br>7<br>1<br>0 | 0<br>7<br>3<br>5 | 0<br>6<br>7<br>6 | 0<br>6<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>5<br>9<br>1 | 0<br>0<br>7<br>5 | 0<br>7<br>3<br>3 | 0<br>0<br>3<br>4 |           |                      |
| 30 MG/KG                | 0<br>0<br>3<br>0 | 0<br>0<br>3<br>0 | 0<br>0<br>3<br>0 | 0<br>0<br>3<br>0 | 0<br>0<br>3<br>0 | 0<br>0<br>3<br>0 | 0<br>0<br>3<br>0 | 0<br>0<br>3<br>0 | 0<br>0<br>3<br>0 | 0<br>0<br>3<br>0 | 0<br>0<br>3<br>1 | 0<br>0<br>3<br>1 | 0<br>0<br>3<br>1 | 0<br>0<br>3<br>1 | 0<br>0<br>3<br>1 | 0<br>0<br>3<br>1 | 0<br>0<br>3<br>1 | 0<br>0<br>3<br>1 | 0<br>0<br>3<br>1 | 0<br>0<br>3<br>2 | 0<br>0<br>3<br>2 | 0<br>0<br>3<br>2 | 0<br>0<br>3<br>2 | 0<br>0<br>3<br>3 |           |                      |

Tooth +

**CARDIOVASCULAR SYSTEM**

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Blood Vessel   | + |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |
| Heart          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Cardiomyopathy | 1 | 3 | 1 | 2 |   | 2 | 1 |   |   | 2 | 2 |   | 3 |   | 2 | 2 | 1 | 2 | 2 | 1 | 2 | 1 |   | + |

**ENDOCRINE SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adrenal Cortex                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Accessory Adrenal Cortical Nodule |   |   | X | X |   |   | X |   |   | X |   | X |   |   |   |   |   |   | X |   |   |   |   | X |
| Angiectasis                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |
| Degeneration, Fatty               |   |   |   | 3 | 3 | 2 | 4 |   | 2 | 3 |   | 2 | 1 | 2 |   | 2 |   |   |   |   | 3 |   | 1 | 1 |
| Hyperplasia, Focal                |   |   |   | 2 |   | 2 | 4 |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |
| Hypertrophy, Focal                |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   | 1 | 1 | 1 |   | 3 |   |   |
| Necrosis                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Adrenal Medulla                   | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Islets, Pancreatic                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Parathyroid Gland                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + |
| Pituitary Gland                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pigmentation                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |
| Pars Distalis, Angiectasis        | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 | 1 |   | 3 |
| Pars Distalis, Cyst               |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X | X |   | X |
| Pars Distalis, Hyperplasia, Focal |   |   |   | 2 |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |
| Pars Intermedia, Angiectasis      |   |   |   |   |   |   | 2 |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. 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















TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| FISCHER 344 RATS FEMALE<br>30 MG/KG   | DAY ON TEST |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | * TOTALS |    |    |        |
|---------------------------------------|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|----|----|--------|
|                                       | 06          | 07 | 07 | 07 | 07 | 06 | 07 | 07 | 07 | 07 | 07 | 07 | 05 | 05 | 06 | 07 | 07 | 07 | 07 | 05 |          | 07 | 07 | 04     |
|                                       | 1           | 3  | 0  | 3  | 3  | 2  | 3  | 3  | 0  | 3  | 3  | 3  | 5  | 5  | 0  | 3  | 3  | 3  | 3  | 8  | 3        | 3  | 5  | 3      |
|                                       | 4           | 3  | 8  | 6  | 2  | 7  | 6  | 3  | 4  | 2  | 2  | 6  | 4  | 7  | 5  | 2  | 6  | 3  | 2  | 2  | 7        | 3  | 3  | 6      |
|                                       | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00       | 00 | 00 | 00     |
|                                       | 33          | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33       | 33 | 33 | 33     |
|                                       | 22          | 22 | 22 | 22 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 44 | 44 | 44 | 44 | 44 | 44 | 44       | 44 | 44 | 55     |
|                                       | 67          | 78 |    |    | 00 | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 00 | 01 | 02 | 03 | 04 | 05 | 06       | 07 | 08 | 09     |
| Bile Duct, Hyperplasia                |             |    |    |    |    |    |    |    | 2  |    | 2  |    |    |    |    |    |    |    |    |    |          |    |    |        |
| Centrilobular, Necrosis               | 4           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    |        |
| Hepatocyte, Hyperplasia, Focal        |             |    |    |    |    |    |    |    |    |    | 3  |    |    |    |    |    |    |    |    |    |          |    |    |        |
| Hepatocyte, Vacuolization Cytoplasmic |             |    |    |    |    |    |    |    | 3  |    |    |    |    | 2  |    |    |    |    |    |    |          |    |    |        |
| Mesentery                             | +           |    | +  |    | +  |    |    | +  | +  | +  | +  | +  |    |    |    |    |    | +  |    | +  | +        | +  | +  | 23     |
| Accessory Spleen                      |             |    |    |    |    |    |    |    |    |    | X  | X  |    |    |    |    |    |    |    |    |          | X  |    | 4      |
| Fat, Necrosis                         | 2           |    | 3  |    | 3  |    |    | 2  | 3  |    | 4  | 4  |    |    |    |    |    | 4  |    | 3  |          | 4  | 1  | 21 2.9 |
| Pancreas                              | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +        | +  | +  | 50     |
| Atrophy                               |             |    |    | 2  |    | 2  |    |    | 1  |    |    | 1  | 1  |    |    |    | 1  |    |    |    | 1        |    | 1  | 13 1.3 |
| Cyst                                  | X           |    |    | X  |    |    |    | X  | X  |    |    | X  | X  |    |    |    |    |    |    |    |          | X  |    | 15     |
| Necrosis                              |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 1 3.0  |
| Acinus, Cytoplasmic Alteration        |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 1 3.0  |
| Salivary Glands                       | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +        | +  | +  | 50     |
| Atrophy                               |             |    |    |    |    |    |    |    |    |    | 1  |    |    |    |    |    |    |    |    |    |          |    |    | 2 1.0  |
| Stomach, Forestomach                  | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +        | +  | +  | 50     |
| Edema                                 |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 2 3.0  |
| Inflammation, Chronic Active          |             |    |    |    |    |    |    |    |    | 3  |    |    |    |    |    |    |    |    |    |    |          |    |    | 2 2.5  |
| Ulcer                                 | 3           |    |    |    |    |    |    |    |    |    | 3  |    |    |    |    |    |    |    |    |    |          |    |    | 3 3.0  |
| Epithelium, Hyperplasia               |             |    |    |    |    |    |    |    | 3  | 3  |    |    |    |    | 4  |    |    |    |    |    |          |    |    | 5 3.2  |
| Stomach, Glandular                    | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +        | +  | +  | 50     |
| Erosion                               | 1           |    |    |    |    |    |    |    | 2  |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 3 1.7  |
| Ulcer                                 | 1           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 1 1.0  |
| Tongue                                |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 1      |
| Epithelium, Hyperplasia               |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 1 2.0  |

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
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 1) Minimal 3) Moderate  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST | FISCHER 344 RATS FEMALE |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | * TOTALS |    |    |
|-------------|-------------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|----|----|
|             | 06                      | 07 | 07 | 07 | 07 | 06 | 07 | 07 | 07 | 07 | 07 | 07 | 05 | 05 | 06 | 07 | 07 | 07 | 05 | 07 |          | 07 | 04 |
| 1           | 3                       | 0  | 3  | 3  | 2  | 3  | 3  | 0  | 3  | 3  | 3  | 5  | 5  | 0  | 3  | 3  | 3  | 3  | 8  | 3  | 3        | 5  | 3  |
| 4           | 3                       | 8  | 6  | 2  | 7  | 6  | 3  | 4  | 2  | 2  | 6  | 4  | 7  | 5  | 2  | 6  | 3  | 2  | 2  | 7  | 3        | 3  | 6  |
| ANIMAL ID   | 00                      | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00       | 00 | 00 |
| 3           | 3                       | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3        | 3  | 3  |
| 2           | 2                       | 2  | 2  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 4  | 4  | 4  | 4  | 4  | 4  | 4  | 4        | 4  | 5  |
| 6           | 7                       | 8  | 9  | 0  | 1  | 2  | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 0  | 1  | 2  | 3  | 4  | 5  | 6  | 7        | 8  | 9  |

Tooth 1

**CARDIOVASCULAR SYSTEM**

Blood Vessel 2

Heart 50  
 Cardiomyopathy 35 1.7

**ENDOCRINE SYSTEM**

Adrenal Cortex 50  
 Accessory Adrenal Cortical Nodule 16  
 Angiectasis 1 3.0  
 Degeneration, Fatty 25 2.3  
 Hyperplasia, Focal 8 2.1  
 Hypertrophy, Focal 10 1.9  
 Necrosis 1 2.0

Adrenal Medulla 47

Islets, Pancreatic 50

Parathyroid Gland 49

Pituitary Gland 50  
 Pigmentation 2 2.0  
 Pars Distalis, Angiectasis 9 2.9  
 Pars Distalis, Cyst 20  
 Pars Distalis, Hyperplasia, Focal 11 2.1  
 Pars Intermedia, Angiectasis 2 2.5

\* .. 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



TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>30 MG/KG | DAY ON TEST |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | * TOTALS |
|-------------------------------------|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|
|                                     | 06          | 07 | 07 | 07 | 07 | 06 | 07 | 07 | 07 | 07 | 07 | 07 | 05 | 05 | 06 | 07 | 07 | 07 | 07 | 05 | 07 | 07 | 04 | 07 |          |
| ANIMAL ID                           | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 |          |
|                                     | 33          | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 |          |
|                                     | 22          | 22 | 22 | 22 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 |          |
|                                     | 67          | 78 | 89 | 00 | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 00 | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 00 |          |

|                                     |   |     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |       |
|-------------------------------------|---|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|
| Pars Intermedia, Cyst               | X |     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1     |
| Pars Intermedia, Hyperplasia, Focal |   |     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0 |
| Thyroid Gland                       | + | +   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49    |
| Ultimobranchial Cyst                |   |     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 3.0 |
| C-cell, Hyperplasia                 | 2 | 3 3 |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 5 2.0 |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |       |       |       |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|-------|-------|
| Clitoral Gland        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50    |       |       |
| Cyst                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1     |       |       |
| Hyperplasia           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 1.5 |       |       |
| Inflammation, Chronic |   |   |   |   |   |   | 3 | 3 | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4     | 5 3.2 |       |
| Ovary                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | 48    |       |       |
| Cyst                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2     |       |       |
| Uterus                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | 49    |       |       |
| Hyperplasia, Cystic   | 1 | 3 |   |   |   |   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |       | 1     | 9 2.0 |
| Vagina                | + |   |   |   |   |   |   |   |   |   |   | + | + |   |   |   |   |   |   |   |   |   |   | 7 |       |       |       |

**HEMATOPOIETIC SYSTEM**

|               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |       |   |       |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|---|-------|
| Bone Marrow   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +     | + | 50    |
| Hyperplasia   | 3 |   |   |   |   |   |   |   |   |   |   | 3 |   |   |   |   |   |   |   |   |   |   | 4 3.3 |   |       |
| Myelofibrosis |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |       |   | 1 1.0 |

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 X .. Lesion present  
 I .. Insufficient tissue  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
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 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

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Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| DAY ON TEST                        | FISCHER 344 RATS FEMALE |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | * TOTALS |    |    |    |
|------------------------------------|-------------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|----|----|----|
|                                    | 06                      | 07 | 07 | 07 | 07 | 06 | 07 | 07 | 07 | 07 | 07 | 05 | 05 | 06 | 07 | 07 | 07 | 05 | 07 | 07 |          | 04 | 07 |    |
| 30 MG/KG                           | 1                       | 3  | 0  | 3  | 3  | 2  | 3  | 3  | 0  | 3  | 3  | 5  | 5  | 0  | 3  | 3  | 3  | 8  | 3  | 3  | 5        | 3  |    |    |
| ANIMAL ID                          | 4                       | 3  | 8  | 6  | 2  | 7  | 6  | 3  | 4  | 2  | 2  | 6  | 4  | 7  | 5  | 2  | 6  | 3  | 2  | 2  | 7        | 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  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0        | 0  |    |    |
|                                    | 3                       | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3        | 3  |    |    |
|                                    | 2                       | 2  | 2  | 2  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 4  | 4  | 4  | 4  | 4  | 4  | 4        | 4  |    |    |
|                                    | 6                       | 7  | 8  | 9  | 0  | 1  | 2  | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 0  | 1  | 2  | 3  | 4  | 5  | 6        | 7  |    |    |
| Lymph Node                         | +                       | +  |    |    |    |    |    |    | +  | +  |    |    |    |    | +  |    |    |    |    |    |          | +  | 14 |    |
| Mediastinal, Ectasia               |                         |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    | 2  | 3  |
| Mediastinal, Hemorrhage            | 4                       |    |    |    |    |    |    |    |    |    |    |    |    |    | 2  |    |    |    |    |    |          |    | 1  | 7  |
| Mediastinal, Hyperplasia, Lymphoid |                         |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    | 2  | 3  |
| Mediastinal, Pigmentation          | 3                       |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    | 3  | 6  |
| Pancreatic, Hemorrhage             |                         |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 1  |
| Pancreatic, Pigmentation           |                         |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 1  |
| Lymph Node, Mandibular             | M                       | M  | M  | M  | M  | M  | M  | M  | M  | M  | +  | M  | M  | +  | M  | M  | M  | M  | M  | M  | M        | M  | M  | 3  |
| Lymph Node, Mesenteric             | +                       | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +        | +  | +  | 50 |
| Atrophy                            |                         |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 1  |
| Ectasia                            |                         |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 2  |
| Hemorrhage                         | 3                       | 1  |    |    |    |    |    |    |    |    |    |    |    |    | 1  |    |    |    |    |    |          |    | 1  | 9  |
| Hyperplasia, Lymphoid              |                         |    |    |    |    |    |    |    |    |    |    |    |    |    | 2  |    |    |    |    |    |          |    | 2  | 13 |
| Pigmentation                       |                         |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    | 2  | 2  |
| Spleen                             | +                       | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +        | +  | +  | 50 |
| Congestion                         |                         |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 1  |
| Fibrosis                           |                         |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 1  |
| Hematopoietic Cell Proliferation   | 4                       | 2  |    |    | 2  | 2  |    | 2  |    | 2  |    |    |    |    | 2  |    | 1  | 2  | 1  | 1  |          | 3  | 2  | 29 |
| Infiltration Cellular, Mixed Cell  |                         |    |    |    |    |    | 4  |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 1  |
| Metaplasia, Osseous                |                         |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 1  |
| Pigmentation                       |                         |    | 3  |    |    |    | 3  |    |    |    |    |    |    |    | 3  |    | 3  |    |    |    |          |    |    | 10 |
| Thymus                             | +                       | +  | +  | +  | +  | +  | +  | M  | +  | +  | +  | +  | +  | +  | I  | +  | +  | +  | +  | +  | +        | +  | +  | 47 |
| Atrophy                            |                         |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    | 1  |
| Cyst                               |                         |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    | X  | 2  |

**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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST | FISCHER 344 RATS FEMALE |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | * TOTALS |    |    |    |
|-------------|-------------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|----|----|----|
|             | 06                      | 07 | 07 | 07 | 07 | 06 | 07 | 07 | 07 | 07 | 07 | 07 | 05 | 05 | 06 | 07 | 07 | 07 | 07 | 05 |          | 07 | 07 | 04 |
| ANIMAL ID   | 01                      | 03 | 00 | 03 | 03 | 02 | 03 | 03 | 00 | 03 | 03 | 03 | 05 | 05 | 00 | 03 | 03 | 03 | 03 | 08 | 03       | 03 | 05 | 03 |
| 30 MG/KG    | 04                      | 03 | 08 | 06 | 02 | 07 | 06 | 03 | 04 | 02 | 02 | 06 | 04 | 07 | 05 | 02 | 06 | 03 | 02 | 02 | 07       | 03 | 03 | 06 |
|             | 00                      | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00       | 00 | 00 | 00 |
|             | 00                      | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00       | 00 | 00 | 00 |
|             | 03                      | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03       | 03 | 03 | 03 |
|             | 02                      | 02 | 02 | 02 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 03 | 04 | 04 | 04 | 04 | 04 | 04 | 04       | 04 | 04 | 05 |
|             | 06                      | 07 | 08 | 09 | 00 | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 00 | 01 | 02 | 03 | 04 | 05 | 06       | 07 | 08 | 09 |

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| Mammary Gland                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |
| Hyperplasia                                 | 3 | 2 | 3 | 3 | 4 | 2 | 2 | 3 | 3 | 4 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 2 | 2 | 47 2.6 |
| Skin  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |
| Inflammation, Chronic                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 3.0  |
| Ulcer                                       |   |   |   |   |   |   |   |   |   |   |   |   |   | 3 |   |   | 3 |   |   |   |   |   |   | 3 3.0  |
| Control Epidermis, Hyperplasia              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   | 1 |   | 3 1.0  |
| Epidermis, Hyperplasia                      |   |   |   |   |   |   |   |   |   |   |   |   | 4 |   |   | 3 | 3 |   |   |   |   |   |   | 6 3.3  |
| Epidermis, Site Of Application, Hyperplasia |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   | 1 |   |   |   |   |   | 5 1.0  |
| Site Of Application, Hyperkeratosis         |   |   |   | 1 | 1 |   |   |   | 1 |   | 1 |   | 1 | 1 |   | 1 | 1 |   |   |   |   | 1 |   | 20 1.0 |

**MUSCULOSKELETAL SYSTEM**

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |       |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------|
| Bone                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50    |
| Femur, Osteopetrosis |   |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 3.0 |
| Skeletal Muscle      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + | 1     |

**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50     |
| Compression      | 3 | 4 |   |   |   | 2 |   |   | 4 |   |   |   |   |   |   |   |   | 2 | 2 |   | 3 |   |   | 15 2.9 |
| Hemorrhage       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2 2.5  |
| Necrosis         | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 2.0  |
| Peripheral Nerve |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2      |
| Spinal Cord      |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2      |

**RESPIRATORY 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>30 MG/KG          | DAY ON TEST |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | * TOTALS |    |    |    |        |  |
|--|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|----|----|----|--------|--|
|  | 06          | 07 | 07 | 07 | 07 | 06 | 07 | 07 | 07 | 07 | 07 | 07 | 05 | 05 | 06 | 07 | 07 | 07 | 07 | 05 |          | 07 | 07 | 04 | 07     |  |
| ANIMAL ID                                    | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00       | 00 | 00 | 00 |        |  |
|  | 1           | 3  | 0  | 3  | 3  | 2  | 3  | 3  | 0  | 3  | 3  | 3  | 5  | 5  | 0  | 3  | 3  | 3  | 3  | 3  | 8        | 3  | 3  | 5  | 3      |  |
|  | 4           | 3  | 8  | 6  | 2  | 7  | 6  | 3  | 4  | 2  | 2  | 6  | 4  | 7  | 5  | 2  | 6  | 3  | 2  | 2  | 7        | 3  | 3  | 3  | 6      |  |
|  | 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  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3        | 3  | 3  | 3  | 3      |  |
|  | 2           | 2  | 2  | 2  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 3  | 4  | 4  | 4  | 4  | 4  | 4  | 4        | 4  | 4  | 4  | 5      |  |
|  | 6           | 7  | 8  | 9  | 0  | 1  | 2  | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 0  | 1  | 2  | 3  | 4  | 5  | 6        | 7  | 8  | 9  | 0      |  |
| Lung   | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +        | +  | +  | +  | 50     |  |
| Hemorrhage                                   | 2           |    |    |    |    | 2  |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    |    | 3 1.7  |  |
| Infiltration Cellular, Histiocyte            | 2           |    | 3  |    |    | 2  | 1  | 1  |    | 2  |    | 1  |    | 1  | 2  | 1  | 1  | 2  |    |    | 1        |    |    |    | 19 1.4 |  |
| Inflammation, Chronic                        |             |    |    |    |    |    | 1  | 1  |    |    |    |    |    | 3  |    |    |    |    | 1  |    | 1        |    |    |    | 12 1.3 |  |
| Pigmentation                                 |             | 2  |    |    | 1  |    |    | 1  |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    |    | 8 1.5  |  |
| Alveolar Epithelium, Hyperplasia             |             |    |    |    |    |    |    |    |    |    |    |    |    |    | 2  | 2  | 2  |    | 2  |    |          |    |    |    | 6 2.3  |  |
| Nose   | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +        | +  | +  | +  | 50     |  |
| Foreign Body                                 |             |    |    |    |    | X  |    |    |    |    |    |    |    |    |    |    |    |    | X  |    |          |    |    |    | 5      |  |
| Inflammation, Chronic                        |             |    |    |    |    | 4  |    |    |    |    |    |    |    | 3  |    |    |    |    | 1  |    |          |    |    |    | 4 2.5  |  |
| Respiratory Epithelium, Hyperplasia          |             |    |    |    |    | 3  |    |    |    |    |    |    |    | 3  |    |    |    |    | 1  |    |          |    |    |    | 3 2.3  |  |
| Respiratory Epithelium, Metaplasia, Squamous |             |    |    |    |    | 3  |    |    |    |    |    |    |    | 3  |    |    |    |    |    |    |          |    |    |    | 2 3.0  |  |
| Trachea                                      | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +        | +  | +  | +  | 50     |  |
| <b>SPECIAL SENSES SYSTEM</b>                 |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    |    |        |  |
| Eye  | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +        | +  | +  | +  | 50     |  |
| Cataract                                     |             |    |    |    |    |    |    |    |    | 3  |    |    |    |    |    |    |    |    | 3  |    |          |    |    |    | 3 2.7  |  |
| Retina, Degeneration                         |             |    |    |    |    |    |    |    | 4  |    | 1  |    |    |    |    |    |    | 3  |    |    |          |    |    |    | 4 2.5  |  |
| Harderian Gland                              | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +        | +  | +  | +  | 50     |  |
| Atrophy                                      |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    |    | 1 2.0  |  |
| Inflammation, Chronic                        |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    |    | 1 2.0  |  |
| <b>URINARY SYSTEM</b>                        |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    |    |        |  |
| Kidney                                       | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +        | +  | +  | +  | 50     |  |
| Cyst   |             |    |    | X  |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |    |    | 2      |  |
| Infarct                                      |             |    |    |    |    |    |    |    |    |    |    |    |    |    | 1  | 3  |    |    |    |    |          |    |    |    | 2 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





TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>90 MG/KG   | DAY ON TEST    |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                | ANIMAL ID | females<br>(cont...) |                |                |
|---------------------------------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|-----------|----------------------|----------------|----------------|
|                                       | 07<br>29<br>93 | 05<br>73<br>66 | 07<br>73<br>67 | 05<br>53<br>73 | 06<br>61<br>39 | 07<br>72<br>69 | 07<br>71<br>68 | 04<br>72<br>90 | 07<br>71<br>68 | 06<br>63<br>72 | 06<br>67<br>76 | 07<br>73<br>66 | 04<br>73<br>66 | 07<br>73<br>66 | 04<br>73<br>66 | 07<br>75<br>60 | 05<br>07<br>72 | 07<br>73<br>63 | 06<br>63<br>66 | 07<br>72<br>69 |           |                      | 07<br>73<br>63 | 07<br>73<br>62 |
| Centrilobular, Necrosis               |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           | 1                    |                |                |
| Hepatocyte, Hyperplasia, Focal        |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           | 3                    |                |                |
| Hepatocyte, Vacuolization Cytoplasmic |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                | 2         | 2                    |                |                |
| Kupffer Cell, Hyperplasia             |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           |                      |                |                |
| Mesentery                             |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           |                      |                |                |
| Accessory Spleen                      |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           |                      |                |                |
| Fat, Necrosis                         |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                | 3         | 3                    |                |                |
| Pancreas                              |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           |                      |                |                |
| Atrophy                               |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                | 1         | 3                    |                |                |
| Cyst                                  |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                | X         | X                    |                |                |
| Acinus, Cytoplasmic Alteration        |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           | 4                    |                |                |
| Salivary Glands                       |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           |                      |                |                |
| Atrophy                               |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           | 1                    |                |                |
| Stomach, Forestomach                  |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           |                      |                |                |
| Edema                                 |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           |                      |                |                |
| Perforation                           |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           |                      |                |                |
| Ulcer                                 |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           | 3                    |                |                |
| Epithelium, Hyperplasia               |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           | 3                    |                |                |
| Stomach, Glandular                    |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           |                      |                |                |
| Edema                                 |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           |                      |                |                |
| Erosion                               |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                | 2         | 1                    |                |                |
| Ulcer                                 |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           |                      |                |                |
| Tongue                                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           |                      |                |                |
| Epithelium, Hyperplasia               |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |                |           | 2                    |                |                |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

|                                |           | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |   |   |   |   |   |
|--------------------------------|-----------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|---|---|---|---|
| <b>FISCHER 344 RATS FEMALE</b> |           | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                      | 0 |   |   |   |   |
|                                |           | 7           | 5 | 7 | 7 | 5 | 6 | 7 | 7 | 4 | 7 | 7 | 6 | 6 | 7 | 4 | 7 | 7 | 5 | 0 | 7 |                      | 7 | 6 | 7 | 7 | 7 |
|                                |           | 2           | 9 | 3 | 3 | 3 | 1 | 2 | 1 | 7 | 2 | 1 | 3 | 7 | 3 | 9 | 3 | 0 | 9 | 1 | 3 | 3                    | 3 | 2 | 3 | 2 | 9 |
| <b>90 MG/KG</b>                |           | 9           | 3 | 6 | 6 | 7 | 3 | 9 | 6 | 0 | 9 | 8 | 2 | 7 | 6 | 3 | 3 | 1 | 0 | 7 | 2 | 3                    | 6 | 9 | 3 | 2 |   |
|                                |           | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    | 0 | 0 | 0 | 0 | 0 |
|                                | ANIMAL ID | 3           | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3                    | 3 | 3 | 3 | 3 |   |
|                                |           | 5           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7                    | 7 | 7 | 7 | 7 |   |
|                                |           | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1                    | 2 | 3 | 4 | 5 |   |

**CARDIOVASCULAR SYSTEM**

Blood Vessel

Heart

Cardiomyopathy  
 Thrombosis

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|   | 1 | 2 | 3 | 1 |   | 1 | 2 |   |   |   |   | 2 | 1 |   |   | 3 | 2 | 3 |   | 1 | 3 |   | 2 | 1 | 2 |

**ENDOCRINE SYSTEM**

Adrenal Cortex

Accessory Adrenal Cortical Nodule  
 Degeneration, Fatty  
 Hyperplasia, Focal  
 Hypertrophy, Focal

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|   | X | X | X |   | X | X |   | X |   |   |   | X |   |   |   | X |   | X |   |   | X | X |   |   |   |
|   |   | 1 |   |   |   |   | 3 |   |   |   |   | 2 |   |   | 3 |   |   | 1 | 2 |   |   |   |   |   |   |
|   |   |   |   |   | 2 |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   | 2 |   |   |   |

Adrenal Medulla

Hyperplasia

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|   |   |   |   |   |   |   |   |   |   |   |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |

Islets, Pancreatic

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

Parathyroid Gland

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | M | + | + |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

Pituitary Gland

Pars Distalis, Angiectasis  
 Pars Distalis, Cyst  
 Pars Distalis, Cytoplasmic Alteration, Focal  
 Pars Distalis, Hyperplasia, Focal  
 Pars Distalis, Pigmentation  
 Pars Intermedia, Angiectasis

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|   |   |   |   |   |   |   | 2 |   |   |   |   | 3 |   |   | 3 |   |   | 4 |   |   |   |   |   |   |   |
| X |   |   | X | X |   | X |   | X |   |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   | X |
|   |   |   |   |   |   |   |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   | 1 | 2 |   |   |   |   |   |   |   | 2 | 2 |   |   | 2 | 2 |   |   |   |   |   |

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| FISCHER 344 RATS FEMALE<br>90 MG/KG | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID | females<br>(cont...) |
|-------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|----------------------|
|                                     | 0729        | 0593 | 0776 | 0776 | 0573 | 0673 | 0771 | 0772 | 0471 | 0772 | 0773 | 0676 | 0676 | 0773 | 0473 | 0773 | 0770 | 0501 | 0773 | 0773 | 0673 | 0673 | 0729 | 0773 |           |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000353551 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000333551 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000333551 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000355551 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000355551 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000355551 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 000366661 |                      |
|                                     | 0           | 0    | 0    | 0    | 0    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                      |





TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>90 MG/KG           | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID | females<br>(cont...) |      |      |      |
|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|----------------------|------|------|------|
|   | 0729        | 0593 | 0773 | 0773 | 0561 | 0672 | 0774 | 0774 | 0472 | 0774 | 0476 | 0666 | 0776 | 0477 | 0777 | 0575 | 0070 | 0777 | 0677 | 0676 |           |                      | 0777 | 0777 | 0777 |
|   | 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    | 0    | 0    | 0    | 0    | 0    | 0         | 0                    | 0    | 0    |      |
|   | 3           | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3         | 3                    | 3    | 3    |      |
|   | 5           | 5    | 5    | 5    | 5    | 5    | 5    | 5    | 5    | 6    | 6    | 6    | 6    | 6    | 6    | 6    | 6    | 6    | 7    | 7    | 7         | 7                    | 7    | 7    |      |
|   | 1           | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0    | 1         | 2                    | 3    | 4    | 5    |
| Hemorrhage                                    |             |      |      |      |      |      | 1    |      |      | 3    |      |      |      |      |      |      |      |      |      |      |           | 1                    |      | 1    |      |
| Infiltration Cellular, Histiocyte             | 1           |      |      | 1    | 1    |      |      |      |      | 3    |      | 1    |      | 1    | 4    | 1    |      |      |      |      |           |                      |      | 1    |      |
| Inflammation, Chronic                         | 1           |      | 1    |      |      |      | 1    |      |      |      |      |      |      |      |      |      |      |      |      | 1    |           | 1                    |      | 1    |      |
| Metaplasia, Osseous                           |             |      |      |      |      |      |      |      |      | 1    |      |      |      |      |      |      |      |      |      |      |           |                      |      |      |      |
| Pigmentation                                  |             |      |      |      |      |      | 1    |      |      |      |      |      |      |      |      |      | 2    |      |      |      |           | 1                    |      |      |      |
| Alveolar Epithelium, Hyperplasia              |             |      |      |      |      |      |      |      |      |      |      |      | 1    |      |      |      |      |      |      |      |           |                      |      |      |      |
| Bronchiole, Hyperplasia                       |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                      |      |      |      |
| Serosa, Hyperplasia                           |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1         |                      |      |      |      |
| Nose  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         | +                    | +    | +    |      |
| Foreign Body                                  |             |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |           |                      |      |      |      |
| Inflammation, Chronic                         | 1           | 1    |      |      |      |      |      |      |      | 1    |      |      |      |      |      | 1    |      |      |      |      | 1         |                      |      | 1    |      |
| Olfactory Epithelium, Metaplasia, Respiratory |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                      |      |      |      |
| Respiratory Epithelium, Hyperplasia           | 1           | 1    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                      |      |      |      |
| Trachea                                       | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         | +                    | +    | +    |      |

**SPECIAL SENSES SYSTEM**

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Eye                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Cataract              |   | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Retina, Degeneration  |   | 4 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Harderian Gland       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Inflammation, Chronic |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**URINARY SYSTEM**

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Cyst                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Inflammation, Chronic |   |   | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| DAY ON TEST                                 | FISCHER 344 RATS FEMALE |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |        | ANIMAL ID | females<br>(cont...) |
|---|-------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|--------|-----------|----------------------|
|   | 0729                    | 0593 | 0736 | 0733 | 0533 | 0612 | 0772 | 0771 | 0472 | 0772 | 0666 | 0667 | 0773 | 0473 | 0773 | 0550 | 0771 | 0773 | 0666 | 0677 | 0776 | 0777 | 0577 | 0777   |           |                      |
| 90 MG/KG                                    | 00                      | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 00   | 000351 |           |                      |
| Nephropathy                                 | 1                       | 4    | 3    | 2    |      | 1    | 1    | 2    |      | 1    |      | 4    | 1    | 1    |      | 1    | 2    | 1    |      | 2    | 3    | 1    | 2    | 1      |           |                      |
| Renal Tubule, Accumulation, Hyaline Droplet |                         |      |      |      |      |      |      |      |      |      |      | 2    |      |      |      |      |      |      |      |      |      |      |      |        |           |                      |
| Renal Tubule, Dilatation                    |                         |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |        |           |                      |
| Renal Tubule, Hyperplasia                   |                         |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |        |           |                      |
| Renal Tubule, Pigmentation                  |                         |      |      |      |      |      |      |      |      |      | 2    |      |      |      | 3    |      |      |      |      |      |      |      |      |        |           |                      |
| Urinary Bladder Hemorrhage                  | +                       | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 3      |           |                      |

\* .. 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



TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>90 MG/KG   | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |
|---------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
|                                       | 0736        | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 |          |
| ANIMAL ID                             | 0076        | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076     |
| Centrilobular, Necrosis               |             |      |      | 3    |      |      |      | 4    |      |      |      |      |      |      | 2    |      |      |      |      |      |          |
| Hepatocyte, Hyperplasia, Focal        |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |
| Hepatocyte, Vacuolization Cytoplasmic |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 3    | 2    |      |      |      |          |
| Kupffer Cell, Hyperplasia             |             |      |      |      |      |      |      |      |      |      |      |      |      | 2    |      |      |      |      |      |      |          |
| Mesentery                             |             | +    | +    |      |      |      |      |      |      | +    | +    | +    |      |      | +    | +    | +    | +    | +    | +    | +        |
| Accessory Spleen                      |             |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      | X    |      |      |      |          |
| Fat, Necrosis                         |             | 4    |      |      |      |      |      |      |      |      | 2    | 3    |      |      | 3    | 3    | 4    | 3    | 3    | 3    | 3        |
| Pancreas                              |             | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | A    | +    | +    | +    | +        |
| Atrophy                               |             |      |      | 1    |      |      |      | 3    | 1    | 1    | 3    | 2    |      |      |      | 1    |      | 1    | 1    | 1    |          |
| Cyst                                  |             | X    | X    | X    | X    |      | X    | X    | X    |      | X    | X    | X    |      | X    | X    | X    |      | X    | X    |          |
| Acinus, Cytoplasmic Alteration        |             |      |      |      |      |      |      |      |      |      |      |      |      |      | 3    |      |      |      |      |      | X        |
| Salivary Glands                       |             | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        |
| Atrophy                               |             | 2    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |
| Stomach, Forestomach                  |             | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        |
| Edema                                 |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 4    |      |          |
| Perforation                           |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |          |
| Ulcer                                 |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 4    |      |          |
| Epithelium, Hyperplasia               |             |      |      |      |      |      | 3    |      |      |      |      | 2    |      |      |      | 3    |      |      | 2    |      |          |
| Stomach, Glandular                    |             | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        |
| Edema                                 |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 3    |      |          |
| Erosion                               |             |      |      |      | 3    |      |      |      | 3    |      |      |      |      |      |      |      |      |      |      |      |          |
| Ulcer                                 |             |      |      |      |      |      |      |      |      |      |      |      |      |      | 1    |      |      |      |      |      |          |
| Tongue                                |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |
| Epithelium, Hyperplasia               |             |      |      |      | +    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |
|                                       |             |      |      |      | 1    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |

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TDMS No. 95003 - 05  
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**P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL**

Methyl trans-styryl ketone  
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| FISCHER 344 RATS FEMALE<br>90 MG/KG | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |        |
|-------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|--------|
|                                     | 0736        | 0736  | 0774  | 0774  | 0776  | 0776  | 0776  | 0776  | 0776  | 0776  | 0776  | 0776  | 0776  | 0776  | 0776  | 0776  | 0776  | 0776  | 0776  | 0776  |          | 0776   |
| ANIMAL ID                           | 00376       | 00377 | 00378 | 00379 | 00380 | 00381 | 00382 | 00383 | 00384 | 00385 | 00386 | 00387 | 00388 | 00389 | 00390 | 00391 | 00392 | 00393 | 00394 | 00395 | 00396    |        |
| Pars Intermedia, Cyst               |             |       |       |       |       |       |       |       |       |       | X     | X     |       |       |       |       |       |       |       |       |          | 4      |
| Thyroid Gland                       | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50     |
| Ultimobranchial Cyst                |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 3     |       |       |          | 1 3.0  |
| C-cell, Hyperplasia                 |             |       |       | 2     | 2     |       | 1     | 1     |       | 1     |       |       |       |       |       |       | 2     |       |       |       |          | 10 1.3 |
| <b>GENERAL BODY SYSTEM</b>          |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |        |
| NONE                                |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |        |
| <b>GENITAL SYSTEM</b>               |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |        |
| Clitoral Gland                      | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50     |
| Cyst                                |             |       |       |       |       |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |          | 3      |
| Hyperplasia                         |             |       |       |       |       | 2     |       | 2     |       |       |       |       |       |       |       |       |       |       |       |       |          | 3 2.0  |
| Inflammation, Chronic               |             |       |       |       |       |       |       |       |       |       |       |       | 3     |       |       |       |       |       |       |       |          | 5 2.8  |
| Ovary                               | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50     |
| Cyst                                |             |       |       | X     |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       | X        | 5      |
| Uterus                              | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50     |
| Hyperplasia, Cystic                 |             |       |       | 3     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 2        | 4 2.5  |
| Vagina                              |             |       |       | +     |       |       |       | +     |       |       | +     |       |       |       | +     |       |       | +     |       |       |          | 10     |
| Cyst                                |             |       |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |          | 1      |
| <b>HEMATOPOIETIC SYSTEM</b>         |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |        |
| Bone Marrow                         | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50     |
| Hyperplasia                         |             |       |       | 2     |       |       |       | 3     |       |       |       |       |       |       | 3     |       |       |       |       |       |          | 6 2.5  |

\* .. 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

TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>90 MG/KG | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |       |       |       |        |        |
|-------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------|-------|-------|--------|--------|
|                                     | 0736        | 0736  | 0736  | 0723  | 0733  | 0757  | 0743  | 0766  | 0777  | 0777  | 0777  | 0777  | 0753  | 0736  | 0767  | 0766  | 0766  | 0777  | 0766  | 0777  |          | 0777  | 0777  | 0777  |        |        |
| ANIMAL ID                           | 00376       | 00377 | 00378 | 00379 | 00380 | 00381 | 00382 | 00383 | 00384 | 00385 | 00386 | 00387 | 00388 | 00389 | 00390 | 00391 | 00392 | 00393 | 00394 | 00395 | 00396    | 00397 | 00398 | 00399 | 00400  |        |
| Lymph Node                          |             |       |       |       |       |       |       | +     |       |       | +     |       |       |       |       |       |       |       |       |       |          |       |       |       |        | 12     |
| Deep Cervical, Hemorrhage           |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |        | 1 4.0  |
| Mediastinal, Hemorrhage             |             |       |       |       |       |       |       |       | 2     |       |       |       |       |       |       |       |       |       |       |       |          |       | 2     |       |        | 4 2.5  |
| Mediastinal, Hyperplasia, Lymphoid  |             |       |       |       |       |       |       |       | 3     |       |       |       |       |       |       |       | 3     |       |       |       |          | 2     | 2     |       |        | 4 2.5  |
| Mediastinal, Pigmentation           |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 3     | 3     |       |        | 4 3.0  |
| Pancreatic, Hemorrhage              |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |        | 2 1.5  |
| Lymph Node, Mandibular              | M           | M     | M     | +     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | M     | +        | M     | M     | M     | 3      |        |
| Lymph Node, Mesenteric              | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | +     | 50     |        |
| Atrophy                             |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       | 3 2.7  |        |
| Hemorrhage                          |             |       |       |       |       |       |       |       |       | 1     |       |       |       |       |       |       |       |       |       |       |          | 1     |       |       | 8 1.1  |        |
| Hyperplasia, Lymphoid               | 3           | 2     |       |       |       |       |       |       |       | 2     |       | 3     |       | 3     | 2     |       |       |       |       |       |          |       | 1     |       | 19 2.2 |        |
| Pigmentation                        |             |       | 3     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       | 3     | 3     | 6 3.0  |        |
| Spleen                              | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | +     | 50     |        |
| Fibrosis                            |             |       |       |       |       |       |       |       |       | 4     |       |       |       |       |       |       |       |       |       |       |          |       |       |       | 1 4.0  |        |
| Hematopoietic Cell Proliferation    | 2           | 1     |       | 2     |       | 2     |       |       |       | 1     |       | 1     |       | 2     | 3     |       | 2     |       |       |       | 1        | 2     |       | 3     | 1      | 29 2.0 |
| Hemorrhage                          |             |       |       | 4     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |        | 2 3.5  |
| Infiltration Cellular, Mixed Cell   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       | 4     |        | 1 4.0  |
| Necrosis                            |             |       |       | 4     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |        | 1 4.0  |
| Pigmentation                        |             |       |       |       |       |       |       |       |       | 3     | 3     |       |       |       | 3     |       |       |       | 3     |       |          |       |       |       |        | 15 3.0 |
| Lymphoid Follicle, Atrophy          |             |       |       |       | 3     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |        | 3 3.0  |
| Lymphoid Follicle, Hyperplasia      |             |       |       |       |       |       |       |       |       |       |       |       |       |       | 3     |       |       |       |       |       |          |       |       | 2     |        | 2 2.5  |
| Thymus                              | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | +     | 47     |        |
| Atrophy                             |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |        | 1 1.0  |
| Cyst                                |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |        | 1      |

**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  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

Time Report Requested: 12:57:38

First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| DAY ON TEST | FISCHER 344 RATS FEMALE |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |      |
|-------------|-------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|
|             | 0736                    | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 | 0736 |          | 0736 |
| ANIMAL ID   | 0076                    | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076 | 0076     | 0076 |

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |     |     |    |     |     |     |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|-----|-----|----|-----|-----|-----|
| Mammary Gland                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 50 |     |     |    |     |     |     |
| Hyperplasia                                 | 2 | 4 | 3 | 3 | 2 | 2 | 4 | 3 | 2 | 3 | 3 | 4 |   |   | 4 | 3 | 3 | 1 | 2 | 3 | 4  | 2   | 2   | 2  | 3   | 46  | 2.7 |
| Skin  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 50 |     |     |    |     |     |     |
| Ulcer                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  | 3.3 |     |    |     |     |     |
| Control, Hyperkeratosis                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  | 1.0 |     |    |     |     |     |
| Control Epidermis, Hyperplasia              | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 5   | 1.0 |    |     |     |     |
| Epidermis, Hyperplasia                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  | 3.5 |     |    |     |     |     |
| Epidermis, Site Of Application, Hyperplasia | 1 |   | 1 | 1 | 1 | 1 |   |   | 1 | 2 |   | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2  | 2   | 1   | 39 | 1.2 |     |     |
| Site Of Application, Hyperkeratosis         | 4 | 1 | 4 | 2 | 2 | 1 | 2 | 1 | 2 | 2 | 2 |   | 1 | 2 | 4 |   | 2 | 2 |   | 2 | 3  | 2   | 2   | 2  | 47  | 2.3 |     |

**MUSCULOSKELETAL SYSTEM**

|                        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |     |
|------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|-----|
| Bone                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 50 |     |
| Fibrous Osteodystrophy |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1  | 3.0 |

**NERVOUS SYSTEM**

|                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |     |
|------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|-----|
| Brain            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 50 |     |
| Compression      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 17 | 2.7 |
| Hemorrhage       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 2  | 3.0 |
| Necrosis         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 2  | 2.0 |
| Peripheral Nerve |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 3  |     |
| Spinal Cord      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 3  |     |

**RESPIRATORY SYSTEM**

|              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
|--------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|
| Lung         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 50 |
| Foreign Body |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade  
 + .. Tissue examined microscopically  
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 I .. Insufficient tissue  
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 1) Minimal 3) Moderate  
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TDMS No. 95003 - 05  
 Test Type: CHRONIC  
 Route: SKIN APPLICATION  
 Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL  
 Methyl trans-styryl ketone  
 CAS Number: 1896-62-4

Date Report Requested: 07/06/2010  
 Time Report Requested: 12:57:38  
 First Dose M/F: 04/05/04 / 04/05/04  
 Lab: SRI

| FISCHER 344 RATS FEMALE<br>90 MG/KG           | DAY ON TEST |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | * TOTALS |          |      |      |      |     |     |
|---|-------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|------|------|------|-----|-----|
|   | 07<br>36    | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 | 07<br>36 |          | 07<br>36 |      |      |      |     |     |
| ANIMAL ID                                     | 0076        | 0077     | 0078     | 0079     | 0080     | 0081     | 0082     | 0083     | 0084     | 0085     | 0086     | 0087     | 0088     | 0089     | 0090     | 0091     | 0092     | 0093     | 0094     | 0095     | 0096     | 0097     | 0098 | 0099 | 0100 |     |     |
| Hemorrhage                                    |             |          |          |          |          |          |          |          | 1        | 1        |          | 1        |          |          |          |          |          |          |          |          |          |          |      |      |      | 7   | 1.3 |
| Infiltration Cellular, Histiocyte             | 1           |          |          |          | 1        | 2        |          |          |          | 2        | 1        | 1        | 1        |          |          | 1        | 1        | 1        | 2        |          |          |          | 1    | 1    |      | 22  | 1.4 |
| Inflammation, Chronic                         |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1    |      |      | 7   | 1.0 |
| Metaplasia, Osseous                           |             |          |          |          |          |          |          |          | 1        |          |          |          | 1        |          |          |          |          |          |          |          |          |          |      |      |      | 3   | 1.0 |
| Pigmentation                                  |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 2    |      |      | 4   | 1.5 |
| Alveolar Epithelium, Hyperplasia              | 1           |          |          |          |          |          |          |          |          | 3        |          |          |          |          |          |          |          |          |          |          |          | 1        |      |      |      | 4   | 1.5 |
| Bronchiole, Hyperplasia                       |             |          | 2        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      |      |      | 1   | 2.0 |
| Serosa, Hyperplasia                           |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      |      |      | 1   | 1.0 |
| Nose  | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +    | +    | 50   |     |     |
| Foreign Body                                  |             |          |          |          | X        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | X        |      |      | 3    |     |     |
| Inflammation, Chronic                         |             |          |          |          | 1        |          |          |          |          | 1        |          |          |          |          |          |          |          |          |          |          |          | 1        |      |      | 9    | 1.0 |     |
| Olfactory Epithelium, Metaplasia, Respiratory |             |          |          |          | 2        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1        |      |      | 2    | 1.5 |     |
| Respiratory Epithelium, Hyperplasia           |             |          |          |          | 2        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 1        |      |      | 4    | 1.3 |     |
| Trachea                                       | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +    | +    | 50   |     |     |
| <b>SPECIAL SENSES SYSTEM</b>                  |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      |      |      |     |     |
| Eye   | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | M    | +    | 49   |     |     |
| Cataract                                      | 3           |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 3    |      | 3    | 3.0 |     |
| Retina, Degeneration                          | 4           |          |          |          |          | 2        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | 4        |      |      | 4    | 3.5 |     |
| Harderian Gland                               | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +    | +    | 50   |     |     |
| Inflammation, Chronic                         |             |          |          |          |          | 3        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      |      | 1    | 3.0 |     |
| <b>URINARY SYSTEM</b>                         |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      |      |      |     |     |
| Kidney  | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +    | +    | 50   |     |     |
| Cyst  |             |          |          |          |          |          |          |          |          | X        |          |          |          |          |          |          |          |          |          |          |          |          |      |      | 1    |     |     |
| Inflammation, Chronic                         |             |          |          |          |          |          |          |          |          | 2        |          |          |          |          |          |          |          |          |          |          |          |          | 2    |      | 3    | 2.0 |     |

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 Species/Strain: RATS/F 344/N

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

Methyl trans-styryl ketone

CAS Number: 1896-62-4

Date Report Requested: 07/06/2010

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First Dose M/F: 04/05/04 / 04/05/04

Lab: SRI

| DAY ON TEST                                 | FISCHER 344 RATS FEMALE |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |       |       |       |                 |               |
|---|-------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------|-------|-------|-----------------|---------------|
|   | 0736                    | 0736  | 0736  | 0724  | 0733  | 0757  | 0746  | 0767  | 0777  | 0777  | 0777  | 0777  | 0753  | 0736  | 0776  | 0766  | 0766  | 0773  | 0767  | 0777  |          | 0777  | 0777  |       |                 |               |
| 90 MG/KG                                    | ANIMAL ID               |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |                 |               |
|   | 00376                   | 00377 | 00378 | 00379 | 00380 | 00381 | 00382 | 00383 | 00384 | 00385 | 00386 | 00387 | 00388 | 00389 | 00390 | 00391 | 00392 | 00393 | 00394 | 00395 | 00396    | 00397 | 00398 | 00399 |                 |               |
| Nephropathy                                 | 2                       | 2     | 3     | 1     | 1     |       | 1     | 3     | 3     | 2     | 1     | 1     |       |       | 2     | 4     | 3     |       | 1     | 3     | 3        | 2     | 2     | 3     | 1               | <b>40 2.0</b> |
| Renal Tubule, Accumulation, Hyaline Droplet |                         |       |       |       |       |       |       |       |       |       |       |       |       |       | 3     |       |       |       |       |       |          |       |       |       |                 | <b>2 2.5</b>  |
| Renal Tubule, Dilatation                    |                         |       |       | 2     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |                 | <b>1 2.0</b>  |
| Renal Tubule, Hyperplasia                   |                         |       |       |       |       |       |       |       |       |       | 1     |       |       |       |       |       |       |       |       |       |          |       |       |       |                 | <b>1 1.0</b>  |
| Renal Tubule, Pigmentation                  |                         |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |                 | <b>2 2.5</b>  |
| Urinary Bladder Hemorrhage                  | +                       | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | +     | <b>50 1 3.0</b> |               |

\*\*\* 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