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TOXICOLOGY AND CARCINOGENESIS STUDIES OF AMPICILLIN TRIHYDRATE (CAS NO. 7177-48-2) IN F344/N RATS AND B6C3F1 MICE (GAVAGE STUDIES)

> U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Public Health Service National Institutes of Health

NATIONAL TOXICOLOGY PROGRAM

The National Toxicology Program (NTP), established in 1978, develops and evaluates scientific information about potentially toxic and hazardous chemicals. This knowledge can be used for protecting the health of the American people and for the primary prevention of disease. By bringing together the relevant programs, staff, and resources from the U.S. Public Health Service, DHHS, the National Toxicology Program has centralized and strengthened activities relating to toxicology research, testing and test development/validation efforts, and the dissemination of toxicological information to the public and scientific communities and to the research and regulatory agencies.

The NTP is made up of four charter DHHS agencies: the National Cancer Institute (NCI), National Institutes of Health; the National Institute of Environmental Health Sciences (NIEHS), National Institutes of Health; the National Center for Toxicological Research (NCTR), Food and Drug Administration; and the National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control. In July 1981, the Carcinogenesis Bioassay Testing Program, NCI, was transferred to the NIEHS.

NTP TECHNICAL REPORT ON THE

TOXICOLOGY AND CARCINOGENESIS STUDIES OF AMPICILLIN TRIHYDRATE

(CAS NO. 7177-48-2)

IN F344/N RATS AND B6C3F1 MICE

(GAVAGE STUDIES)



NATIONAL TOXICOLOGY PROGRAM P.O. Box 12233 Research Triangle Park, NC 27709

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NOTE TO THE READER

These studies are designed and conducted to characterize and evaluate the toxicologic potential, including carcinogenic activity, of selected chemicals in laboratory animals (usually two species, rats and mice). Chemicals selected for testing in the NTP Carcinogenesis Program are chosen primarily on the bases of human exposure, level of production, and chemical structure. Selection per se is not an indicator of a chemical's carcinogenic potential. Negative results, in which the test animals do not have a greater incidence of cancer than control animals, do not necessarily mean that a test chemical is not a carcinogen, inasmuch as the experiments are conducted under a limited set of conditions. Positive results demonstrate that a test chemical is carcinogenic for animals under the conditions of the test and indicate that exposure to the chemical has the potential for hazard to humans. The determination of the risk to humans from chemicals found to be carcinogenic in animals requires a wider analysis which extends beyond the purview of this study.

Five categories of interpretative conclusions were adopted for use in June 1983 in the Technical Reports series to specifically emphasize consistency and the concept of actual evidence of carcinogenicity. For each definitive study result (male rats, female rats, male mice, female mice), one of the following quintet will be selected to describe the findings. These categories refer to the strength of the experimental evidence and not to either potency or mechanism.

- Clear Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing a chemically related increased incidence of malignant neoplasms, studies that exhibit a substantially increased incidence of benign neoplasms, or studies that exhibit an increased incidence of a combination of malignant and benign neoplasms where each increases with dose.
- Some Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing a chemically related increased incidence of benign neoplasms, studies that exhibit marginal increases in neoplasms of several organs/tissues, or studies that exhibit a slight increase in uncommon malignant or benign neoplasms.
- Equivocal Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing a chemically related marginal increase of neoplasms.
- No Evidence of Carcinogenicity is demonstrated by studies that are interpreted as showing no chemically related increases in malignant or benign neoplasms.
- **Inadequate Study of Carcinogenicity** demonstrates that because of major qualitative or quantitative limitations, the studies cannot be interpreted as valid for showing either the presence or absence of a carcinogenic effect.

Additionally, the following concepts (as patterned from the International Agency for Research on Cancer Monographs) have been adopted by the NTP to give further clarification of these issues:

The term *chemical carcinogenesis* generally means the induction by chemicals of neoplasms not usually observed, the earlier induction by chemicals of neoplasms that are commonly observed, or the induction by chemicals of more neoplasms than are generally found. Different mechanisms may be involved in these situations. Etymologically, the term *carcinogenesis* means induction of cancer, that is, of malignant neoplasms; however, the commonly accepted meaning is the induction of various types of neoplasms or of a combination of malignant and benign neoplasms. In the Technical Reports, the words *tumor* and *neoplasm* are used interchangeably.

This study was initiated by the National Cancer Institute's Carcinogenesis Bioassay Program, now part of the National Institute of Environmental Health Sciences, National Toxicology Program. The studies described in this Technical Report have been conducted in compliance with NTP chemical health and safety requirements and must meet or exceed all applicable Federal, state, and local health and safety regulations. Animal care and use were in accordance with the U.S. Public Health Service Policy on Humane Care and Use of Animals. All NTP toxicology and carcinogenesis studies are subjected to a data audit before being presented for peer review.

Although every effort is made to prepare the Technical Reports as accurately as possible, mistakes may occur. Readers are requested to identify any mistakes so that corrective action may be taken. Further, anyone who is aware of related ongoing or published studies not mentioned in this report is encouraged to make this information known to the NTP. Comments and questions about the National Toxicology Program Technical Reports on Toxicology and Carcinogenesis Studies should be directed to Dr. J.E. Huff, National Toxicology Program, P.O. Box 12233, Research Triangle Park, NC 27709 (919-541-3780).

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AMPICILLIN TRIHYDRATE CAS No. 7177-48-2

Synonyms and trade names: Acillin, Amcap, Amcill, aminobenzylpencillin trihydrate, a-aminobenzylpencillin trihydrate, Amperil, Ampichel, Ampikel, Ampinova, Amplin, Cymbi, Divercillin, Liffampil, Morepen, Pen A, Pensyn, Polycillin, Princillin, Principen, Ro-ampen, Trafarbiot

Solubility: 1 g/150 ml water; insoluble in alcohol, acetone, chloroform, ether and oils

 $C_{16}H_{19}N_3O_4S \cdot 3H_2O$

Molecular weight 403.46

ABSTRACT

Toxicology and carcinogenesis studies of ampicillin trihydrate (97%-99% pure) were conducted by administering the chemical in corn oil by gavage to groups of 50 F344/N rats and 50 B6C3F₁ mice of each sex, 5 days per week for 103 weeks. Male and female rats received doses of 0, 750, or 1,500 mg/kg, and male and female mice received doses of 0, 1,500, or 3,000 mg/kg. Doses selected for the 2year studies were based on the lack of body weight effects and histopathologic effects at 2,400 mg/kg in the 14-day studies and 3,000 mg/kg in the 13-week studies. Clinical signs in the 13-week studies included diarrhea at 3,000 mg/kg in male and female rats and male mice. Corn oil suspensions containing more than 300 mg ampicillin trihydrate/ml were too viscous to be administered by gavage; therefore, a high dose of 1,500 mg/kg was selected for rats and a high dose of 3,000 mg/kg was selected for mice.

During the 2-year studies, mean body weights of male and female rats were similar to or slightly increased over those of the corresponding vehicle control groups. Mean body weights of low dose and high dose male mice were similar to those of the corresponding vehicle control group during year 1 of the study but were slightly below those of the vehicle control group during the last half of the study. Mean body weights of low dose and high dose female mice were greater than those of the vehicle controls throughout most of the study. No significant differences in survival were observed in groups of rats or mice of either sex. Clinical signs observed in dosed rats included diarrhea, excessive urination, and chromodacryorrhea and in dosed mice included increased salivation and decreased activity.

In male rats, administration of ampicillin trihydrate was associated with an increased incidence of mononuclear cell leukemia (vehicle control, 5/50; low dose, 14/50; high dose, 13/50). Malignant lymphomas were observed in one additional vehicle control male rat and two low dose male rats. Lymphocytic leukemia was seen in one high dose male rat. High dose male rats showed increased incidences of pheochromocytomas of the adrenal gland medulla (13/50; 12/50; 23/49). Malignant pheochromocytomas were observed in 1/50 vehicle control, 5/50 low dose, and 1/49 high dose male rats. The incidence of adrenal gland medullary hyperplasia was not increased in male rats (14/50; 10/50; 8/49). There were increased incidences of C-cell hyperplasia of the thyroid gland in low dose male and high dose female rats. High dose male rats showed increased incidences of hyperkeratosis and acanthosis of the forestomach.

In male and female mice, ampicillin trihydrate administration was associated with increased incidences of forestomach lesions, including ulcers, inflammation, hyperkeratosis, acanthosis, and evidence of fungal infection.

Ampicillin trihydrate was not mutagenic in *Salmonella typhimurium* strains TA98, TA100, TA1535, or TA1537 in the presence or absence of Aroclor 1254-induced male Syrian hamster or male Sprague-Dawley rat liver S9 when tested according to the preincubation protocol. Ampicillin trihydrate was not mutagenic in L5178Y mouse lymphoma cells with or without metabolic activation. Ampicillin trihydrate did not cause chromosomal aberrations or sister-chromatid exchanges in Chinese hamster ovary cells with or without metabolic activation.

An audit was conducted for these 2-year studies. Animal/carcass identification discrepancies were observed in rats and mice. The most common findings were the failure to clip some toes in rats and opened ear holes in mice. A review of the inlife data (including body weights, clinical observations, and dosing records) indicated that animals had not been interchanged among groups. The data are considered adequate to support the conclusions.

Under the conditions of these 2-year gavage studies, there was equivocal evidence of carcinogenicity* of ampicillin trihydrate for male F344/N rats as shown by increased incidences of pheochromocytomas of the adrenal medulla and by marginally increased incidences of mononuclear cell leukemia. There was no evidence of carcinogenicity for female F344/N rats receiving 750 or 1,500 mg/kg or for male and female B6C3F₁ mice receiving 1,500 or 3,000 mg/kg per day. Nonneoplastic lesions of the forestomach were seen in male rats and male and female mice.

^{*}Categories of evidence of carcinogenicity are defined in the Note to the Reader on page 2.

A summary of the Peer Review comments and the public discussion on this Technical Report appears on pages 13-14.

CONTRIBUTORS

The NTP Technical Report on the Toxicology and Carcinogenesis Studies of Ampicillin Trihydrate is based on the 13-week studies that began in December 1979 and ended in March 1980 and on the 2-year studies that began in August 1980 and ended in September 1982 at Springborn Institute for Bioresearch, Inc.

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PEER REVIEW PANEL

The members of the Peer Review Panel who evaluated the draft Technical Report on ampicillin trihydrate on December 9, 1985, are listed below. Panel members serve as independent scientists, not as representatives of any institution, company, or governmental agency. In this capacity, Panel members have five major responsibilities: (a) to ascertain that all relevant literature data have been adequately cited and interpreted, (b) to determine if the design and conditions of the NTP studies were appropriate, (c) to ensure that the Technical Report presents the experimental results and conclusions fully and clearly, (d) to judge the significance of the experimental results by scientific criteria, and (e) to assess the evaluation of the evidence of carcinogenicity and other observed toxic responses.

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SUMMARY OF PEER REVIEW COMMENTS ON THE TOXICOLOGY AND CARCINOGENESIS STUDIES OF AMPICILLIN TRIHYDRATE

On December 9, 1985, the draft Technical Report on the toxicology and carcinogenesis studies of ampicillin trihydrate received peer review by the National Toxicology Program Board of Scientific Counselors' Technical Reports Review Subcommittee and associated Panel of Experts. The review meeting was held at the National Institute of Environmental Health Sciences, Research Triangle Park, North Carolina.

Dr. J. Dunnick, NTP, introduced the studies by reviewing the experimental design, results, and proposed conclusions (equivocal evidence of carcinogenicity in male rats; no evidence of carcinogenicity in female rats or in male and female mice).

Dr. Kociba, a principal reviewer, agreed with the conclusions as written for female rats and male and female mice. However, he said that the conclusion for male rats should be expressed as equivocal evidence of benign tumor induction, based on the increased incidence of adrenal gland pheochromocytomas. He thought that, within the range of historical control incidences, the increased incidence of mononuclear cell leukemia was not compound related. Dr. Kociba said that the design of both the 13-week and 2-year studies would have been made more useful by inclusion of clinical pathology, more detailed clinical observations, and ampicillin blood levels, possibly being correlated with pharmacologic effects. He requested deletion of the last sentence in the conclusions regarding nonneoplastic lesions.

As second principal reviewer, Dr. Turnbull agreed with the conclusions for female rats and male and female mice. He said that the evidence for any increase in mononuclear cell leukemia was weak and should not be part of the conclusion for male rats. He asked that the report indicate whether original and quality assurance (QA) pathology examinations were performed in a "blind" fashion with respect to dose group or other diagnoses. Dr. S. Eustis, NIEHS, indicated that the Program did not routinely endorse pathology diagnoses without awareness of all relevant information. During the PWG, however, there is "blind" pathology in some select instances.

Most of the ensuing discussion dealt with the level of evidence of carcinogenicity in male rats and whether the increased incidences of adrenal medullary pheochromocytomas and mononuclear cell leukemia were related to administration of ampicillin trihydrate. Dr. Swenberg commented that the incidences of mononuclear cell leukemia in both low and high dose groups (28% and 26%, respectively) were almost double the historical control average (14%) and were at the top of the historical range. Thus, in his opinion, equivocal evidence of carcinogenicity was appropriate. Dr. Mirer argued that the positive trend test and statistical significance of increases in mononuclear cell leukemia by the life table test supported a designation of some evidence of carcinogenicity. Dr. Perera agreed. Dr. Eustis said that the highly variable incidence of mononuclear cell leukemia argued for the level chosen. In response to Dr. Perera, Dr. J. Huff, NIEHS, noted the decreased incidence of adrenal medullary hyperplasia, a precursor lesion to pheochromocytoma, in both dose groups. Dr. Turnbull questioned the appropriateness of the life table test for analysis in view of the numbers of rats with mononuclear cell leukemia surviving to the end of the studies. Dr. J. Haseman, NIEHS, replied that mononuclear cell leukemia is generally considered by the NTP to be a fatal tumor, although this determination is not clear-cut in this instance, since the leukemia incidences were similar in male rats dying before the end of the study and in the animals surviving 2 years.

Dr. Hooper moved that the conclusions in the Technical Report on ampicillin trihydrate be accepted as written for female rats and male and female mice, no evidence of carcinogenicity. Dr. Mirer seconded the motion, and it was approved unanimously with 11 affirmative votes. Dr. Kociba moved that the phrase "and marginally increased incidence of mononuclear cell leukemia" be deleted from the first sentence of the conclusion as supporting equivocal evidence of carcinogenicity in male rats. Dr. Swenberg seconded the motion, and it was defeated by six votes (Drs. Hooper, Mirer, Perera, Scala, Swenberg, and Tannenbaum) to five votes (Drs. Crowley, Jones, Kociba, Purchase, and Turnbull). Dr. Swenberg then moved that the conclusions as written for male rats, equivocal evidence of carcinogenicity, be accepted. Dr. Tannenbaum seconded the motion, and it was approved by six affirmative votes to one negative vote (Dr. Kociba) with four abstentions (Drs. Crowley, Jones, Purchase, and Turnbull).

I. INTRODUCTION



AMPICILLIN TRIHYDRATE CAS No. 7177-48-2

Synonyms and trade names: Acillin, Amcap, Amcill, aminobenzylpencillin trihydrate, a-aminobenzylpencillin trihydrate, Amperil, Ampichel, Ampikel, Ampinova, Amplin, Cymbi, Divercillin, Liffampil, Morepen, Pen A, Pensyn, Polycillin, Princillin, Principen, Ro-ampen, Trafarbiot

Solubility: 1 g/150 ml water; insoluble in alcohol, acetone, chloroform, ether and oils

$C_{16}H_{19}N_3O_4S \bullet 3H_2O$

Molecular weight 403.46

Ampicillin trihydrate is a broad-spectrum semisynthetic penicillin that is effective in the treatment of gram-positive and gram-negative bacterial infections produced by Streptococcus, *Bacillus anthracis, Haemophilus influenzae, Neisseria gonorrhoeae,* and *Escherichia coli.* This antibiotic is used in the treatment of upper respiratory tract infections, genital and urinary tract infections, and otitis media in children (PDR, 1984; Mandell and Sande, 1980).

The ampicillins, also known as 2-aminobenzylpenicillins, were first used in the early 1960's. This group of antibiotics is widely used because of its stability in acid, low toxicity, broad spectrum of action, and efficient absorption after oral administration. Ampicillin, like the other penicillins, consists of a thiazolidine ring connected to a beta-lactam ring and a unique side chain that differentiates this from the other antibiotics (e.g., a broad spectrum of activity against both gram-positive and gram-negative bacteria and acid stability) (Mandell and Sande, 1980; Frank et al., 1961; Kaufmann and Bauer, 1963; Johnson and Hardcastle, 1964; Johnson and Wolfe, 1964). beta-Lactam antibiotics may be inactivated by penicillinase that opens the *beta*-lactam ring or by amidases that break the side chain (Mandell and Sande, 1980). beta-Lactam

antibiotics exert their bactericidal effects by inhibiting the cross-linking step (transpeptidation) of bacterial cell wall biosynthesis (Waxman and Strominger, 1983).

Production and Human Exposure

Ampicillin products are distributed by several drug companies in the United States, and an estimated 18.5 million prescriptions were written for ampicillin products in 1982, making this among the top 25 prescription drug chemicals (FDA, 1983). Humans are exposed systemically to ampicillin products through oral administration or by intramuscular or intravenous injection for the treatment of bacterial infections.

Doses of ampicillin trihydrate vary depending on the type of disease treated and age of the patient, but doses are normally between 50 and 200 mg/kg per day, usually given in four equally divided doses (PDR, 1984; McCracken, 1983). The most common side effects reported are hypersensitivity (anaphylactoid) reactions. Other side effects reported (incidence not specified) include gastrointestinal symptoms, such as nausea, vomiting, and diarrhea; skin rashes; elevated serum glutamic oxaloacetic transaminase; and reversible effects on the hemic and lymphatic system, including anemia, thrombocytopenia, and leukopenia (PDR, 1984; Erffmeyer, 1981). Penicillin and structurally related antibiotics elicit antibodies of all the major classes (IgE, IgA, IgM, IgG, IgD). When a person has an allergy to one penicillin, it is assumed that he may be allergic to all penicillins (Erffmeyer, 1981).

Reproductive and Teratogenic Effects

The penicillins are probably the antibiotics prescribed most frequently during pregnancy (Ledger, 1977). Reproductive toxicity of ampicillin has not been reported to be a side effect of treatment in humans (PDR, 1984; Erffmeyer, 1981; Mandell and Sande, 1980). Ampicillin has been reported to cross the human placenta (Perry and Le Blanc, 1967; Adamkin et al., 1984; Stewart et al., 1973), although no congenital disorders have been associated with ampicillin treatment during pregnancy (Jick et al., 1981; Korzhova et al., 1981).

Effects in Animals

Ampicillin administered as a single oral or subcutaneous dose of up to 5 g/kg had no observable toxic effect in mice or rats. An intravenous dose of ampicillin (2 g/kg) to mice caused muscle tremors, slow respiration, and mild convulsions. No effects or biochemical, hematologic, or histologic abnormalities were seen in rats administered ampicillin orally at 100 or 500 mg/kg for 12 weeks (Brown and Acred, 1961). Ampicillin administered in the drinking water (25 mg/liter) to 4-week-old rats for up to 8 weeks resulted in an increase in body weight gain; no toxic effects were noted (King, 1975). The LD_{50} value (intraperitoneal injection) is 3,300 mg/kg for 1-day-old rats and 4,500 mg/kg for 83-day-old rats (Goldenthal, 1971). The oral LD_{50} value in rats is 10 g/kg and in mice is 15.2 g/kg (Khosid et al., 1975). Deaths occurred in 63%, 45%, and 100% of the rabbits receiving oral doses of 5, 15, or 50 mg/kg of ampicillin for 3 consecutive days (Milhaud et al., 1976).

Absorption, Distribution, and Metabolism

When ampicillin is administered orally to humans, peak serum levels are reached in about

2 hours; after intramuscular injection, peak serum levels are reached in about 1 hour (Wright and Wilkowske, 1983). Absorption in the duodenum is approximately 50% after oral administration (Loo et al., 1974). Ampicillin is excreted primarily in the urine, although biliary excretion also occurs (Jusko and Lewis, 1973). alpha-Aminobenzyl penicilloic acid was tentatively found to be the major metabolite in the urine (Masada et al., 1979, 1980). The plasma half-life of ampicillin is approximately 1.5 hours: 18% of the drug is bound to protein (Schumacher, 1982). The plasma half-life of ampicillin increases in the elderly, indicating decreased drug elimination (Triggs et al., 1980). Ampicillin is distributed to the major organ systems in rats, and the half-life of ampicillin in rats after intraperitoneal injection is estimated to be 27 minutes (Fabre et al., 1977).

Mutagenicity

The mutagenicity of ampicillin has been evaluated in both bacterial cells and mammalian cells in culture. Although ampicillin is an antimicrobial agent, Salmonella typhimurium can be used to assay its mutagenic activity because an end point other than cell death is monitored. The mutagenic activity of ampicillin can be measured at doses that do not produce extreme toxicity. Similar tests have been used to evaluate the mutagenic activity of other antimicrobials, including nitrofurantoin and streptomycin sulfate (Haworth et al., 1983). Ampicillin was not mutagenic in S. typhimurim strains TA1535, TA100, TA1530, TA98, TA1537, or TA97 with or without metabolic activation (De Flora et al., 1984). These results are consistent with those of NTP studies which indicated that ampicillin is not mutagenic in S. typhimurium strains TA1535, TA1537, TA98, or TA100 in the presence or absence of Aroclor 1254-induced male Sprague-Dawley rat or male Syrian hamster liver S9 when tested in a preincubation protocol (Appendix G. Table G1: Mortelmans et al., 1986). Ampicillin did not induce DNA damage in Escherichia coli in the absence of metabolic activation (Green and Tweats, 1981). It was also a weak inducer of lambda phage in E. coli (Elespuru and Pennington, 1981). Ampicillin trihydrate was not mutagenic in the mouse lymphoma L5178Y/TK $^{+/-}$ assay in the presence

or absence of Aroclor 1254-induced male F344 rat liver S9 (Tables G2 and G3).

Tests for cytogenetic effects in Chinese hamster ovary cells indicated that ampicillin trihydrate does not cause an increase in sister-chromatid exchanges or chromosomal aberrations in the presence or absence of S9 prepared from liver of Aroclor 1254-induced male Sprague-Dawley rats (Tables G4 and G5). No visible chromosomal breakage or structural alterations were found in cultures of human diploid fibroblasts incubated for 50 hours with 4 mg ampicillin per milliliter (Byarugaba et al., 1975). In human lymphocytes exposed in vitro to ampicillin at 28 µg/ml, a statistically significant (P < 0.05) increase in the frequency of chromosomal aberrations was observed along with a slight depression (13.44%) of the mitotic index (Jaju et al., 1984). However, at 7 or 14 μ g/ml (levels corresponding to those in plasma of adults given a 500-mg or 1-g intramuscular injection of the drug), no effects on the frequency of chromosomal aberrations or the mitotic index were observed. The frequency of sister-chromatid exchanges was not increased at any of these exposure levels. Jaju et al. (1984) discussed other studies in which ampicillin was shown to induce chromosomal damage in human lymphocytes. Crippa et al. (1976) had previously reported no significant increase in chromosomal abnormalities in lymphocytes of patients with rheumatism who had been treated with ampicillin and other drugs.

Study Rationale

Ampicillin trihydrate was selected for study as a representative of the ampicillin-type penicillins for which carcinogenicity data were not available. Ampicillin is one of the most frequently prescribed drugs in the United States (FDA, 1983), and exposure may occur throughout life. Ampicillin trihydrate was administered orally by gavage to mimic human intake of the drug and because it was found to be unstable in feed. Ampicillin trihydrate is only slightly soluble in water; therefore, corn oil was selected to improve suspendability in the gavage vehicle.

II. MATERIALS AND METHODS

PROCUREMENT AND CHARACTERIZATION OF AMPICILLIN TRIHYDRATE PREPARATION AND CHARACTERIZATION OF DOSE MIXTURES FOURTEEN-DAY STUDIES THIRTEEN-WEEK STUDIES

TWO-YEAR STUDIES

Study Design Source and Specifications of Animals Animal Maintenance Clinical Examinations and Pathology Statistical Methods

PROCUREMENT AND CHARACTERIZATION OF AMPICILLIN TRIHYDRATE

USP-grade ampicillin trihydrate was obtained in two lots (Table 1). The identity of the chemical was confirmed by infrared, ultraviolet/visible, and nuclear magnetic resonance spectroscopy (Appendix H). All spectroscopic data were consistent with the structure of ampicillin trihydrate. The chemical purity of both lots was determined to range from 98% to 99% (calculated on a dried basis) by elemental analysis, nonaqueous titration of amine and acidic functional groups, and thin-layer and high-performance liquid chromatography. Water content was determined to range from 13.2% to 14.3% by Karl Fischer analysis. High-performance liquid chromatography indicated that each lot contained 1.1%-2.2% total impurities; these impurities were not identified. Both lots of ampicillin trihydrate conformed to USP specifications.

An NTP stability study indicated that ampicillin trihydrate was stable when stored in the dark for 2 weeks at temperatures up to 60° C (Appendix H). Ampicillin trihydrate was stored at the study laboratory in the dark at 4° C. Reanalysis of the bulk chemical by infrared spectroscopy, titration, and high-performance liquid chromatography indicated no deterioration of ampicillin trihydrate over the course of the studies.

PREPARATION AND CHARACTERIZATION OF DOSE MIXTURES

Stability studies of ampicillin trihydrate mixed in NIH 07 Rat and Mouse Ration indicated that a 1% blend of ampicillin trihydrate was unstable when stored for 2 weeks at temperatures ranging from 5° C to 45° C (Appendix I). Ampicillin trihydrate is only slightly soluble in water. Corn oil enhanced the suspendability of ampicillin trihydrate and was therefore selected as the vehicle for gavage administration. Corn oil suspensions of ampicillin trihydrate were prepared relatively easily at concentrations up to 300 mg/ml. At higher concentrations, the dose mixtures were too viscous to be drawn through an 18-gauge gavage needle. Ampicillin trihydrate and corn oil were blended as described in Table 2. A 100 mg/ml suspension in corn oil was stable when stored at room temperature for 2 weeks (Appendix I). Ampicillin trihydrate/corn oil mixtures were stored at 4° C for no longer than 14 days. The dose mixtures were resuspended before being administered to the animals.

Periodic analyses for ampicillin trihydrate in corn oil were performed to determine if the dose mixtures contained the correct concentrations (Appendix J). Because 27/30 of the dose mixtures were within $\pm 10\%$ of the target concentrations, it is estimated that dose mixtures for the 2-year studies were formulated within specifications 90% of the time (Table 3; Appendix K, Table K2). The other samples were within $\pm 20\%$ of the target concentrations.

FOURTEEN-DAY STUDIES

Oral LD_{50} values for ampicillin in rats and mice had previously been reported in the literature (rats--10.0 g/kg; mice--15.2 g/kg; Khosid et al., 1975). For this reason, the studies of ampicillin

TABLE 1.	IDENTITY	AND SOURCE	OF LOTS U	SED IN TH	E GAVAGE	STUDIES	OF AMPICILLIN
			TR	IHYDRATE			

	Fourteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
Lot Numbers	61849K	61849K	61849K, 33564-550
Date of Initial Use	9/10/79	12/20/79	Lot 618 49K9 /2/80 (rats), 8/25/80 (mice); lot 33564-550week 72
Supplier E.R. Squibb & Sons, Inc. (Princeton, NJ), manufactured by Ersana, Inc. (Humacao, Puerto Rico)		Same as 14-d studies	Ersana, Inc. (Humacao, Puerto Rico)

	Fourteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
Preparation	Ampicillin trihydrate was mixed in a 250-ml beaker with part of the corn oil; premix then brought to volume with corn oil in a 100-ml volumetric flask, mixed, and then blended in a Waring blender.	Weighed ampicillin trihydrate mixed with corn oil in Waring blender, transferred to volumetric flask and brought to volume with corn oil, mixed in flask, then transferred to a beaker and mixed with a stir- ring bar and magna-stirrer	Ampicillin trihydrate initially prepared with corn oil as 30% or 15% (w/v) suspensions, mixed in Waring blender or Tekmer homogenizer. The suspension was divided into amounts needed daily.
Maximum Storage Time	1 d	2 wk	2 wk
Storage Conditions	4° C	4° C	4° C

TABLE 2. PREPARATION AND STORAGE OF DOSE MIXTURES IN THE GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE

TABLE 3. SUMMARY OF RESULTS OF ANALYSIS OF DOSE MIXTURES IN THE TWO-YEAR GAVAGESTUDIES OF AMPICILLIN TRIHYDRATE

	Concentration of Ampicillin Trihydrate in Corn Oil for Target Concentration (percent, w/v) (a)	
	15	30
Mean (percent, w/v)	15.0	29.3
Range (percent, w/v)	12.3-17.9	26.6-32.1
Standard deviation	1.14	1.31
Coefficient of variation (percent)	7.6	4.5
Sumber of samples	15	15

began with the 14-day studies. Ampicillin trihydrate/corn oil suspensions at concentrations above 300 mg/ml were too viscous to be easily administered by gavage. The NTP guidelines for gavage administration suggest that the volume not exceed 5 ml/kg for rats and 10 ml/kg for mice, corresponding to 1,500 and 3,000 mg/kg body weight, respectively.

Male and female F344/N rats and B6C3F₁ mice were obtained from Charles River Breeding Laboratories and held for 17 days before the studies began. Groups of five rats and five mice of each sex were administered 0, 200, 400, 800, 1,600, or 2,400 mg/kg ampicillin trihydrate in corn oil by gavage for 14 consecutive days with a high dose volume of 8 ml/kg body weight. An exception to the dose volume limitation was made for these studies in rats so that the effects of the compound at the same dose could be compared in rats and mice. Animals were housed five per cage and received feed and water ad libitum. Further details of animal maintenance are presented in Table 4. The rats and mice were observed twice per day and weighed on days 0, 8, and 14. A necropsy was performed on all animals. A histologic examination was performed on three animals of each sex in the 2,400 mg/kg groups.

THIRTEEN-WEEK STUDIES

Thirteen-week studies were conducted to evaluate the cumulative toxic effects of repeated administration of ampicillin trihydrate and to determine the doses to be used in the 2-year studies.

Five-week-old male and female F344/N rats and B6C3F₁ mice were obtained from Charles River Breeding Laboratories, observed for 15 days, and assigned to cages according to a table of random

TABLE 4. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS IN THE GAVAGE STUDIES OFAMPICILLIN TRIHYDRATE

	Fourteen-Day Studies	Thirteen-Week Studies	Two-Year Studies
EXPERIMENTAL DES	IGN		
Size of Study Groups	5 males and 5 females of each species	10 males and 10 females of each species	50 males and 50 females of each species
Doses	0, 200, 400, 800, 1,600, or 2,400 mg/kg ampicillin trihydrate in corn oil by gavage; dose vol0.67-8 ml/kg	Rats0, 180, 370, 750, 1,500, or 3,000 mg/kg ampicillin tri- hydrate in corn oil by gavage; dose vol5 ml/kg (3,000 mg/kg group given 1,500 mg/kg $2 \times d$ at least 5 h apart); mice0, 250, 500, 1,000, 2,000, or 3,000 mg/kg ampicillin trihydrate in corn oil by gavage; dose vol10 ml/kg	Rats0, 750, or 1,500 mg/kg ampicillin trihydrate in corn oil by gavage; dose vol5 ml/kg; mice0, 1,500, er 3,000 mg/kg ampicillin trihydrate in corn oil by gavage; dose vol10 ml/kg
Date of First Dose	9/10/79	12/20/79	Rats9/2/80; mice8/25/80
Date of Last Dose	9/23/79	3/19/80	Rats8/23/82; mice8/13/82
Duration of Dosing	14 consecutive d	5 d/wk for 13 wk	5 d/wk for 103 wk
Fype and Frequency of Observation	Observed $2 \times d$; weighed on d 0, 8, and 14	Observed 2 $ imes$ d; weighed 1 $ imes$ wk	Observed 1 or $2 \times d$; weighed 1 \times wk for 12 wk, then 1 \times 4 wk; palpation of animals was per- formed 1 \times mo from wk 41 to 101
Necropsy and Histologic ExaminationNecropsy performed on all animals. Histologic exams performed on three per sex per species of the high dose group. Tissues examined: regional lymph nodes, skin, mandibular lymph nodes, skin, mammary gland, salivary glands, thigh muscle, sciatic nerve, bone marrow, costo- chondral junction (rib), thy- mus, larynx, trachea, lungs and bronchi, heart, thyroid gland, parathyroids, esophagus, stomach, duodenum, jejunum, ileum, colon, rectum, mesen- teric lymph nodes, liver, pan- creas, spleen, kidneys, adrenal glands, urinary bladder, semi- nal vesicles/prostate/testis or ovaries/uterus, nasal cavity, brain, pituitary gland, eyes, external and middle ear, spinal cord, and gallbladder (mice)		Necropsy performed on all animals. Histologic exams performed on vehicle control and high dose groups and on all animals dying during the study. Tissues examined: same as the 14-d studies	Necropsy and histologic exam performed on all animals; the following tissues were examined gross lesions and tissue masses, blood smear, mandibular or mesenteric lymph nodes, salivar, glands, sternebrae, femur, or vertebrae including marrow, thyroid gland, parathyroids, small intestine, large intestine, liver, prostate/testes/epididymis or ovaries/uterus, lungs with mainstem bronchi, skin, heart, esophagus, stomach, brain, thymus, trachea, pancreas, spleen, kidneys, adrenal glands, urinary bladder, pituitary gland, spinal cord (if neurologic signs present), eyes (if grossly abnormal), mammary glands and pharynx (if grossly abnorma
ANIMALS AND ANIMA	AL MAINTENANCE		
Strain and Species	F344/N rats; B6C3F ₁ mice	Same as 14-d studies	Same as 14-d studies
Animal Source	Charles River Breeding Laboratories (Portage, MI)	Same as 14-d studies	Same as 14-d studies
Study Laboratory	Springborn Institute for Bioresearch, Inc.	Same as 14-d studies	Same as 14-d studies

	Fourteen-Day Studies	Thirteen-Week Studies	Two-Year Studies	
ANIMALS AND ANIM	IAL MAINTENANCE (Cont	inued)		
Method of Animal Identification	Toe clip and ear punch	Same as 14-d studies	Same as 14-d studies	
Time Held Before Study	17 d	15 d	18 d	
Age When Placed on Study	52 d	7 wk	Rats and mice7-8 wks	
Age When Killed	66 d	20 wk	Rats and mice111-112 wks	
Necropsy Dates	9/24/79	3/20/80-3/21/80	Rats8/30/82-9/2/82; mice8/23/82-8/25/82	
Method of Animal Distribution	According to tables of random numbers	Same as 14-d studies	Same as 14-d studies	
Feed	NIH 07 Rat and Mouse Ration (Zeigler Bros., Gardners, PA); available ad libitum	Same as 14-d studies	Same as 14-d studies	
Bedding	Anipads (Ancare Corp., L.I., NY)	Ancubes (Ancare Corp., L.I., NY)	Heat-treated hardwood chips (Ancare Corp., L.I., NY)	
Water	City water in bottles; available ad libitum	Half deionized/half tap water; automatic watering system (Edstrom Industries, Waterford, WI); available ad libitum	City water from deep well passed through reverse osmosis unit to remove 90% of the dissolved salts (Osmonics, Inc., Hopkins, MN); rats and group housed miceauto matic watering system (Edstrom Industries, Waterford, WI); available ad libitum; water in bottles for mice housed individually	
Cages	Stainless steel wire mesh hanging cages (Shoreline, Kansas City, MO)	Polycarbonate (Lab Products, Inc., Rochelle Park, NJ)	Same as 13-wk studies	
Cage Filters	None	100% polyester filter sheets (Snow Filtration, Cincinnati, OH)	Same as 13-wk studies ; no filter sheets for mice housed individually	
Animals per Cage	5	5	5 except for some aggressive and/or wounded male mice housed individually	
Other Chemicals on Study in the Same Room	None	None	None	
Animal Room Environment	Temp71.2° \pm 0.9° F; humidity70% \pm 6.2%; fluorescent light 12 h/d; 12 room air changes/h	Temp70.6° \pm 1.5° F; humidity53% \pm 7.4%; fluorescent light 12 h/d; 12 room air changes/h	Temp66°-81° F; humidity18%-100%; fluorescent light 12 h/d; 12 room air changes/h	

TABLE 4. EXPERIMENTAL DESIGN AND MATERIALS AND METHODS IN THE GAVAGE STUDIES OF AMFICILLIN TRIKYDRATE (Continued)

numbers. The cages were then assigned to dosed and vehicle control groups according to a table of random numbers.

Groups of 10 rats of each sex were administered 0, 180, 370, 750, 1,500, or 3,000 mg/kg 5 days per week for 13 weeks. Rats in the highest dose group (3,000 mg/kg) were administered 1,500 mg/kg (5 ml/kg) twice daily at least 5 hours apart 5 days per week for 13 weeks. All other groups received one administration of 5 ml/kg. Groups of 10 mice of each sex were administered 0, 250, 500, 1,000, 2,000, or 3,000 mg/kg (dose volume, 10 ml/kg body weight) 5 days per week for 13 weeks.

Animals were checked twice per day; moribund animals were killed. Animal weights were recorded weekly. Further experimental details are summarized in Table 4.

At the end of the 13-week studies, survivors were killed. A necropsy was performed on all animals except those excessively autolyzed or cannibalized. Tissues and groups examined are listed in Table 4.

TWO-YEAR STUDIES

Study Design

Groups of 50 rats of each sex were administered 0, 750, or 1,500 mg/kg ampicillin trihydrate in corn oil by gavage, 5 days per week for 103 weeks (dose volume, 5 ml/kg body weight). Groups of 50 mice of each sex were administered 0, 1,500, or 3,000 mg/kg on the same schedule (dose volume, 10 ml/kg body weight).

Source and Specifications of Animals

The male and female F344/N rats and B6C3F₁ (C57BL/6N, female, \times C3H/HeN MTV⁻, male) mice used in these studies were produced under strict barrier conditions at Charles River Breeding Laboratories under a contract to the Carcinogenesis Program. Breeding stock for the foundation colonies at the production facility originated at the National Institutes of Health Repository. Animals shipped for study were progeny of defined microflora-associated parents that were transferred from isolators to barriermaintained rooms. Animals were shipped to the study laboratory at 5-6 weeks of age. The animals were quarantined at the study facility for 18 days. Thereafter, a complete necropsy was performed on five animals of each sex and species to assess their health status. The rats and mice were placed on study at 7-8 weeks of age. The health of the animals was monitored during the course of the study according to the protocols of the NTP Sentinel Animal Program (Appendix L).

A quality control skin grafting program has been in effect since early 1978 to monitor the genetic integrity of the inbred mice used to produce the hybrid $B6C3F_1$ study animal. In mid-1981, data were obtained that showed incompatibility between the NIH C3H reference colony and the C3H colony from a Program supplier. In August 1981, inbred parental lines of mice were further tested for genetic integrity via isozyme and protein electrophoresis profiles that demonstrate phenotype expressions of known genetic loci.

The C57BL/6 mice were homogeneous at all loci tested. Eighty-five percent of the C3H mice monitored were variant at one to three loci, indicating some heterogeneity in the C3H line from this supplier. Nevertheless, the genome of this line is more homogeneous than that of randomly bred stocks.

Male mice from the C3H colony and female mice from the C57BL/6 colony were used as parents for the hybrid $B6C3F_1$ mice used in these studies. The influence of the potential genetic nonuniformity in the hybrid mice on these results is not known, but results of the studies are not affected because concurrent controls were included in each study.

Animal Maintenance

All animals were housed five per cage and received feed and water ad libitum. Further details of animal maintenance are given in Table 4.

Clinical Examinations and Pathology

All animals were observed twice daily, and clinical signs were recorded once per week. Body

weights by cage were recorded once per week for the first 12 weeks of the study and once per month thereafter. Mean body weights were calculated for each group. Animals found moribund and those surviving to the end of the studies were humanely killed. A necropsy was performed on all animals including those found dead, unless they were excessively autolyzed or cannibalized, missexed, or found missing. Thus, the number of animals from which particular organs or tissues were examined microscopically varies and is not necessarily equal to the number of animals that were placed on study.

During necropsy, all organs and tissues were examined for grossly visible lesions. Tissues were preserved in 10% neutral buffered formalin, embedded in paraffin, sectioned, and stained with hematoxylin and eosin. Tissues examined microscopically are listed in Table 4.

When the pathology evaluation was completed, the slides, paraffin blocks, and residual wet tissues were sent to the NTP Archives for inventory, slide/block match, and wet tissue audit. The slides, individual animal data records, and pathology tables were sent to an independent quality assessment laboratory. The individual animal records and tables were compared for accuracy, slides and tissue counts were verified, and histotechnique was evaluated. All tumor diagnoses, all target tissues, and all tissues from a randomly selected 10% of the animals were evaluated by a quality assessment pathologist. The quality assessment report and slides were submitted to the Pathology Working Group (PWG) Chairperson, who reviewed all target tissues and those about which there was a disagreement between the laboratory and quality assessment pathologists.

Representative slides selected by the Chairperson were reviewed by the PWG, which includes the laboratory pathologist, without knowledge of previously rendered diagnoses. When the consensus diagnosis of the PWG differed from that of the laboratory pathologist, the laboratory pathologist was asked to reconsider the original diagnosis. This procedure has been described, in part, by Maronpot and Boorman (1982) and Boorman et al. (1985). The final diagnoses represent a consensus of contractor pathologists and the NTP Pathology Working Group. For subsequent analysis of pathology data, the diagnosed lesions for each tissue type are combined according to the guidelines of McConnell et al. (1986).

Slides/tissues are generally not evaluated in a blind fashion (i.e., without knowledge of dose group) unless the lesions in question are subtle or unless there is an inconsistent diagnosis of lesions by the laboratory pathologist. Nonneoplastic lesions are not examined routinely by the quality assessment pathologist or PWG unless they are considered part of the toxic effect of the chemical.

Statistical Methods

Data Recording: Data on this experiment were recorded in the Carcinogenesis Bioassay Data System (Linhart et al., 1974). The data elements include descriptive information on the chemicals, animals, experimental design, survival, body weight, and individual pathologic results, as recommended by the International Union Against Cancer (Berenblum, 1969).

Survival Analyses: The probability of survival was estimated by the product-limit procedure of Kaplan and Meier (1958) and is presented in the form of graphs. Animals were censored from the survival analyses at the time they were found dead of other than natural causes or were found to be missing; animals dying from natural causes were not censored. Statistical analyses for a possible dose-related effect on survival used the method of Cox (1972) for testing two groups for equality and Tarone's (1975) life table test for a dose-related trend. When significant survival differences were detected, additional analyses using these procedures were carried out to determine the time point at which significant differences in the survival curves were first detected. All reported P values for the survival analysis are two-sided.

Calculation of Incidence: The incidence of neoplastic or nonneoplastic lesions is given as the ratio of the number of animals bearing such lesions at a specific anatomic site to the number of animals in which that site was examined. In most instances, the denominators include only those animals for which the site was examined histologically. However, when macroscopic examination was required to detect lesions (e.g., skin or mammary tumors) prior to histologic sampling, or when lesions could have appeared at multiple sites (e.g., lymphomas), the denominators consist of the number of animals on which a necropsy was performed.

Analysis of Tumor Incidence: Three statistical methods are used to analyze tumor incidence data. The two that adjust for intercurrent mortality employ the classical method for combining contingency tables developed by Mantel and Haenszel (1959). Tests of significance included pairwise comparisons of high dose and low dose groups with vehicle controls and tests for overall dose-response trends.

For studies in which compound administration has little effect on survival, the results of the three alternative analyses will generally be similar. When differing results are obtained by the three methods, the final interpretation of the data will depend on the extent to which the tumor under consideration is regarded as being the cause of death. All reported P values for tumor analyses are one-sided.

Life Table Analyses--The first method of analysis assumed that all tumors of a given type observed in animals dying before the end of the study were "fatal"; i.e., they either directly or indirectly caused the death of the animal. According to this approach, the proportions of tumor-bearing animals in the dosed and vehicle control groups were compared at each point in time at which an animal died with a tumor of interest. The denominators of these proportions were the total number of animals at risk in each group. These results, including the data from animals killed at the end of the study, were then combined by the Mantel-Haenszel method to obtain an overall P value. This method of adjusting for intercurrent mortality is the life table method of Cox (1972) and of Tarone (1975). The underlying variable considered by this analysis

is time to death due to tumor. If the tumor is rapidly lethal, then time to death due to tumor closely approximates time to tumor onset. In this case, the life table test also provides a comparison of the time-specific tumor incidences.

Incidental Tumor Analyses--The second method of analysis assumed that all tumors of a given type observed in animals that died before the end of the study were "incidental"; i.e., they were merely observed at necropsy in animals dying of an unrelated cause. According to this approach, the proportions of tumor-bearing animals in dosed and vehicle control groups were compared in each of five time intervals: weeks 0-52, weeks 53-78, weeks 79-92, week 93 to the week before the terminal-kill period, and the terminal-kill period. The denominators of these proportions were the number of animals on which a necropsy was actually performed during the time interval. The individual time interval comparisons were then combined by the previously described method to obtain a single overall result. (See Haseman, 1984, for the computational details of both methods.)

Unadjusted Analyses--Primarily, survivaladjusted methods are used to evaluate tumor incidence. In addition, the results of the Fisher exact test for pairwise comparisons and the Cochran-Armitage linear trend test (Armitage, 1971; Gart et al., 1979) are given in the appendix containing the analyses of primary tumor incidence. These two tests are based on the overall proportion of tumor-bearing animals and do not adjust for survival differences.

Historical Control Data: Although the concurrent control group is always the first and most appropriate control group used for evalution, there are certain instances in which historical control data can be helpful in the overall assessment of tumor incidence. Consequently, control tumor incidences from the NTP historical control data base (Haseman et al., 1984, 1985) are included for those tumors appearing to show compound-related effects.

III. RESULTS

RATS

FOURTEEN-DAY STUDIES

THIRTEEN-WEEK STUDIES

TWO-YEAR STUDIES

Body Weights and Clinical Signs Survival Pathology and Statistical Analyses of Results

MICE

FOURTEEN-DAY STUDIES

THIRTEEN-WEEK STUDIES

TWO-YEAR STUDIES

Body Weights and Clinical Signs Survival Pathology and Statistical Analyses of Results

FOURTEEN-DAY STUDIES

All the rats survived to the end of the studies (Table 5). The final mean body weights of all dosed groups were lower than those of the vehicle controls. The final mean body weight of males that received 2,400 mg/kg was 14% lower than that of the vehicle controls; males receiving 200-1,600 mg/kg had final body weights 8%-12% lower than that of the vehicle controls. The reduction in final body weights in dosed females (3%-7%) was less pronounced than that for dosed males.

Dose-related clinical signs, including diarrhea

and excessive salivation, were seen in all high dose rats immediately after dosing. No doserelated gross pathologic changes were observed. No histopathologic alterations attributable to the chemical were seen in high dose animals.

Doses for rats in the 13-week studies were set at 0, 180, 370, 750, 1,500, or 3,000 mg/kg. The highest dose of 3,000 mg/kg was selected because no dose-related deaths were seen at 2,400 mg/kg in the 14-day studies. This dose is the maximum one that was practical to administer to rats (administered as two 1,500 mg/kg doses with a dose volume of 5 ml/kg body weight).

TABLE 5. SURVIVAL AND MEAN BODY WEIGHTS OF RATS IN THE FOURTEEN-DAY GAVAGESTUDIES OF AMPICILLIN TRIHYDRATE

		Mean	Final Weight Relative		
Dose Su (mg/kg)	Survival (a)	Initial (b)	Final	Change (c)	to Vehicle Controls (percent)
IALE	· · · · · · · · · · · · · · · · · · ·				<u> </u>
0	5/5	98 ± 1	236 ± 9	$+138 \pm 9$	
200	5/5	99 ± 1	218 ± 3	$+119 \pm 3$	92
400	5/5	98 ± 1	208 ± 7	$+110 \pm 6$	88
800	5/5	99 ± 1	210 ± 6	$+111 \pm 5$	89
1,600	5/5	99 ± 1	215 ± 7	$+116 \pm 7$	91
2,400	5/5	98 ± 1	204 ± 10	$+106 \pm 10$	86
EMALE					
0	5/5	100 ± 1	146 ± 2	$+46 \pm 2$	
200	5/5	99 ± 1	141 ± 4	$+42 \pm 4$	97
400	5/5	100 ± 1	142 ± 2	$+42 \pm 2$	97
800	5/5	100 ± 1	139 ± 3	$+39 \pm 3$	95
1,600	5/5	100 ± 1	136 ± 3	$+36 \pm 2$	93
2,400	5/5	99 ± 1	137 ± 2	$+38 \pm 1$	94

(a) Number surviving/number initially in group

(b) Initial mean group body weight \pm standard error of the mean

(c) Mean body weight change of the group \pm standard error of the mean

THIRTEEN-WEEK STUDIES

The 12 deaths observed in dosed and vehicle control rats were considered to be due to gavage error (Table 6). The final mean body weights of the female rats were not related to the dose levels. The final mean body weight of the males that received 3,000 mg/kg was 9% lower than that of the vehicle controls. Male and female rats that received 3,000 mg/kg ampicillin trihydrate had diarrhea. No compound-related gross or histopathologic effects were observed.

Dose Selection Rationale: No dose-related effects were seen in the 13-week studies at 1,500 or 3,000 mg/kg. Doses selected for rats for the 2-year studies were 0, 750, and 1,500 mg/kg ampicillin trihydrate in corn oil administered by gavage 5 days per week in a volume of 5 ml/kg body weight.

TWO-YEAR STUDIES

Body Weights and Clinical Signs

Mean body weights of dosed male and female rats were similar or slightly increased over those of the corresponding vehicle control group throughout the studies (Table 7 and Figure 1). Diarrhea, chromodacryorrhea, and excessive urination were considered to be compound related.

 TABLE 6. SURVIVAL AND MEAN BODY WEIGHTS OF RATS IN THE THIRTEEN-WEEK GAVAGE

 STUDIES OF AMPICILLIN TRIHYDRATE

		Mean	Final Weight Relative		
Dose Survival (a) (mg/kg)	Initial (b)	Final	Change (c)	to Vehicle Controls (percent)	
MALE	·····				
0	9/10	118 ± 3	349 ± 4	$+230 \pm 5$	~~
180	8/10	134 ± 3	328 ± 6	$+195 \pm 6$	94
370	9/10	130 ± 3	334 ± 5	$+203 \pm 3$	96
750	9/10	126 ± 4	334 ± 8	$+211 \pm 6$	96
1,500	9/10	117 ± 2	326 ± 8	$+209 \pm 6$	93
3,000	8/10	109 ± 2	317 ± 6	$+210 \pm 6$	91
FEMALE					
0	10/10	103 ± 4	205 ± 6	$+102 \pm 3$	
180	10/10	110 ± 3	189 ± 3	$+79 \pm 1$	92
370	9/10	109 ± 2	196 ± 2	$+86 \pm 2$	96
750	10/10	108 ± 2	204 ± 8	$+96 \pm 7$	100
1,500	10/10	103 ± 3	203 ± 7	$+100 \pm 5$	99
3,000	7/10	106 ± 3	198 ± 11	$+90 \pm 8$	97

(a) Number surviving/number initially in group. All deaths were judged related to gavage techniques.

(b) Initial mean group body weight \pm standard error of the mean. Subsequent calculations are based on those animals surviving to the end of the study.

(c) Mean body weight change of the survivors \pm standard error of the mean

Weeks	Vehicle Control		750 mg/kg		1,500 mg/kg			
on Study	Av. Wt. (grams)	No. of Survivors	Av. Wt. (grams)	Wt. (percent of veh. controls)	No. of Survivors	Av. Wt. (grams)	Wt. (percent of veh. controls)	No. of Survivors
MALE				<u></u>				
0	141	50	143	101	50	146	104	50
1	166	50	164	99	50	167	101	50
2 3	188 212	50 50	194 220	103 104	50 50	200 220	106 104	50 50
4	225	50	239	106	50	234	104	50
5	244	50	255	105	50	251	103	50
6 7	254 263	50 50	268 282	106 107	50 50	266 275	105 105	50 50
8	283	50	296	105	50	290	102	50
9	300	50	311	104	50	306	102	50
10 11	316 325	50 50	323 331	102 102	50 50	319 328	101 101	50 50
12	336	50	336	102	50	341	101	50
16	366	50	376	103	50	374	102	50
20	392	48	399	102	50	399	102	50
24 28	384 427	47 47	381 425	99 100	50 50	388 427	101 100	50 50
32	427	47	429	100	50	431	101	50
36	413	47	436	106	50	406	98	49
40 44	430 440	47 46	430 446	100 101	49 48	427	99 98	49 49
44	440	46	440	98	48	431 449	98 97	49
52	472	46	465	99	48	463	98	46
56 60	469	46	462	99	48	463	99	46
64	476 474	46 46	474 474	100 100	46 46	462 459	97 97	46 43
68	476	46	473	99	45	465	98	43
72	477	44	476	100	44	500	105	42
76 80	482 477	43 42	477 481	99 101	43 41	475 469	99 98	42 42
84	469	40	468	100	39	405	100	40
90	468	34	462	99	38	462	99	39
94	457	32	464	102	35	450	98	32
98 102	455 449	32 32	462 457	102 102	33 28	456 462	100 103	27 27
FEMALE								
0	115	50	111	97	49	115	100	50
1 2	126 143	50 50	121 141	96 99	49 49	125 143	99 100	50 50
3	152	50	148	97	49	151	99	50
4	160	50	164	103	48	160	100	50
5 6	168	50	166	99	48	167	99 101	50
7	170 177	50 50	171 179	101 101	48 48	171 175	99	50 50
8	181	50	185	102	48	184	102	50
9	186	50	190	102	48	186	100	50
10 11	190 195	50 50	195 203	103 104	48 48	189 197	99 101	50 50
12	199	50	203	101	48	196	98	50
16	208	50	211	101	48	208	100	50
20 24	219 222	50 50	225 222	103 100	48	223	102 99	50 50
28	222	50	222	100	48 48	220 236	99 102	50
32	234	50	238	102	48	237	101	50
36	238	50	246	103	48	244	103	50
40 44	251 259	50 50	257 268	102 103	48 48	253 262	101 101	50 50
48	262	50	269	103	48	271	103	50
52 56	270 278	49 49	286 294	106 106	48 47	283 286	105	50 50
56 60	278 284	49 48	294 303	105	47 46	286 294	103 104	50 49
64	298	48	303	107 102	46	305	102	49
68 70	302	48	321	106	46	311	103	49
72 76	306 314	48 46	325 331	106 105	45 45	320 328	105 104	49 48
80	314	46	338	106	45 43	333	104	48
84	321	46	366	114	39	344	107	45
90	323	41	337	104	37	339	105	45
94 98	321 333	38 38	332 360	103 108	34 34	324 352	101 106	41 36
102	339	36	356	105	34	350	103	35

TABLE 7. MEAN BODY WEIGHTS AND SURVIVAL OF RATS IN THE TWO-YEAR GAVAGE STUDIESOF AMPICILLIN TRIHYDRATE



FIGURE 1. GROWTH CURVES FOR RATS ADMINISTERED AMPICILLIN TRIHYDRATE IN CORN OIL BY GAVAGE FOR TWO YEARS

Survival

Estimates of the probabilities of survival for male and female rats administered ampicillin trihydrate at the doses used in these studies and for vehicle controls are shown in the Kaplan and Meier curves in Figure 2. No significant differences in survival were observed between any groups of either sex (Table 8). All accidental deaths were due to gavage accidents.

Pathology and Statistical Analyses of Results

This section describes the significant or noteworthy changes in the incidences of rats with neoplastic or nonneoplastic lesions of the

hematopoietic system, adrenal gland, mammary gland, thyroid gland, liver, forestomach, prostate, and eye. Histopathologic findings on neoplasms in rats are summarized in Appendix A (Tables A1 and A2); Appendix A (Tables A3 and A4) also gives the survival and tumor status for individual male and female rats. Findings on nonneoplastic lesions are summarized in Appendix C (Tables C1 and C2). Appendix E (Tables E1 and E2) contains the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups. The statistical analyses used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes). Historical incidences of tumors in corn oil vehicle control animals are listed in Appendix F.

	Vehicle Control	750 mg/kg	1,500 mg/kg
MALE (a)	· · · · · · · · · · · · · · · · · · ·		
Animals initially in study	50	50	50
Nonaccidental deaths before termination (b)	15	23	21
Accidentally killed	4	0	3
Killed at termination	31	27	26
Survival P values (c)	0.372	0.280	0.424
FEMALE (a)			
Animals initially in study	50	50	50
Nonaccidental deaths before termination (b)	18	15	18
Accidentally killed	0	2	1
Killed at termination	32	31	31
Died during termination period	0	2	0
Survival P values (c)	1.000	0.880	0.966

TABLE 8. SURVIVAL OF RATS IN THE TWO-YEAR GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE

(a) Terminal-kill period: week 104

(b) Includes animals killed in a moribund condition

(c) The result of the life table trend test is in the vehicle control column, and the results of the life table pairwise comparisons with the vehicle controls are in the dosed columns.



FIGURE 2. KAPLAN-MEIER SURVIVAL CURVES FOR RATS ADMINISTERED AMPICILLIN TRIHYDRATE IN CORN OIL BY GAVAGE FOR TWO YEARS

Hematopoietic System: Mononuclear cell leukemia in male rats occurred with a significant positive trend, and the incidences in the dosed groups were greater than that in the vehicle controls (Table 9). The incidence of mononuclear cell leukemia was not increased in dosed female rats. Hematopoietic hyperplasia of the bone marrow was reported at increased incidences in dosed male (vehicle control, 7/50, 14%; low dose, 16/48, 33%; high dose, 17/50, 34%) and female rats (13/50, 26%; 22/49, 45%; 25/50, 50%). Hematopoietic hyperplasia was frequently present in rats with malignant neoplasms in a variety of organs. Necrosis and inflammation associated with neoplasia may have provided the physiologic stimulus or demand for increased blood leukocytes and hematopoietic hyperplasia.

TABLE 9. ANALYSIS OF HEMATOPOIETIC SYSTEM TUMORS IN RATS IN THE TWO-YEAR GAVAGESTUDIES OF AMPICILLIN TRIHYDRATE (a)

	Vehicle Control	750 mg/kg	1,500 mg/kg
MALE		1997 <mark>- 1 1 197</mark> - 1997-9-	<u></u>
Mononuclear Cell Leukemia (b)			
Overall Rates	5/50 (10%)	14/50 (28%)	13/50 (26%)
Adjusted Rates	13,8%	41.7%	38.8%
Terminal Rates	2/31 (6%)	8/27 (30%)	7/26 (27%)
Week of First Observation	83	89	63
Life Table Tests	P = 0.024	P = 0.019	P = 0.029
Incidental Tumor Tests	P=0.069	P = 0.040	P = 0.066
Lymphocytic Leukemia			
Overall Rates	0/50 (0%)	0/50 (0%)	1/50 (2%)
Malignant Lymphoma			
Overall Rates	1/50 (2%)	2/50 (4%)	0/50 (0%)
All Leukemia or Lymphoma (c)			
Overall Rates	6/50 (12%)	16/50 (32%)	14/50 (28%)
Adjusted Rates	16.4%	44.2%	40.6%
Terminal Rates	2/31 (6%)	8/27 (30%)	7/26 (27%)
Week of First Observation	83	58	63
Life Table Tests	P = 0.032	P = 0.017	P = 0.037
Incidental Tumor Tests	P = 0.099	P = 0.050	P = 0.114
Week of Observation			
of Mononuclear Cell Leukemia:	83	89	63
	87	95	92
	93	98	93
	(d) 104 (2)	101	94
		102 (2)	97
		(d) 104 (8)	103
			(d) 104 (7)
FEMALE			
Mononuclear Cell Leukemia			
Overall Rates	14/50 (28%)	18/50 (36%)	13/50 (26%)

(a) The statistical analyses used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes).

(b) Historical incidence of leukemia in NTP studies (mean \pm SD): 152/1,100 (14% \pm 8%) (range: 2%-28%)

(c) Historical incidence of leukemia or lymphoma in NTP studies (mean \pm SD): 162/1,100 (15% \pm 8%) (range: 2%-28%)

(d) Number of animals found to have mononuclear cell leukemia at the terminal kill
Results of "staging" mononuclear cell leukemia are given in Table 10. Criteria are as follows.

Stage 1. Spleen not enlarged or only slightly enlarged with small numbers of neoplastic mononuclear cells in the red pulp; no or very few mononuclear cells in the liver sinusoids. No identifiable neoplastic cells in the other organs.

Stage 2. Spleen moderately enlarged with moderate to large numbers of mononuclear cells in the red pulp; architectural features including lymphoid follicles and periarteriolar lymphocytic sheaths remain intact. Minimal to moderate involvement of the liver. Mononuclear cells may be evident in blood vessels in other organs, but aggregates/masses of neoplastic cells generally limited to spleen and liver.

Stage 3. Advanced disease with multiple organ involvement. Spleen usually markedly enlarged with effacement of normal architectural features by accumulated neoplastic cells. Liver moderately to markedly enlarged and nodular; hepatic parenchyma shows variable degenerative changes associated with the accumulation of neoplastic cells. Accumulations of neoplastic mononuclear cells in other organs including lung, lymph nodes, kidney, brain, adrenal gland, and others. Adrenal Gland: Focal cellular change of the adrenal cortex was observed at increased incidence in high dose male and female rats (male: vehicle control, 1/50; low dose, 5/50; high dose, 7/49; female: 6/50; 12/50; 15/49). Pheochromocytomas and pheochromocytomas or malignant pheochromocytomas (combined) of the adrenal medulla in male rats occurred with significant positive trends, and the incidences in the high dose group were significantly greater than those in the vehicle controls. The incidences of focal hyperplasia of the adrenal medulla were not increased in dosed male rats relative to vehicle controls. Adrenal medulla lesions were not increased in female rats (Table 11).

Mammary Gland: Hyperplasia was observed at an increased incidence in low dose male rats (vehicle control, 4/50; low dose, 11/50; high dose, 4/50). The incidence of mammary gland fibroadenomas was not increased in dosed male rats (1/50; 1/50; 0/50). The incidence of hyperplasia of the mammary gland was similar in dosed and vehicle control female rats (23/50; 23/50; 22/50). The incidence of fibroadenomas in low dose female rats was significantly greater than that in the vehicle controls by the incidental tumor test (P=0.019) (16/50; 25/50; 19/50).

	Vehicle Control	750 mg/kg	1,500 mg/kg	
Number of Animals with Mononuclear Cell Leukemia	5	14	13	
tage		<u>^</u>	0	
1 2	1	3	3	
3	2	8	6	

TABLE 10. CLASSIFICATION OF MONONUCLEAR CELL LEUKEMIA IN MALE RATS IN THE TWO-
YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE

	Vehicle Control	750 mg/kg	1,500 mg/kg
MALE			
Focal Hyperplasia			
Overall Rates	14/50 (28%)	10/50 (20%)	8/49 (16%)
Pheochromocytoma			
Overall Rates	13/50 (26%)	12/50 (24%)	23/49 (47%)
Adjusted Rates	40.6%	39.6%	75.8%
Terminal Rates	12/31 (39%)	9/27 (33%)	19/26(73%)
Week of First Observation	103	95	80
Life Table Tests	P = 0.003	P = 0.543	P = 0.004
Incidental Tumor Tests	P = 0.008	P = 0.445N	P = 0.007
Malignant Pheochromocytoma			
Overall Rates	1/50 (2%)	5/50 (10%)	1/49 (2%)
Adjusted Rates	3.2%	17.0%	3.8%
Terminal Rates	1/31 (3%)	4.2 (15%)	1/26 (4%)
Week of First Observation	104	89	104
Life Table Tests	P = 0.537	P = 0.084	P = 0.723
Incidental Tumor Tests	P = 0.507	P = 0.065	P = 0.723
Pheochromocytoma or Malignant Pheo	chromocytoma (a)		
Overall Rates	13/50 (26%)	16/50 (32%)	23/49 (47%)
Adjusted Rates	40.6%	50.9%	75.8%
Terminal Rates	12/31 (39%)	12/27 (44%)	19/26 (73%)
Week of First Observation	103	89	80
Life Table Tests	P = 0.004	P = 0.200	P = 0.004
Incidental Tumor Tests	P = 0.007	P = 0.325	P = 0.007
FEMALE			
Focal Hyperplasia			
Overall Rates	18/50 (36%)	7/50 (14%)	6/49 (12%)
Pheochromocytoma			
Overall Rates	3/50 (6%)	3/50 (6%)	4/49 (8%)
Malignant Pheochromocytoma			
Overall Rates	0/50 (0%)	0/50 (0%)	1/49 (2%)

TABLE 11. ANALYSIS OF ADRENAL MEDULLARY LESIONS IN RATS IN THE TWO-YEAR GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE

(a) Historical incidence in NTP studies (mean ± SD): 247/1,092 (23% ± 9%) (range: 4%-40%)

Thyroid Gland: C-cell hyperplasia was observed at increased incidences in low dose male and high dose female rats (male: vehicle control, 4/50; low dose, 11/48; high dose, 7/46; female: 10/50; 12/49; 21/49). The incidences of C-cell adenomas or carcinomas (combined) in dosed rats were not significantly different from those in the vehicle controls (male: 2/50; 6/48; 3/46; female: 2/50; 1/49; 1/49).

Liver: Cytoplasmic vacuolization was observed at increased incidences in high dose male rats (male: vehicle control, 2/50; low dose, 5/49; high dose, 10/50; female: 2/50; 4/50; 4/50). Forestomach: Hyperkeratosis and acanthosis were observed at increased incidences in high dose male rats (hyperkeratosis: vehicle control, 3/48; low dose, 6/44; high dose, 9/45; acanthosis: 0/48; 2/44; 5/45). The incidences of hyperkeratosis (2/49; 1/50; 3/47) and acanthosis (0/49; 0/50; 0/47) were not increased in dosed female rats.

Prostate: Inflammation was observed at an increased incidence in high dose male rats (vehicle control, 22/49, 45%; low dose, 27/48, 56%; high dose, 36/47, 77%).

Eye: Retinal degeneration, cataracts, hemorrhage, and posterior synechia were observed at notably greater incidences in vehicle control rats of each sex than in the dosed groups (Table 12). Vehicle control animals were positioned on the top two rows of the rack throughout the studies, and the appearance of eye lesions was probably due to the placement of the animals on the rack and proximity to the fluorescent light source rather than to chemical administration.

TABLE 12. NUMBERS OF RATS WITH EYE LESIONS IN THE TWO-YEAR GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE (a)

Lesion	Vehicle Control 750 mg/kg		1,500 mg/kg	
MALE		<u>, , 1 </u>		
Number of animals examined grossly	50	50	50	
Cataract Retinal degeneration Posterior synechia Hemorrhage	15 17 13 17	1 0 0 0	0 0 0 0	
FEMALE				
Number of animals examined grossly	50	50	50	
Cataract Retinal degeneration Posterior synechia Hemorrhage	17 17 11 11	2 3 1 1	2 2 0 2	

(a) Vehicle control animals were located on the top two rows of rack; high dose animals, on the middle two rows; low dose animals, on the bottom two rows.

FOURTEEN-DAY STUDIES

Seven males and four females died before the end of the studies due to gavage error (Table 13). Male mice that received 2,400 mg/kg lost weight during week 2 of the studies; no dose-related decreases in final mean body weights were seen in female mice. Dosed female mice receiving 200, 800, 1,600, or 2,400 mg/kg showed a slightly increased body weight (1.3%-13.4%) over the vehicle control group. Diarrhea of minimal severity was observed in mice that received 2,400 mg/kg. No dose-related gross pathologic changes were observed. No histopathologic alterations attributable to the chemical were seen in high dose animals.

Doses for the 13-week studies were set at 0, 250, 500, 1,000, 2,000, and 3,000 mg/kg. The high dose of 3,000 mg/kg was selected because histopathologic findings were not seen in the 14-day studies at 2,400 mg/kg, and this dose was the maximum one that was practical to give to mice at a volume of 10 ml/kg body weight.

TABLE 13. SURVIVAL AND MEAN BODY WEIGHTS OF MICE IN THE FOURTEEN-DAY GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE

		Mean	Final Weight Relative		
Dose (mg/kg)	Survival (a)	Initial (b)	Final	Change (c)	to Vehicle Controls (percent)
IALE		· · · · · · · · · · · · · · · · · · ·			
0	5/5	26.8 ± 0.8	29.6 ± 1.0	$+2.8 \pm 0.5$	
200	5/5	28.6 ± 0.8	29.2 ± 0.7	$+0.6 \pm 0.5$	98.6
400	4/5	27.2 ± 0.9	29.3 ± 0.6	$+ 1.5 \pm 1.0$	99.0
800	4/5	28.2 ± 1.2	30.8 ± 0.9	$+2.8 \pm 0.9$	104.1
1,600	3/5	27.4 ± 1.1	28.7 ± 0.9	$+ 1.0 \pm 0.6$	97.0
2,400	2/5	28.2 ± 0.9	28.5 ± 0.5	$+ 1.5 \pm 0.5$	96.3
EMALE					
0	5/5	23.8 ± 0.4	23.2 ± 1.0	-0.6 ± 1.3	
200	5/5	24.0 ± 0.3	23.6 ± 0.2	-0.4 ± 0.2	101.7
400	5/5	23.4 ± 0.2	23.2 ± 0.4	-0.2 ± 0.4	100.0
800	3/5	24.0 ± 0.3	26.3 ± 3.9	$+2.0 \pm 3.6$	113.4
1,600	4/5	23.8 ± 0.4	23.8 ± 0.6	0.0 ± 0.6	102.6
2,400	4/5	24.0 ± 0.0	23.5 ± 0.9	-0.5 ± 0.9	101.3

(a) Number surviving/number initially in group. All deaths were judged related to gavage technique.

(b) Initial mean group body weight \pm standard error of the mean. Subsequent calculations are based on those animals surviving to the end of the study.

(c) Mean body weight change of the survivors \pm standard error of the mean

THIRTEEN-WEEK STUDIES

The 10 deaths observed in dosed and vehicle control mice were attributed to gavage error (Table 14). Final mean body weights were not dose related. One of 10 male mice at 2,000 mg/kg and 1/10 male mice at 3,000 mg/kg had diarrhea; other clinical signs were observed sporadically and were not clearly dose related. No compoundrelated gross or histopathologic effects were observed.

Dose Selection Rationale: No dose-related effects were seen in the 13-week studies at 1,500 and 3,000 mg/kg. Doses selected for mice for the 2year studies were 0, 1,500, and 3,000 mg/kg ampicillin trihydrate in corn oil administered by gavage 5 days per week in a volume of 10 ml/kg body weight.

TWO-YEAR STUDIES

Body Weights and Clinical Signs

The initial mean body weights of the low dose and high dose male mice were 5% and 6% greater than that of the vehicle controls (Table 15 and Figure 3). Mean body weights of low dose and high dose male mice were similar to those of the corresponding vehicle control group during year 1 of the study but were slightly below those of the vehicle control group during year 2. Mean body weights of low dose and high dose female mice were greater than those of the vehicle controls throughout most of the study. Increased salivation and decreased activity in dosed mice were considered to be compound related.

		Mean	Body Weights	Final Weight Relative	
Dose Survival (mg/kg)	Survival (a)	Initial (b)	Final	Change (c)	to Vehicle Controls (percent)
ÍALE					
0	9/10	26.1 ± 0.9	38.2 ± 1.7	$+11.8 \pm 1.4$	
250	9/10	23.4 ± 0.6	35.4 ± 1.0	$+11.8 \pm 0.4$	92.7
500	10/10	23.8 ± 0.4	33.6 ± 0.8	$+9.8 \pm 0.6$	88.0
1,000	9/10	26.4 ± 0.6	36.3 ± 1.1	$+10.0 \pm 0.8$	95.0
2,000	8/10	25.7 ± 0.8	35.7 ± 0.5	$+10.3 \pm 1.0$	93.5
3,000	7/10	26.7 ± 0.4	36.5 ± 0.8	$+9.4 \pm 0.7$	95.5
EMALE					
0	9/10	20.7 ± 0.3	27.6 ± 1.3	$+6.9 \pm 1.0$	
250	10/10	20.6 ± 0.4	26.9 ± 0.8	$+6.3 \pm 0.6$	97.5
500	10/10	20.3 ± 0.4	26.9 ± 0.6	$+6.6 \pm 0.4$	97.5
1,000	9/10	21.8 ± 0.4	28.6 ± 0.6	$+6.7 \pm 0.6$	103.6
2,000	10/10	20.9 ± 0.6	29.1 ± 0.9	$+8.2 \pm 0.8$	105.4
3,000	10/10	20.6 ± 0.3	26.3 ± 0.7	$+5.7 \pm 0.9$	95.3

TABLE 14. SURVIVAL AND MEAN BODY WEIGHTS OF MICE IN THE THIRTEEN-WEEK GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE

(a) Number surviving/number initially in group. All deaths were judged related to gavage techniques.

(b) Initial mean group body weight \pm standard error of the mean. Subsequent calculations are based on those animals surviving to the end of the study.

(c) Mean body weight change of the survivors \pm standard error of the mean

Weeks		e Control		1,500 mg/kg			3,000 mg/kg	
on Study	Av. Wt. (grams)	No. of Survivors	Av. Wt. (grams)	Wt. (percent of veh. controls)	No. of Survivors	Av. Wt. (grams)	Wt. (percent of veh. controls)	No. of Survivors
MALE								
0	23.7	50	24.8	105	49	25.4	107	50
1 2	25.7 28.1	50 49	25.8 27.7	100 99	49 49	26.7 26.9	104 96	50 50
3	27.9	49	28.6	103	48	29.4	105	49
4 5	28.2	49 49	28.8	102	48	28.9	102	49 49
6	28.4 30.3	49	28.8 30.4	101 100	48 48	30.1 30.5	106 101	49
7	30.9	49	30.8	100	48	30.7	99	49
8 9	31.7 32.6	49 49	31.9	101	48 48	33.0	104	48 48
10	32.6	49	33.3 32.2	102 98	48	33.5 34.2	103 105	46
11	33.8	49	33.4	99	48	34.1	101	46
12	34.9	49 47	34.7	99	47	34.8	100	45
16 20	36.9 36.5	46	36.3 36.7	98 101	47 46	36.6 37.1	99 102	45 45
24	38.3	42	36.4	95	46	37.5	98	45
28 32	39.7 37.1	42 41	39.3	99 103	46	39.1	98 101	42 42
32	37.1 41.7	41 41	38.1 41.6	103	44 41	37.5 41.3	99	42
40	43.4	41	41.0	94	39	43.4	100	39
44 48	43.4 44.6	41 41	43.8 44.2	101 99	39 39	42.1 43.9	97 98	38 38
52	45.2	41	43.1	95	39	44.1	98	38
56	45.1	41	43.4	96	38	43.8	97	38
60 64	45.9 46.8	40 40	42.9 43.6	93 93	38 37	44.8 44.6	98 95	37 37
69	46.6	39	43.7	94	37	44.4	95	37
72	46.4	38	43.5	94	37	43.7	94	34
76 80	45.5 46.4	38 38	44.1 43.7	97 94	37 35	44.7 45.0	98 97	33 33
86	45.9	36	44.3	97	34	44.2	96	30
90	45.0	35	42.8	95	32	44.7	99	28
94 98	44.6 44.4	34 32	42.9 43.3	96 98	31 28	43.8 43.9	98 99	28 25
102	44.1	32	42.3	96	22	42.2	96	20
FEMALE								
0	23.2	50	24.1	104	50	23.0	99	50
1 2	23.1 23.7	50 50	24.5 24.7	106 104	50 50	24.6 25.3	106 107	50 50
3	22.9	50	24.6	107	50	24.9	109	50
4	22.1	50	22.4	101	50	23.2	105	50
5 6	21.6 22.6	50 50	23.0 23.9	106 106	50 50	23.1 25.3	107 112	50 50
7	23.4	50	24.1	103	50	24.5	105	50
8	23.7	50	25.2	106	50	25.4	107	50
9 10	24.6 24.1	50 50	26.1 25.4	106 105	50 50	26.1 25.4	106 105	50 50
11	25.3	49	26.2	104	50	26.3	104	50
12	24.4	49	26.2	107	50	26.4	108	50
16 20	26.2 27.1	49 49	27.7 28.2	106 10 4	50 50	27,9 28.8	106 106	50 50
24	27.9	49	30.0	108	50	30.2	108	50
28 32	29.0 29.3	49 49	30.8 31.6	106 108	50 50	31.6 32.2	109 110	50 49
36	32.2	49	33.4	104	50	34.4	107	40
40	33.5	49	35.4	106	50	35.9	107	40
44 48	35.7 37.3	49 49	36.9 36.9	103 99	50 50	38.4 38.4	108 103	40 40
52	38.2	49	38.0	99	50	40.1	105	40
56 60	38.1	48	38.0	100 101	50 50	39.2	103	40 40
60 64	38.5 40.4	48 47	38.8 39.6	98	50 50	40.3 41.2	105 102	40
69	39.0	46	40.0	103	50	41.9	107	40
72	38.6	46	39.7	103	50	41.7	108	40
76 80	38.2 39.1	46 45	39.0 38.3	102 98	49 47	39.5 41.2	103 105	39 38
86	39.3	44	39.0	99	42	40.8	104	38
90	39.6	43	39.5	100	38	41.7	105	35 32
94 98	40.5 40.8	40 39	38.8 39.4	96 97	36 31	40.6 42.8	100 105	32
102	40.5	36	39.7	98	28	39.2	97	28

TABLE 15. MEAN BODY WEIGHTS AND SURVIVAL OF MICE IN THE TWO-YEAR GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE



FIGURE 3. GROWTH CURVES FOR MICE ADMINISTERED AMPICILLIN TRIHYDRATE IN CORN OIL BY GAVAGE FOR TWO YEARS

Survival

Estimates of the probabilities of survival for male and female mice administered ampicillin trihydrate at the doses used in these studies and for vehicle controls are shown in the Kaplan and Meier curves in Figure 4. No significant differences in survival were observed between any groups of either sex (Table 16). Accidental deaths were due primarily to drowning (13) or gavage accidents (7).

Pathology and Statistical Analyses of Results

This section describes the significant or noteworthy changes in the incidences of mice

with neoplastic or nonneoplastic lesions of the forestomach, lung, and ovary, uterus, or multiple organs. Histopathologic findings on neoplasms in mice are summarized in Appendix B (Tables B1 and B2); Appendix B (Tables B3 and B4) also gives the survival and tumor status for individual male and female mice. Findings on nonneoplastic lesions are summarized in Appendix D (Tables D1 and D2). Appendix E (Tables E3 and E4) contains the statistical analyses of those primary tumors that occurred with an incidence of at least 5% in one of the three groups. The statistical analyses used are discussed in Chapter II (Statistical Methods) and Appendix E (footnotes). Historical incidences of tumors in corn oil vehicle control animals are listed in Appendix F.

TABLE 16.	SURVIVAL	OF MICE	IN THE	TWO-YEAR	GAVAGE	STUDIES O	F AMPICILLIN
				TRIHYD	RATE		

	Vehicle Control	1,500 mg/kg	3,000 mg/kg	
MALE (a)	······································			
Animals initially in study	50	50	50	
Nonaccidental deaths before termination (b)	17	22	23	
Accidentally killed	1	6	6	
Animals missing	0	1	1	
Killed at termination	32	21	20	
Survival P values (c)	0.189	0.374	0.238	
FEMALE (a)				
Animals initially in study	50	50	50	
Nonaccidental deaths before termination (b)	16	22	12	
Accidentally killed	0	0	10	
Killed at termination	34	27	28	
Died during termination period	0	1	0	
Survival P values (c)	0.975	0.286	0.970	

(a) Terminal-kill period: week 104

(b) Includes animals killed in a moribund condition

(c) The result of the life table trend test is in the vehicle control column, and the results of the life table pairwise comparisons with the vehicle controls are in the dosed columns.



FIGURE 4. KAPLAN-MEIER SURVIVAL CURVES FOR MICE ADMINISTERED AMPICILLIN TRIHYDRATE IN CORN OIL BY GAVAGE FOR TWO YEARS

Forestomach: Ulcers, suppurative inflammation, fungal infections, hyperkeratosis, and acanthosis were observed at increased incidences in dosed male and female mice (Table 17).

Lung: Alveolar/bronchiolar adenomas in female mice occurred with a positive trend (vehicle control, 1/50; low dose, 0/50; high dose, 4/50; P=0.049 by the incidental tumor test), but the incidences of alveolar/bronchiolar adenomas or carcinomas (combined) in dosed and vehicle control female mice were not significantly different (2/50; 3/50; 4/50). No increased incidences of alveolar/bronchiolar adenomas or carcinomas (combined) were seen in dosed male mice (6/50; 6/49; 3/47).

Ovary, Uterus, or Multiple Organs: Suppurative inflammation or abscesses were observed in female mice (vehicle control, 11/50; low dose, 20/50; high dose, 2/50).

TABLE 17. NUMBERS OF MICE WITH LESIONS OF THE FORESTOMACH IN THE TWO-YEARGAVAGE STUDIES OF AMPICILLIN TRIHYDRATE (a)

Lesion	Vehicle Control	1,500 mg/kg	3,000 mg/kg	
IALE				
lumber of animals examined	50	48	45	
llcer	0	(b) 6	2	
uppurative inflammation	0	(c) 24	(c) 19	
ungal infection	0	(c) 8	(c) 6	
yperkeratosis	11	(c) 28	(b) 20	
canthosis	9	(c) 28	(c) 20	
EMALE				
lumber of animals examined	47	49	49	
llcer	0	2	(b)6	
uppurative inflammation	5	(c) 29	(c) 27	
ungal infection	1	(c) 15	(b) 8	
lyperkeratosis	17	(c) 39	(c) 32	
canthosis	11	(c) 37	(c) 34	

(a) P values are versus the vehicle controls by the Fisher exact test.

(b) P<0.05

(c) P<0.01

IV. DISCUSSION AND CONCLUSIONS

Study Design

Studies of the toxicology and carcinogenicity of ampicillin trihydrate were conducted in F344/N rats and $B6C3F_1$ mice of each sex. For the 2year studies, ampicillin trihydrate was administered by gavage as a corn oil suspension at doses of 0, 750, or 1,500 mg/kg body weight to male and female rats, 5 days per week for 103 weeks, and at 0, 1,500, or 3,000 mg/kg body weight to male and female mice on the same schedule. These doses for the 2-year studies were selected because no dose-related organ toxicity, decreases in body weight gain, or deaths were seen in the 13-week studies at doses up to 3,000 mg/kg body weight. Clinical signs in the 13-week studies included diarrhea at 3,000 mg/kg in male and female rats and male mice. The doses of ampicillin trihydrate used in the 2-year studies were limited because the maximum concentration of the chemical in corn oil that could be used as a gavage suspension was determined to be 300 mg/ml; the maximum volume of corn oil administered in NTP 2-year studies is usually 5 ml/kg body weight for rats and 10 ml/kg body weight for mice.

Survival, Body Weights, and Clinical Signs

Survival of vehicle control and dosed male and female rats and mice was similar in the 2-year studies. During the 2-year studies, mean body weights of rats were similar to or slightly greater than those of the corresponding vehicle control groups. Mean body weights of dosed male mice were similar to those of the corresponding vehicle control group during the 1st year of the study but were slightly below those of the vehicle control group during the 2nd year. Mean body weights of dosed female mice were greater than those of the vehicle controls throughout most of the study. Administration of ampicillin has been reported to increase body weight gain in rats when animals were started on the antibiotic at 4 weeks of age (King, 1975). Compound-related signs of toxicity in rats included diarrhea, chromodacryorrhea, and excessive urination and in mice included increased salivation and decreased activity.

Results in Rats

Adrenal medullary pheochromocytomas were observed with a dose-related positive trend in male rats (vehicle control, 13/50; low dose, 12/50; high dose, 23/49). Malignant pheochromocytomas were observed in male rats (1/50; 5/50; 1/49). The incidence of pheochromocytomas in the high dose group (47%) was significantly greater than that in the vehicle controls (26%). which was comparable to the mean historical vehicle control rate (23%); the highest rate observed in the historical vehicle controls was 20/49 (41%) (Appendix F, Table F2). The incidences of hyperplasia of the adrenal medulla were not increased in dosed male rats relative to that in vehicle controls. In rats, hyperplasia and pheochromocytomas of the adrenal gland are considered to represent a spectrum of the same lesion (Hollander and Snell, 1976; Strandberg, 1983). Thus, lack of increased incidences of hyperplasia in dosed male rats does not parallel the increased incidences of pheochromocytomas. Nonetheless, the neoplastic effect in the adrenal gland may have been related to the administration of ampicillin trihydrate.

Mononuclear cell leukemia was increased in dosed male rats (vehicle control, 5/50; low dose, 14/50; high dose, 13/50). Malignant lymphomas were observed in one additional vehicle control and two low dose male rats. Lymphocytic leukemia was seen in one high dose male rat. Incidences of mononuclear cell leukemia, malignant lymphomas, and lymphocytic leukemia were combined for statistical analysis because recent research suggests that mononuclear cell leukemia is a specific type of lymphocytic leukemia (Ward and Reynolds, 1983; Reynolds et al., 1982). Mononuclear cell leukemia develops spontaneously in F344 rats (Stromberg et al., 1983), and the rate in the NTP historical control data base for corn oil gavage vehicle control male rats (mean \pm SD, 13.8% \pm 8.1%; range, 2%-28%) is lower than the rate in untreated control male rats (mean \pm SD, 26.5% \pm 8.8%; range, 10%-46%) (Haseman et al., 1985). High dose male rats in this study received 70% of the amount of corn oil given to vehicle control male rats. The majority of

mononuclear cell leukemias observed in this study were stage 3 (advanced disease); however, the relative proportions of advanced cases were similar in dosed and vehicle control groups (see Table 10). The increased incidence of mononuclear cell leukemia observed in dosed male rats may have been related to the administration of ampicillin trihydrate.

Ampicillin trihydrate administration was associated with an increased incidence of C-cell hyperplasia of the thyroid gland in low dose male and high dose female rats (male: vehicle control, 4/50; low dose, 11/48; high dose, 7/46; female: 10/50; 12/49; 21/49). The incidence of mammary gland fibroadenomas was increased in low dose female rats (16/50; 25/50; 19/50), but because this increase was not seen in high dose animals, the lesion is not considered to be clearly dose related.

Incidences of cytoplasmic vacuolization of the liver and inflammation of the prostate were increased in high dose male rats. Eye lesions (cataracts, retinal degeneration, posterior synechia, hemorrhage) were seen in vehicle control male and female rats; these lesions were associated with the placement of the vehicle control animals on the top of the racks and thus in closer proximity to the light. Light-associated eye changes were previously reported in rats (Lai et al., 1978; Reuter and Hobbelen, 1977). Ampicillin trihydrate administration was associated with nonneoplastic lesions of the forestomach in male rats.

Results in Mice

Nonneoplastic lesions were seen in the forestomach in male and female mice, but these lesions were not accompanied by any neoplastic response in this organ. No neoplastic or nonneoplastic responses were observed in other organ systems. Ampicillin and other penicillins are reported to cause gastrointestinal side effects in humans (PDR, 1984).

Conclusions: Under the conditions of these 2year gavage studies, there was equivocal evidence of carcinogenicity* of ampicillin trihydrate for male F344/N rats as shown by increased incidences of pheochromocytomas of the adrenal medulla and by marginally increased incidences of mononuclear cell leukemia. There was no evidence of carcinogenicity for female F344/N rats receiving 750 or 1,500 mg/kg or for male and female B6C3F₁ mice receiving 1,500 or 3,000 mg/kg per day. Nonneoplastic lesions of the forestomach were seen in male rats and male and female mice.

^{*}Categories of evidence of carcinogenicity are defined in the Note to the Reader on page 2.

A summary of the Peer Review comments and the public discussion on this Technical Report appears on pages 13-14.

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APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS IN THE TWO-YEAR GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE

TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEARGAVAGE STUDY OF AMPICILLIN TRIHYDRATE

	CONTROL (VEH)		LOW DOSE		HIGH DOSE		
ANIMALS INITIALLY IN STUDY	50		50		50		
ANIMALS INTIALLY IN STOLLY	50		50		50		
ANIMALS EXAMINED HISTOPATHOLOGICALL			50		50		
NTEGUMENTARY SYSTEM			<u></u>				
*Skin	(50)		(50)		(50)	(07)	
Papilloma, NOS	+ 0	(00)	•	(60)		(2%) (6%)	
Squamous cell papilloma Basal cell tumor		(6%) (2%)	3	(6%)		(8%)	
Basal cell carcinoma	1	(270)	1	(2%)		10/07	
Keratoacanthoma				(2%)			
Fibroma			-	(2,0)	1	(2%)	
*Subcutaneous tissue	(50)		(50)		(50)		
Fibroma	4	(8%)			4	(8%)	
Fibrosarcoma			1	(2%)			
Myxosarcoma					1	(2%)	
RESPIRATORY SYSTEM		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			
#Lung	(50)		(49)		(50)		
Alveolar/bronchiolar adenoma		(2%)		(6%)	1	(2%)	
Alveolar/bronchiolar carcinoma	2	(4%)	1	(2%)			
HEMATOPOIETIC SYSTEM					(20)		
*Multiple organs	(50)		(50)	(0~)	(50)		
Malignant lymphoma, histiocytic type		(00)		(2%)			
Malignant lymphoma, mixed type	1	(2%)	T	(2%)	1	(2%)	
Lymphocytic leukemia	F	(10%)	14	(28%)		(2%) (26%)	
Leukemia, mononuclear cell #Spleen	(50)	(10%)	(49)	(20 %)	(49)	(20%)	
Sarcoma, NOS		(2%)			(40)		
#Thymus	(38)	(=,0)	(32)		(38)		
Thymoma, benign	(2)				1	(3%)	
CIRCULATORY SYSTEM		. <u></u>					
#Spleen	(50)		(49)	(0~)	(49)		
Hemangiosarcoma	-			(2%)	(20)		
#Heart Nouvilamente malignant	(50)		(49)		(50)	(2%)	
Neurilemoma, malignant						(270)	
DIGESTIVE SYSTEM	(49)		(46)		(46)		
#Salivary gland Fibrosarcoma		(2%)	(40)		(40)		
#Liver	(50)	(270)	(49)		(50)		
Neoplastic nodule	(00)		(***)			(2%)	
#Stomach	(48)		(44)		(45)		
Leiomyosarcoma					1	(2%)	
URINARY SYSTEM							
#Kidney	(50)		(48)		(48)		
Alveolar/bronchiolar carcinoma, metastatic		(2%)	(10)		(40)		
#Kidney/pelvis	(50)	(97)	(48)		(48)		
Nephroblastoma		(2%)	(44)		(46)		
#Urinary bladder Transitional cell papilloma	(47)		(44)			(2%)	
Transitional cell papillonia					1		

	CONTROL (VEH)		LOW DOSE		HIGH DOSE		
ENDOCRINE SYSTEM	···	[.]			<u></u>		
#Pituitary intermedia	(46)		(49)		(46)		
Adenoma, NOS	1	(2%)					
#Anterior pituitary	(46)		(49)		(46)		
Carcinoma, NOS	1	(2%)	2	(4%)	2	(4%)	
Adenoma, NOS	11	(24%)	18	(37%)	14	(30%)	
#Adrenal	(50)		(50)		(49)		
Cortical adenoma					2	(4%)	
#Adrenal medulla	(50)		(50)		(49)		
Pheochromocytoma	13	(26%)	12	(24%)	23	(47%)	
Pheochromocytoma, malignant	1	(2%)	5	(10%)	1	(2%)	
#Thyroid	(50)		(48)		(46)		
Follicular cell adenoma					1	(2%)	
Follicular cell carcinoma			1	(2%)			
C-cell adenoma	2	(4%)	3	(6%)	1	(2%)	
C-cell carcinoma			3	(6%)	2	(4%)	
#Parathyroid	(20)		(32)		(25)		
Adenoma, NOS			1	(3%)			
#Pancreatic islets	(47)		(45)		(49)		
Islet cell adenoma	5	(11%)			2	(4%)	
Islet cell carcinoma	1	(2%)			1	(2%)	
REPRODUCTIVE SYSTEM			<u></u>				
*Mammary gland	(50)		(50)		(50)		
Fibroadenoma	1	(2%)	1	(2%)			
*Penis	(50)		(50)		(50)		
Papilloma, NOS			1	(2%)			
*Preputial gland	(50)		(50)		(50)		
Carcinoma, NOS	1	(2%)					
Adenocarcinoma, NOS	1	(2%)	1	(2%)	1	(2%)	
Fibrosarcoma, unclear primary or metast	atic				1	(2%)	
#Prostate	(49)		(48)		(47)		
Adenoma, NOS	2	(4%)			2	(4%)	
#Testis	(50)		(49)		(50)		
Interstitial cell tumor	32	(64%)	30	(61%)	31	(62%)	
*Epididymis	(50)		(50)		(50)		
Mesothelioma, NOS					1	(2%)	
VERVOUS SYSTEM					4. 31		
#Brain	(50)		(50)		(50)		
Astrocytoma					1	(2%)	
Meningioma	1	(2%)					
#Brain/thalamus	(50)		(50)		(50)		
Carcinoma, NOS, invasive	1	(2%)					
#Cerebellum	(50)		(50)		(50)		
Granular cell tumor, NOS					1	(2%)	
PECIAL SENSE ORGANS					B		
*Zymbal gland	(50)		(50)		(50)		
Carcinoma, NOS		(2%)					
IUSCULOSKELETAL SYSTEM							
*Skeletal muscle	(50)		(50)		(50)		
Chordoma				(2%)	(00)		
*Abdominal muscle	(50)		(50)		(50)		

TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTROL (VEH)	LOW DOSE	HIGH DOSE
BODY CAVITIES		· · · · · · · · · · · · · · · · · · ·	
*Thoracic cavity	(50)	(50)	(50)
Mesothelioma, malignant		1 (2%)	
*Abdominal cavity	(50)	(50)	(50)
Undifferentiated carcinoma		1 (2%)	
Lipoma Mesothelioma, NOS	1 (2%)		1 (2%)
*Pleura	(50)	(50)	(50)
Mesothelioma, metastatic	(50)	(30) 1 (2%)	(30)
*Tunica vaginalis	(50)	(50)	(50)
Mesothelioma, NOS	(00)	(86)	1 (2%)
Mesothelioma, malignant		1 (2%)	1 (1)0)
,		_ (,	
ALL OTHER SYSTEMS			
*Multiple organs	(50)	(50)	(50)
Sarcoma, NOS, metastatic		1 (2%)	
Fibrosarcoma, metastatic		1 (2%)	
Leiomyosarcoma, metastatic			1 (2%)
Mesothelioma, metastatic		1 (2%)	
Neurilemoma, metastatic			1 (2%)
ANIMAL DISPOSITION SUMMARY	,		<u></u>
Animals initially in study	50	50	50
Natural death	5	10	10
Moribund sacrifice	10	13	11
Terminal sacrifice	31	27	26
Dosing accident	4		3
TUMOR SUMMARY Total animals with primary tumors**	45	47	46
Total primary tumors	96	110	123
Total animals with benign tumors	40	43	45
Total benign tumors	77	73	93
Total animals with malignant tumors	16	28	23
Total malignant tumors	18	37	25^{-3}
Total animals with secondary tumors##	2	4	2
Total secondary tumors	2	4	2
Total animals with tumors uncertain	_		
benign or malignant	1		4
Total uncertain tumors	1		4
Total animals with tumors uncertain			
primary or metastatic Total uncertain tumors			1
i otal uncertain tumors			1

TABLE A1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

* Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically. † Multiple occurrence of morphology in the same organ; tissue is counted once only. ** Primary tumors: all tumors except secondary tumors

Number of animals examined microscopically at this site ## Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

TABLE A2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-YEARGAVAGE STUDY OF AMPICILLIN TRIHYDRATE

1	CONTR	OL (VEH)	LOW	DOSE	HIG	H DOSE
ANIMALS INITIALLY IN STUDY			50		50	
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY			50		50	
INTEGUMENTARY SYSTEM				<u></u>		
*Skin	(50)		(50)		(50)	
Squamous cell papilloma	-	(2%)				
*Subcutaneous tissue	(50)	(00)	(50)	(0~)	(50)	
Fibroma Fibrosarcoma	3	(6%)	1	(2%)		(6%) (2%)
Lipoma						(2%) (2%)
RESPIRATORY SYSTEM	(50)		(10)		(50)	
#Lung	(50)	(90)	(49)		(50)	(90)
Squamous cell carcinoma Adenocarcinoma, NOS, metastatic	1	(2%)				(2%) (2%)
Alveolar/bronchiolar adenoma	1	(2%)	1	(2%)		(2%) (2%)
Alveolar/bronchiolar carcinoma		(2%)	1	(2.20)	•	(2 10)
						<u> </u>
HEMATOPOIETIC SYSTEM						
*Multiple organs	(50)		(50)		(50)	
Leukemia, mononuclear cell		(28%)		(36%)		(26%)
#Spleen	(50)		(49)		(50)	
Osteosarcoma, metastatic			1	(2%)	9	(10)
Leukemia, mononuclear cell #Thymic lymph node	(43)		(45)		(45)	(4%)
Carcinosarcoma, metastatic	• •	(2%)	(40)		(40)	
#Liver	(50)	(270)	(50)		(50)	
Leukemia, mononuclear cell			1	(2%)		
CIRCULATORY SYSTEM						
#Heart	(50)		(50)		(50)	
Neurilemoma			1	(2%)		
#Uterus	(50)		(50)		(49)	
Hemangiosarcoma					1	(2%)
DIGESTIVE SYSTEM	<u></u>			<u></u>		
#Liver	(50)		(50)		(50)	
Neoplastic nodule				(2%)		
Hepatocellular carcinoma			1	(2%)		
URINARY SYSTEM						
#Kidney	(50)		(50)		(49)	
Adenoma, NOS	1	(2%)			-	
Nephroblastoma	120					(2%)
#Kidney/pelvis Transitional cell carcinoma	(50)		(50)	(9 , 0)	(49)	
#Urinary bladder	(46)			(2%)	(41)	
	(46)	(0~~)	(46)		(41)	
Epithelial tumor, NOS, benign	1	(2%)				

	00111	ROL (VEH)	LOW	DOSE	HIG	H DOSE
ENDOCRINE SYSTEM						
#Anterior pituitary	(49)		(50)		(49)	
Carcinoma, NOS	(40)		(++)	(6%)	/	(6%)
Adenoma, NOS	18	(37%)		(40%)		(45%)
#Adrenal	(50)	··· ·	(50)	(40 %)	(49)	
Cortical adenoma		(2%)		(6%)		(8%)
Cortical carcinoma	-	(2,0)		(0,0)		(2%)
#Adrenal medulla	(50)		(50)		(49)	
Pheochromocytoma		(6%)		(6%)		(8%)
Pheochromocytoma, malignant	-	(0.07)	-	(0.00)		(2%)
#Thyroid	(50)		(49)		(49)	
Follicular cell adenoma	(00)		(10)		,	(2%)
Follicular cell carcinoma	2	(4%)			•	(270)
C-cell adenoma		(2%)				
C-cell carcinoma		(4%)	1	(2%)	1	(2%)
#Pancreatic islets	(48)		(49)		(49)	(210)
Islet cell adenoma	(=0)			(4%)	· · · · ·	(2%)
Islet cell carcinoma				(4 %)		(2%)
			£	(4.10)		(270)
REPRODUCTIVE SYSTEM						
*Mammary gland	(50)		(50)		(50)	
Adenocarcinoma, NOS	2	(4%)			1	(2%)
Carcinosarcoma	1	(2%)				
Fibroadenoma	16	(32%)	25	(50%)	19	(38%)
*Preputial gland	(50)		(50)	. ,	(50)	
Squamous cell papilloma		(2%)	(,			
*Clitoral gland	(50)	v = · · · <i>v</i>	(50)		(50)	
Carcinoma, NOS	(00)			(2%)	(00)	
Adenoma, NOS	1	(2%)	-		2	(4%)
Adenocarcinoma, NOS	•	(2,0)				(4%)
Adenocarcinoma, NOS, invasive	1	(2%)			-	(4/0)
#Uterus	(50)	(2,0)	(50)		(49)	
Adenocarcinoma, NOS		(2%)			(10)	
Leiomyoma	•	(=)	1	(2%)		
Leiomyosarcoma				(2%)		
Endometrial stromal polyp	6	(12%)		(10%)	1	(2%)
Endometrial stromal sarcoma		(4%)	0		*	(= 10)
#Endometrial gland	(50)	13101	(50)		(49)	
Adenomatous polyp, NOS	(00)		(00)			(2%)
#Ovary	(50)		(49)		(47)	(210)
Epithelial tumor, NOS, benign	(00)			(2%)	(****)	
Luteoma			1		9	(4%)
Granulosa cell tumor	1	(2%)			-	(4,0)
			<u> </u>			
VERVOUS SYSTEM						
#Brain/meninges	(50)		(50)		(50)	(00)
Carcinoma, NOS, invasive				(0~)	1	(2%)
Carcinoma, NOS, metastatic				(2%)		
#Brain/thalamus	(50)		(50)		(50)	
A 1 - marine - mark - BTA 161 (marks - mines				(2%)		
Carcinoma, NOS, invasive	(50)		(50)		(50)	
#Cerebellum Granular cell tumor, NOS					1	(2%)

TABLE A2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-YEAR
GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTROL (VEH)	LOW DOSE	HIGH DOSE
MUSCULOSKELETAL SYSTEM	·		
*Femur	(50)	(50)	(50) 1 (2%)
Osteosarcoma	(50)	1 (2%) (50)	(50)
*Intercostal muscle Squamous cell carcinoma, invasive	(50)	(30)	(00)
*Muscle hip/thigh	(50)	(50)	(50)
Rhabdomyosarcoma			1 (2%)
BODY CAVITIES		, <u>, , , , , , , , , , , , , , , , , , </u>	
*Mediastinum	(50)	(50)	(50)
Squamous cell carcinoma, invasive	1 (2%)	(50)	1 (2%) (50)
*Peritoneal cavity Nephroblastoma, metastatic	(50)	(50)	(30) 1 (2%)
Nephroblastoma, metastatic		<u></u>	· (270)
ALL OTHER SYSTEMS			
*Multiple organs	(50)	(50)	(50)
Squamous cell carcinoma, metastatic			1 (2%)
ANIMAL DISPOSITION SUMMARY			
Animals initially in study	50	50	50
Natural death	5	6	10
Moribund sacrifice	13	11	8
Terminal sacrifice	32	$\frac{31}{2}$	31 1
Dosing accident			1
TUMOR SUMMARY			
Total animals with primary tumors**	44	41	45
Total primary tumors	82	94	95
Total animals with benign tumors	33	35	38
Total benign tumors	55	63 25	63 24
Total animals with malignant tumors	22 26	25 30	24 31
Total malignant tumors Total animals with secondary tumors##	26	30	4
Total secondary tumors	3 4	3	5
Total animals with tumors uncertain	-	U	v
benign or malignant	1	1	1
Total uncertain tumors	1	1	1

TABLE A2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

* Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically.
 ** Primary tumors: all tumors except secondary tumors
 # Number of animals examined microscopically at this site
 ## Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

ANIMAL NUMBER	0 4 1	0 4 9	0 3 8	0 1 4	0 0 1	0 2 0	0 4 3	0 4 5	0 0 3	0 1 6	0 1 5	0 2 5	0 4 4	0 3 3	0 5 0	0 2 8	$\begin{array}{c} 0 \\ 1 \\ 2 \end{array}$	0 3 9	0 3 5	0 0 2	0 0 4	0 0 5	0 0 6	0 0 7	0 0 8
WEEKS ON STUDY	0 1 7	0 1 7	0 2 3	0 4 3	0 7 1	0 7 1	0 7 5	0 7 6	0 8 3	0 8 3	0 8 5	0 8 5	0 8 5	0 8 7	0 8 7	0 8 8	0 9 3	0 9 3	1 0 3	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4
INTEGUMENTARY SYSTEM	·																						<u> </u>		
Skin Squamous cell papilloma Basal cell tumor Subcutaneous tissue Fibroma	+	+	+	+	+	+	+	+	+ + X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X +
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	++	+	+	++	+	++	+	+	++	+	+	+	++	++	+	+ X +	+	+++	+	+	+	++	* x +	+++
HEMATOPOIETIC SYSTEM Bone marrow Spleen Sarcoma, NOS Lymph nodes Thymus	+++++++++++++++++++++++++++++++++++++++	+++++	+++++	++++++	+++++	+++	+++++	+++++	+++++	+++-+	+++++	+ + +	++++++	++ +>	++	+ + X +	++ ++	+++++	+++++	+++++	++++-	++++++	+++++	+++++	 + + +
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Fibrosarcoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Liver Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach	++Z++	+ + X + +	++2+++	++2+++	++2+++	+ + N + + + +	+ + Z + +	+ + Z + + +	+ + X + + + +	++2+++	+ + N + +	+ + Z + + +	+ + X + + +	++Z+++	++21++	++Z+++	++2+++	++Z+++	++2+++	+ + Z + + +	++z+++	++X+++	++Z+++	++2+++	+ + X + + + +
Small intestine Large intestine	+	_	+	+ -	_	+ +	-	_	+ +	+ +	-	+ +	+ +	++	+++++	+ +	+++	+ +	+ -	+ +	+ +	+ +	+ +	+	+ +
URINARY SYSTEM Kidney Alveolar/bronchiolar carcinoma metastatic Kidney/pelvis Nephroblastoma	+++	+++	+	+ +	+ +	+ +	 + +	+ + X	+ +	++	+ +	+ +	++	+ +	+ +	+ +	+ +	++	+++	++	++	+ +	+ +	++	++
Urinary bladder	-	+	+	+	-	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS	+	+	-	_	*	+	+	+	+	+	+ x	-	+	+ X	+	+	+	+	+	+	+ X	+	+ X	+	+ X
Adrenal Pheochromocytoma Pheochromocytoma, malignant Thyroid	+	+	+	+	+	++	+	+	+	+	+	+	+	+	+	++	+	+	* +	+	* +	+	+	+	+
C-cell adenoma Parathyroid Pancreatic islets Islet cell adenoma Islet cell carcinoma	++++	- +	+ +	+ +	+ +	- +	+ -	- +	+ +	+ +	+ -	+	+	1+	-	+ +	+ +	+ +	- +	+	- +	+ +	- +	+ +	- +
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Testis	N +	N +	N +	N +	N +	* *	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	+++	N +	N +	N +	N +	N +	N +
Interstitial cell tumor Prostate Adenoma, NOS	+	+	+	+	+	+	+	+ X	+	+	+	X +	X +	+	+	+	+	X +	+	* +	X + X	X +	+	X +	* +
Preputial/clitoral gland Carcinoma, NOS Adenocarcinoma, NOS	N	N	N	N	N	N	N	Ñ	N	N	N	N	N	N	N	N	N	N X	N	N	Ñ	N	N	N	N
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Meningioma	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS Zymbai gland Carcinoma, NOS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*	N	N	N	N	N	N
BODY CAVITIES Peritoneum Mesothelioma, NOS	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, mixed type Leukemia, mononuclear cell	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N X	N	N X	N X	N	N	N X	N	N	N	N

TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEARGAVAGE STUDY OF AMPICILLIN TRIHYDRATE: VEHICLE CONTROL

+: Tissue examined microscopically
 -: Required tissue not examined microscopically
 X: Tumor incidence
 Necropsy, no autolysis, no microscopic examination
 S: Animal missexed

- : No tissue information submitted C: Necropsy, no histology due to protocol A: Autolysis M: Animal missing B: No necropsy performed

TABLE A3.	INDIVIDUAL	ANIMAL	TUMOR	PATHOLOGY	OF	MALE RATS:	VEHICLE	CONTROL
				(Continue)	1)			

											ueo															
ANIMAL NUMBER	0 0 9	0 1 0	0 1 1	0 1 3	0 1 7	0 1 8	0 1 9	0 2 1	0 2 2	0 2 3	0 2 4	0 2 6	0 2 7	0 2 9	0 3 0	0 3 1	0 3 2	0 3 4	0 3 6	0 3 7	0 4 0	0 4 2	0 4 6	0 4 7	0 4 8	TOTAL
WEEKS ON STUDY	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	TOTAL: TISSUES TUMORS
INTEGUMENTARY SYSTEM																										
Skin Squamous cell papilloma Basal cell tumor Subcutaneous tissue Fibroma	+	+ + X	+	+	+	+	+	+ x∢ +	⊉ ⁺ +	+	+	+	+	+ + X	+	+	+ X +	+	+	+	+	+ X +	+ *	+	+	*50 3 1 *50 4
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	++++++	+	+++	++	+	+ +	+ X +	++	+++	+++	+	+++	++	+	+	+	++	++	++	+	+	++	+	+	++	50 1 2 50
HEMATOPOIETIC SYSTEM Bone marrow Spleen Sarcoma, NOS Lymph nodes Thymus	++++++	+ + + +	+++++	++++	+ + + +	+ + + +	++ + ++ +	++++-	+ + + -	+ + + +	+ + + +	++ ++ ++	++ ++ +	++++++	++ 1 -	+ + + +	++++-	++++++	 + + + +	+++++++	+++++++++++++++++++++++++++++++++++++++	+ + + +	+ + + +	+ + + +	+ + + +	50 50 1 45 38
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Salivary gland Fibrosarcoma Liver Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+ + + + + + + + + + + + + + + + + + + +	+ ++Z+++++	+ ++Z++++	+ ++Z++++	+ ++Z+++++	+X++N+++++	+ ++Z+++++	+ ++z++++	+ ++Z+++++	+ ++Z+++++	+ +++2+++++	+ ++Z+++++	+ ++Z+++++	+ ++Z+++++	+ ++Z+++++	+ ++Z+++++	+ ++Z+++++	+ ++Z+++++	+ ++z+++++	+ ++++++++	- ++X++++	+ ++X+++++	+ ++z+++++	+ ++ X +++++	+ ++Z++++	49 1 50 50 *50 47 50 48 44 39
URINARY SYSTEM Kidney Alveolar/bronchiolar carcinoma, metas Kidney/pelvis Nepkroblastoma Urinary bladder	 + + +	+ + +	+ +	+++++	+ + +	++++++	+ X + +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	+++++	+ + +	+ + +	+ + +	+ + +	++++	++++++	 + + +	50 1 50 1 47
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adrenna, NOS Adrenal Pheochromocytoma, malignant Thyroid C-ceil adenoma Parathyroid Pancreatic islets Islet cell adenoma Islet cell carcinoma	+ + + + X	+ + X + +	+ + + + + + + + + + + + + + + + + + + +	+ + X + + + +	+ x + x + x + +	+ + X + + +	+ X + + +	+ x + + +	+ + X + + X + +	+ + + + +	+++++++++++++++++++++++++++++++++++++++	+ + X + X + X + X +	+ + + -+	+ + + + + + + + + + + + + + + + + + + +	+ + + + X	+ * * + + +	+ X + + + + X	+ + + + + + +	+ + X + + +	+ + + X +	+ X + X + + +	- + X + + +	+ X + + -+ X	+ + + X	+ + X + +	46 1 50 13 1 50 2 20 47 5 1
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Testis Interstitial cell tumor Prostate Adenoma, NOS Preputial/clitoral gland Carcinoma, NOS Adenocarcinoma, NOS	N + + N	N + X + N	N + X + N	N +X + N	N + X + N	N + X + N	N + X + N	N + X + N	N + X + N	N + X + N	+ + X + N	N + X + N	N + X + N	N + X + N	N + X + N	N + X + N	N + X + N	N + X + N X	+ + X + N	+ + * * N	+ + X + N	+ + X + N	+ + X + N	N + X + N	N + X N	*50 1 50 32 49 2 *50 1 1
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Meningioma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+	+	+	+	50 1 1
SPECIAL SENSE ORGANS Zymbal gland Carcinoma, NOS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50 1
BODY CAVITIES Peritoneum Mesothelioma, NOS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50 1
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, mixed type Leukemia, mononuclear cell	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	*50 1 5

* Animals necropsied

@ Multiple occurrence of morphology

TABLE A3.	INDIVIDUAL ANIMAL TUMOR	PATHOLOGY OF MALE RATS IN THE TWO-YEAR
	GAVAGE STUDY OF	AMPICILLIN TRIHYDRATE: LOW DOSE

ANIMAL NUMBER	0 3 9	0 1 0	0 2 3	0 4 3	0 0 1	0 4 8	0 1 4	0 2 7	0 4 6	0 3 2	0 4 1	0 2 6	0 0 4	$\begin{array}{c} 0 \\ 1 \\ 2 \end{array}$	0 0 5	0 4 7	0 1 7	0 1 9	0 3 3	0 2 8	0 1 6	0 2 4	0 3 1	0 0 2	
WEEKS ON STUDY	0 4 0	0 4 4	0 5 8	0 5 9	0 6 6	0 7 2	0 7 6	0 7 6	0 7 7	0 8 3	0 8 4	0 8 9	0 9 1	0 9 1	0 9 4	0 9 5	0 9 7	0 9 8	0 9 9	1 0 1	$ \begin{array}{c} 1 \\ 0 \\ 2 \end{array} $	$ \begin{array}{c} 1 \\ 0 \\ 2 \end{array} $	1 0 2	1 0 4	1
INTEGUMENTARY SYSTEM	-						- -										-								
Skin Squamous cell papilloma Basal cell carcinoma Keratoacanthoma	+	+	+	+	+	+	+ X	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	*	+	
Subcutaneous tissue Fibrosarcoma	+	+	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	* X	+	+	+	+	+	
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	+	+	-	+	+	+	+	+	+	+	+	+	* x	* x	+	+	+	+	+	+	+	+	+	-
HEMATOPOIETIC SYSTEM								-					т 												
Bone marrow Spleen Hemangiosarcoma Lymph nodes	++	++	+++++++++++++++++++++++++++++++++++++++	-	+++	+++	++++	+++++++++++++++++++++++++++++++++++++++	++++	+++++	+++	+++++	+	+++++++++++++++++++++++++++++++++++++++	+++	++++	+++	+++++++++++++++++++++++++++++++++++++++	+++++	+++++++++++++++++++++++++++++++++++++++	+++	+++	+++++++++++++++++++++++++++++++++++++++	+ + X	+
Thymus	+	÷	+	-	+	+	+	+	÷	-	-	-	÷	-	-	-	÷	+	-	-	-	+	-	+	4
CIRCULATORY SYSTEM Heart	+	+	+	_	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	4
DIGESTIVE SYSTEM Salivary gland Liver Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Stomach Small intestine	+ + + X - + +	+++2++1	+++X+++		+++Z+++	+ + + Z + + +	+ + + Z + + +	+++Z+++	+++2+++	+ + + Z + + +	+ + X	+++2+++	+ + + Z + + +	+++2++++	+ + + Z + + +	+ + + Z + + +	+++Z+++	+ + + X - + +	+ + + Z + + +	+++Z+++	+ + + × 1 + -	+ + + Z + +	+ + + + N + + + -	+ + + + N + + +	+++2+++
Large intestine	-	+	+	-	+ +	++	-	+	+ +	+ +	-	+ +	+ -	+ +	_	+ +	+ +	+	+	++++	-	_	+	++	+
URINARY SYSTEM Kidney Urinary bladder	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+	+	+
ENDOCRINE SYSTEM			Ŧ					+	· ·							Ψ				·····	· ·	_			
Pituitary Carcinoma, NOS Adenoma, NOS Adrenal	+	+	+	+	+ X +	+	+	+	+ X +	+ X +	+	+ X +	+ X +	+	+ X +	+	+ X +	+	+	+ X +	+	+	* *	+	-
Pheochromocytoma Pheochromocytoma, malignant Chyroid Follicular cell carcinoma	+	+	+	-	+	+	+	+	+	+	-	х +	+	+	+	х +	+	+	+	+	x +	х +	+	+	4
C-cell adenoma C-cell carcinoma Parathyroid Adenoma, NOS	+	+	+	-	+		+	+	+ x	-	-	х -	X -	+	-	-	+	+	-	_	+	-	_	+	4
REPRODUCTIVE SYSTEM Mammary gland	N	N	N	N		N	N	N	N	N	N	N	N	N	+	N	N	N			N	N			N
Fibroadenoma Testis Interstitial cell tumor	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+ x	+	+	+	+	+ X	+	+	-	+	+	+
Prostate Penis	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	A + N	X + N	+ N	+ N	+ N	л + N	X + N	X + N	_ N	X N	X + N	X + N
Papilloma, NOS Preputial/clitoral gland Adenocarcinoma, NOS	N	N	N	X N	N	N	N	N	N					N			N	N				N	N	N	N
VERVOUS SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
AUSCULOSKELETAL SYSTEM Auscle Sarcoma, NOS Chordoma	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N X	N	N	N
ODY CAVITIES leura Mesothelioma, malignant	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
Mesothelioma, metastatic eritoneum Undifferentiated carcinoma unica vaginalis Mesothelioma, malignant	N +	N +	N +	N +	N +	N +	N +	N +	N +	N X +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N N	N + X	N +	N +
LL OTHER SYSTEMS Iultiple organs, NOS Sarcoma, NOS, metastatic	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N		N	N	N X	N	N	N
Fibrosarcoma, metastatic Mesothelioma, metastatic Malignant lymphoma, histiocytic type			x			x													X				x		

TABLE A3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: LOW DOSE (Continued)

											ueu	-/														
ANIMAL NUMBER	0 0 6	0 0 7	0 0 8	0 0 9	0 1 1	0 1 3	0 1 5	0 1 8	0 2 0	0 2 1	0 2 2	0 2 5	0 2 9	0 3 0	0 3 4	0 3 5	0 3 6	0 3 7	0 3 8	0 4 0	0 4 2	0 4 4	0 4 5	0 4 9	0 5 0	TOTAL:
WEEKS ON STUDY	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	TISSUES TUMORS
INTEGUMENTARY SYSTEM																<u>-</u>									+	*50
Skin Squamous cell papilloma Basal cell carcinoma Keratoacanthoma	x	+	+	+	+	x	+	+	+	+ X	+	+	+	+	+	+	Ŧ	Ŧ	Ŧ	+	т	Ŧ	Ŧ	Ŧ	Ŧ	3 1 1
Subcutaneous tissue Fibrosarcoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*50
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma	+	+	+	+	+	+	+	+	+	+	* x	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49 3
Alveolar/bronchiolar carcinoma Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+	+	+	+	X +	+	+	+	+	1 46
HEMATOPOIETIC SYSTEM Bone marrow	+	+	+	+	+	.+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
Spleen Hemangiosarcoma	+	÷	÷	÷	+	÷	+	÷	+	÷	÷	÷	÷	÷	÷	÷	+	+	+	+	+	+	+	+	+	49 1
Lymph nodes Thymus	+++++++++++++++++++++++++++++++++++++++	+ +	+	+ -	+ +	++	+ -	+ 	+ +	+ +	-	+ +	+ +	+ -	+ +	+ -	+ +	+ +	+ +	+ +	+ +	+ +	+	+ +	+ -	42 32
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
DIGESTIVE SYSTEM Salivary gland	+	+	+	+	+	+	+	+	+	+		+	+	+	+	+	+	+	+	+	+	+	_	+	+	46
Liver Bile duct	++	+ +	+ +	++	++	+ + N	++	+ +	+ + N	++	+ + N	+ +	+ +	+ + N	+ + N	+ + N	+ + N	+ + N	+ + N	+ + N	+ + N	+ + N	+ + N	+ + N	+ + N	49 49 *50
Gallbladder & common bile duct Pancreas	N + + +	N + +	N + +	N +	N + +	N + +	N +	N + +	N +	N +	N +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + + +	N + +	N + + +	N + + +	2 + +	45 48
Esophagus Stomach	+	+++	+++++	+++	+	+	++++	+	+	+	+	+	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+	++++	+	+	+	+	+++	++++	+++	+++++++++++++++++++++++++++++++++++++++	, + +	40
Small intestine Large intestine	++	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	÷	÷	+	-	÷	÷	÷	-	38
URINARY SYSTEM													+		4						+			+	+	48
Kidney Urinary bladder	(+	+ +	+ -	+ +	+	+	++	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	44
ENDOCRINE SYSTEM	+	+														+		 +		+	+	+	+	 +	+	49
Pituitary Carcinoma, NOS Adenoma, NOS	x	т	x	x	Ŧ	Ŧ	Ŧ	+	Ŧ	x	Ŧ	Ŧ	Ŧ	x	x		т	'	x	x	x	x	1	,	x	2 18
Adrenal Pheochromocytoma	x x	+	+ X	+ X	+	+	* X	* x	* X	+	+	* X	+	+	*	+	+	+	+ X	+	+	+	+	+	+	50 12
Pheochromocytoma, malignant Thyroid	.	X +	+	x +	+	+	+	+	+	+	+	+	+	+	+	X +	+	+	+	+	+	+	+	+	X +	5 48
Follicular cell carcinoma C-cell adenoma	1		x		,		,							Ċ	x											1 3
C-cell carcinoma Parathyroid	_	~	-	+	÷	+	+	+	+	+	+	+	+	+	+	+	_	X +	+	X +	+	+	_	+	x	3 32
Adenoma, NOS																										1
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma	N	N	+	N	N	N	N	N	N	N	+	N	N	* x	+	N	N	+	÷	N	N	N	N	N	+	*50 1
Testis Interstitial cell tumor	+	* X	* X	* x	* X	* X	* X	* X	* X	+	* X	* X	* X	+	* x	* X	* X	* X	+	* X	* X	* X	* X	* X	* X	49 30
Prostate Penis	+ N	Ň	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	48 *50
Papilloma, NOS Preputial/clitoral gland	N	N	N	N	N	N	N	N	N	N	N				N		-				N	N	N	N		1 *50
Adenocarcinoma, NOS		x			14	14	14	14	14	.,	14				.,			.,	••		• •	•	•	••	••	1
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
MUSCULOSKELETAL SYSTEM Muscle	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50
Sarcoma, NOS Chordoma															_											
BODY CAVITIES Pleura	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	*50 1
Mesothelioma, malignant Mesothelioma, metastatic	N	NT	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	X N	N	1 *50
Peritoneum Undifferentiated carcinoma	N	N	N	N	N	N	N	N	N	Ν	N	N	N	N	14		19	1. 1				 	т. т.		+	1 *50
Tunica vaginalis Mesothelioma, malignant	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	Ŧ	+	+	+	Ŧ	Ŧ	Ŧ	Ŧ	Ŧ	÷	1
ALL OTHER SYSTEMS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50
Multiple organs, NOS Sarcoma, NOS, metastatic Fibrosarcoma, metastatic	14	74	14	11	.,	74	14	74	74	14	74		11	1.		••		••	••	••	••	••	• •		•	1
Mesothelioma, metastatic Mesothelioma, metastatic Malig. lymphoma, histiocytic type																										1
Malignant lymphoma, mixed type Leukemia, mononuclear cell	ļ	x	x			x		x						x	x						x		x			1 14
* Animals necropsied	l		_																							

* Animals necropsied

TABLE A3.	. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS IN THE TWO-YEAR
	GAVAGE STUDY OF AMPICILLIN TRIHYDRATE: HIGH DOSE

ANIMAL NUMBER	0 1 1	0 4 4	0 0 9	0 5 0	0 0 1	0 0 5	0 4 5	0 4 8	0 1 8	0 0 4	0 2 7	0 0 3	0 2 6	0 4 3	0 1 5	0 2 5	0 3 6	0 3 2	0 2 0	0 0 2	0 2 8	0 3 0	0 4 7	0 2 4	0 0 6
WEEKS ON STUDY	0 3 6	0 4 5	0 4 9	0 5 0	0 6 3	0 6 3	0 6 3	0 7 1	0 8 0	0 8 3	0 8 9	0 9 2	0 9 2	0 9 2	0 9 3	0 9 3	0 9 3	0 9 4	0 9 6	0 9 7	0 9 7	0 9 7	0 9 8	1 0 3	1 0 4
INTEGUMENTARY SYSTEM Skin Papilloma, NOS Squamous cell papilloma Basal cell tumor Fibroma	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+ X	+	*	+	+	+	+	+	+	+
Subcutaneous tissue Fibroma Myxosarcoma	+	+	+	+	+	+	+	+	+	+	+ x	*	+	+	*	+	+	+	+	+	+	+	* X	+	+
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Trachea	+++	++	+	+ +	++	++	++	+++	+ +	++	* *	++	++	+++	+++	+ +	++	+ +	+ +	+++	++	+ +	+++	+++	+ + +
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus Thymoma, benign	+++++++++++++++++++++++++++++++++++++++	+ + + +	++++++	++-++++++++++++++++++++++++++++++++++++	+ + + +	+++++	+ - + +	+++++	+ + + +	+ + + +	++	+++-	++++++	+++++	++++-	++	+ + -	++++++	+++++	+ + + +	++++-	+++++	++	+++++	+ + + +
CIRCULATORY SYSTEM Heart Neurilemoma, malignant	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Bile duct Galibladder & common bile duct Pancreas Esophagus Stomach Leiomyosarcoma Small intestine Large intestine	++ +X+++ ++	++ + Z +++ ++	-++N++	++ +Z+++ +	++ + Z +++ ++	++ +2+++ ++	++ +2++1 11	++ +Z+++ ++	+++ + + + + + + + + + + 1	++ +2+++ +1	++ +2+++ +1	++ +Z+++ ++	++ +Z+++ ++	++ +2+11 11	++ ++++++++	++ +Z+++ ++	++ +2+++ +1	++ +Z+++ +1	++ +Z+++ ++	++ +Z+++ ++	+ + X + X + + + + + + + + + + + + + + +	++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++++2++++++++++++++++++++++++++++++++++
URINARY SYSTEM Kidney Urinary bladder Transitional cell papilloma	-	+ +		+ +	+ +	+ +	+ -	+ +	+++	+ +	+ +	+++	+ +	+	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	++	+++	+++++
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adrenal Cortical adenoma Pheochromocytoma Pheochromocytoma, malignant Thyroid	- +	+ X + +	 +	- + +	+++++	+ X +	++	++++	+ + X +	+ X + +	+++++	+ + X +	++++	++	+ + X +	+ + X X +	+++	++++	+ + +	- + +	++++	+ X +	+++++	++++	+ + X +
Folicular cell adenoma C-cell adenoma C-cell carcinoma Parathyroid Pancreatic islets Islet cell adenoma Islet cell carcinoma	-+	- +	+	+ +	X + +	 +	+ +	- +	+ +	- +	- +	- +	- +	- +	+ +	- +	- +	 +	X + +	 +	+ +	- +	+++	- +	- + X
REPRODUCTIVE SYSTEM Mammary gland Testis Interstitial cell tumor Prostate Adenoma, NOS Preputial/clitoral gland Adenocarcinoma, NOS	N + + N	N + + N	N + + N	N + + N	N + X + N	N + + N	+ + + N	N + + N	N + + N	N + X + N	м + + N	N + + N	+ + X + N	N + X - N	N + X - N	N + X + N	N + X + N	2 + + 2	z + + z	N + X + N	+ + + X + N	N + + N	N + X + X N	+ + X + N	N + X + N
Fibrosarcoma, unclear primary or metastatic Epididymis Mesothelioma, NOS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Ν	N	N	N
NERVOUS SYSTEM Brain Granular cell tumor, NOS Astrocytoma	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* X	+
BODY CAVITIES Peritoneum Lipoma Tunica vaginalis Mesothelioma, NOS	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N X +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +
ALL OTHER SYSTEMS Multiple organs, NOS Leiomyosarcoma, metastatic Neurilemoma, metastatic Lymphocytic leukemia Leukemia, mononuclear ceil	N	N	N	N	N	N X	N	N	N	N	N	N	N X	N	N X	N X	N	N X	N	N X	N X	N	N	N X	N

TABLE A3.	INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE RATS: HIGH DOSE	
	(Continued)	

ANIMAL NUMBER	0 0 7	0 0 8	0 1 0	0 1 2	0 1 3	0 1 4	0 1 6	0 1 7	0 1 9	0 2 1	0 2 2	0 2 3	0 2 9	0 3 1	0 3 3	0 3 4	0 3 5	0 3 7	0 3 8	0 3 9	0 4 0	0 4 1	0 4 2	0 4 6	0 4 9	
WEEKS ON STUDY	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	TOTAL: TISSUES TUMORS
INTEGUMENTARY SYSTEM Skin Papilloma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*50 1 3
Squamous cell papilloma Basal cell tumor Fibroma Subcutaneous tissue Fibroma Myxosarcoma	+	+	* X	X +	+	Х +	+	+	+	÷	+	+	+	х +	X X +	X +	+	+	+	+	+	+	+	+	+	3 4 1 *50 4 1
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Trachea	++++	+ +	+	+ +	+++	+++	+++	+++	+ +	+ +	+++	+ +	+ +	+ +	++	+ +	++	+++	+ +	++	+	+++	++	+++	++	50 1 50
HEMATOPOIETIC SYSTEM Bone marrow Spieen Lymph nodes Thymus Thymoma, benign	+++++	+++++	+ + + +	+++++	+ + + +	+++++++	++++++	+++++++++++++++++++++++++++++++++++++++	+ + + +	+++++	+ + + +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+ + + +	+++	++++	+ + + + X	+ + + -	+ + + + +	++-+	++++++	++-+	++++++	++++	50 49 38 38 1
CIRCULATORY SYSTEM Heart Neurilemoma, malignant	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* X	+	+	+	+	+	+	+	+	50 1
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach	+ + + + + + + + + + + + + + + + + + +	++++X+++	+++ + Z + + +	+ + + + + + + + + + + + + + + + + + +	+ + + + N + + + + + + + + + + + + + + +	++++++++	++ +Z+++	++ +Z+++	+++ +X+++	++ +2+++	++ + + + + + + + + + + + + + + + + + + +	-++ Z +++	+++ +X+++	++++2+++	++++2++++	++ + + + + + + + + + + + + + + + + + + +	+++ +X+++	+++ +++ ++++	++ +Z + ++	++++2+++	1 + + z + + +	+ + + + + + + + + + + + + + + + + + +	1++z+++	++ +++++	++++2+++	46 50 1 50 *50 49 49 45
Leiomyosarcoma Small intestine Large intestine	++	+ +	+ -	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ -	+ +	+ +	+ +	+ 	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	1 43 36
URINARY SYSTEM Kidney Urinary bladder Transitional cell papilloma	+++	++	+ +	+ +	+++	++	++	+ +	+ +	+ +	+ +	+ + X	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	48 46 1
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Adrenai Cortical adenoma Pheochromocytoma	+ X +	+	+ + X	+ + X	+ X + X	+	+ + X	+ + X	+ X + X	+ + X X	+ X + X	+ X +	+ + X	+ + X	+ + X	+	+ X + X	+ + X	* + x	+ X + X	+ +	+ X + X	+ X + X	+ + X	+ X +	46 2 14 49 2 23
Pheochromocytoma, malignant Thyroid Follicular cell adenoma C-cell adenoma C-cell carcinoma Parathyroid Pancreatic islets	+	+ + +	+ + +	+ X - +	+ + +	+ + +	+ ++	+ +	+ + +	+ + +	+ X +	+ + +	+ -+	+ - +	+ +	+ + +	+ -+ +	++++	+ + + + + + + + + + + + + + + + + + + +	X + + + +	+ + +	+ + +	+ -+	+ ++	+ +	1 46 1 2 25 49
Islət cəll adenoma Islət cəll carcinoma REPRODUCTIVE SYSTEM											x								X							
Mammary gland Testis Interstitial cell tumor Prostate Adenoma, NOS	N + X +	N + X +	+ + X +	N + X +	N + + X	N + X +	+ + X +	N + X +	N + X +	N + X +	N + X +	х + +	N + X +	+ + X -	+ + X +	ч + +	и + +	N + X +	N + +	N + X +	N + X +	N + X +	א + +	N + X +	N + X +	*50 50 31 47 2
Preputial/clitoral gland Adenocarcinoma, NOS Fibrosarcoma, unclear prim or meta Epididymis Mesothelioma, NOS			N N		N			N N			N N X	N N	N X N				N N					N N	N X N	N N		*50 1 1 *50 1
NERVOUS SYSTEM Brain Granular ceil tumor, NOS Astrocytoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1 1
BODY CAVITIES Peritoneum Lipoma Tunica vaginalis Mesothelioma, NOS	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N + X	N +	N +	N +	N +	N +	N +	*50 1 *50 1
ALL OTHER SYSTEMS Multiple organs, NOS Leiomyosarcoma, metastatic Neurilemoma, metastatic Lymphocytic leukemia Leukemia, mononuclear cell	N	N	N X	N		N X		N	N	N	N	N	N	N X	N	N X	N X	N	N	N	N	N	N	N	N X	*50 1 1 1 1 13

* Animals necropsied

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEARGAVAGE STUDY OF AMPICILLIN TRIHYDRATE: VEHICLE CONTROL

ANIMAL NUMBER	0 2 1	0 1 8	0 1 1	0 1 5	0 3 2	0 0 1	0 0 2	0 5 0	0 4 4	0 0 5	0 2 6	0 2 5	0 1 9	0 4 7	0 2 4	0 3 8	0 3 5	0 4 2	0 0 3	0 0 4	0 0 6	0 0 7	0 0 8	0 0 9	0 1 0
WEEKS ON STUDY	0 5 1	0 5 8	0 7 4	0 7 5	0 8 6	0 8 7	0 8 7	0 8 7	0 9 0	0 9 3	0 9 3	0 9 4	0 9 8	0 9 8	1 0 2	1 0 2	1 0 3	1 0 3	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4
INTEGUMENTARY SYSTEM Skin Squamous cell papilloma Subcutaneous tissue Fibroma	+++++	++	+ +	+	+ +	++	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	N N	++	+ +	+ +	++	++	+ +	+ +	+ + X	++	++
RESPIRATORY SYSTEM Lungs and bronchi Squamous cell carcinoma Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	* *	+	+	+ X +	+	+	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Carcinosarcoma, metastatic Thymus	++	++-++-+++++++++++++++++++++++++++++++++	+++-+++++++++++++++++++++++++++++++++++	++++++++++++++++++++++++++++++++++++++	+++	+ + + +	++++	+ + + +	+ + + + X -	+ + + +	+++-+++++++++++++++++++++++++++++++++++	+++++++++	+++-+++++++++++++++++++++++++++++++++++	+++	+ + + +	++++	+++++++	+++++	+ + - +	+ + + +	++++++	+ + + +	+ + + +	+++++++++++++++++++++++++++++++++++++++	+ + + +
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Stall intestine Large intestine Large intestine	+++2++++++	+++2+++++	1++2+++++	+++2+++++	+++2++++1	+++Z+++	+++2 +	+++X++++	7++Z+++++	+++2+++++	+++×++++++	+++2++++	+++2+++++	+++2+++++	+++2+++++	+++2+++++	+++2+++++	+++2+++++	+++2+++++	+++2+++++	+++2+++++	+++X+++++	+++2+++++	+++2+++++	+++2+++++
URINARY SYSTEM Kidney Adenoma, NOS Urinary bladder Epithelial tumor, NOS, benign Transitional cell papilloma	+	++	++	++	+ +	++	+ +	++	+ .+	+ +	++	++	++	+ +	++	+	+	++	+ +	++	++	+	+ + x	+ +	 + +
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenal Cortical adenoma Pheochromocytoma Thyroid Follicular cell carcinoma C-cell adenoma C-cell adenoma C-cell carcinoma Parathyroid	+ + +	+++++	+ + + + +	+ X + + · · -	++++++	+ + + +	++++	+ * +	+ + + -	+ + +	+ + +	++++++	+ + +	+ + X +	+ + + +	+ + X+ X+ X+	+ + + + + + + -	+ + + +	++++	+ + +	+ + + +	++++	+ + + +	+++++	+ + +
REPRODUCTIVE SYSTEM Mammary gland Adencearcinoma, NOS	+	+	+	+	+	+	+	+	+	+	+	+	* x	*	N	+	+	N	+	+	N	+	+	+	+
Carcinosarcoma Fibroadenoma Preputia/clitoral gland Squamous cell papilloma Adenoma, NOS	N	N	N	N	N	N	N	N	X N	X N	X N X	N	N		N	X N	X N	N	N	N	N	N	N	X N X	X N
Adenocarcinoma, NOS, invasive Uterus Adenocarcinoma, NOS Endometrial stromal polyp Endometrial stromal sarcoma	+ x	+	+	+	+	+	+ X	+	+	+	+	+	X +	* X	+	+ X	+	+	+	+	+	+	+	+ X	+
Ovary Granulosa cell tumor NERVOUS SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Brain MUSCULOSKELETAL SYSTEM Muscle	+ 	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N		+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N	+ N
Squamous cell carcinoma, invasive BODY CAVITIES Mediastinum Squamous cell carcinoma, invasive	N	N	N	N	N	N	N	N	N	N	N	N	N	X N X	N	N	N	N	N	N	N	N	N	N	N
ALL OTHER SYSTEMS Multiple organs, NOS Leukemia, mononuclear cell	N	N	N	N	N X	N	N	N	N	N	N X		N	N	N X		N	N X	N	N	N		N X	N X	N

+: Tissue examined microscopically -: Required tissue not examined microscopically X: Tumor incidence N: Necropsy, no autolysis, no microscopic examination S: Animal missexed

: No tissue information submitted C: Necropsy, no histology due to protocol A: Autolysis M: Animal missing B: No necropsy performed

								(4	-on	un	ueo	1)														
ANIMAL NUMBER	0 1 2	0 1 3	0 1 4	0 1 7	0 1 8	0 2 0	0 2 2	0 2 3	0 2 7	0 2 8	0 2 9	0 3 0	0 3 1	0 3 3	0 3 4	0 3 6	0 3 7	0 3 9	0 4 0	0 4 1	0 4 3	0 4 5	0 4 6	0 4 8	0 4 9	TOTAL
WEEKS ON STUDY	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	TOTAL: TISSUES TUMORS
INTEGUMENTARY SYSTEM	·																									·
Skin Squamous cell papilloma Subcutaneous tissue Fibroma	++	* *	+ +	+ +	+ +	N N	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ + X	+ +	+ +	+ + X	*50 1 *50 3
RESPIRATORY SYSTEM Lungs and bronchi Squamous cell carcinoma Aiveolar/bronchiolar adenoma Aiveolar/bronchiolar carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+	50 1 1 1 50
Trachea HEMATOPOIETIC SYSTEM		÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+			+	+	+	+		
Bone marrow Spleen Lymph nodes Carcinosarcoma, metastatic Thymus	++++	++++	++++	+ + +	+++	+ + + +	+++	+ + +	+ + +	++++	+ + + +	++++++++	++++	+ + + +	+ + + +	+ + +	+ + +	+ + + +	+++++++++++++++++++++++++++++++++++++++	+++++++++	+ + + +	+ + + +	+ + + + +	+ + + +	+ + +	50 50 43 1 35
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Salivary gland Liver Bile duct Galibladder & common bile duct Pancreas Esophagus Stomach Stomach Small intestine Large intestine	+++2+++++	+++2++++	+++X+++++	+++2++++1	+++Z++++	+++2+++++	+++Z++++	+++Z+++++	+++2+++++	+++Z+++++	+++Z+++++	+++2+++++	+++Z++++1	+ + + X + + + + + + + + + + + + + + + +	+ + + Z + + + + +	+++2++++	++++2+++++	+++2++++++	+++2+++++	+++2++++++	+ + + + X + + + + + +	+++2++++	+++Z+++++	+++Z+++++	+ + + X + + + + + + + + + + + + + + + +	48 50 50 *50 48 48 49 48 37
URINARY SYSTEM Kidney Adenoma, NOS Urinary bladder Epitheitai tumor, NOS, benign Transitional cell papilloma	+++	+ +	+ +	++	+ +	* * +	+ +	+ +	+ -	++	++	++	++	+++	++	+++	++	++	+ + X	+ +	+ +	+ +	+ +	+ +	+++	50 1 46 1 1
ENDOCRINE SYSTEM Pituitary Adenoma, NOS Adrenal Cortical adenoma	++	* *	* *	* *	+++	+	+ +	++	++	* *	 +	* * +	+++	+ +	++	+ +	++	* *	+ X + Y	* *	+ +	* * +	++	++	+++	49 18 50 1
Pheochromocytoma Thyroid Follicular cell carcinoma C-cell adenoma C-cell carcinoma	+	+	+	+	+	+	+	X +	* X	+	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	3 50 2 1 2
Parathyroid	-	-	-	+	-	-	-	-	+	-	-		-	-	-		-	-	+	-	-	-	+	~	-	13
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Carcinosarcoma	+	+	+	+	+	+	+	N	+	+	+	+	N	+	+	+	+	N	+	÷	+	+	+	+	+	*50 2 1
Fibroadenoma Preputal/citoral gland Squamous cell papilloma Adenoma, NOS	N	N	N	N	X N	X N	X N	N	N	X N	N	X N	N	N	X N	N	N	N	X N	X N	N	N	X N	N	N	16 *50 1 1
Adenocarcinoma, NOS, invasive Uterus Adenocarcinoma, NOS Endocartical strumal polym	+	+	+	+	+	+ v	+	+	+	+	÷	+	+	+ v	+	+	+	+	+	+	+	+	+	+	+	1 50 1 6
Endometrial stromal polyp Endometrial stromal sarcoma Ovary Granulosa cell tumor	X +	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	2 50 1
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
MUSCULOSKELETAL SYSTEM Muscie Squamous cell carcinoma, invasive	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50 1
BODY CAVITIES Mediastinum Squamous cell carcinoma, invasive	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50 1
ALL OTHER SYSTEMS Multipie organs, NOS Leukemia, mononuclear cell	N X	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N X	N X	N	N	N	N	N	*50 14

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: VEHICLE CONTROL (Continued)

* Animals necropsied

TABLE A4.	INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEAR
	GAVAGE STUDY OF AMPICILLIN TRIHYDRATE: LOW DOSE

ANIMAL NUMBER	0 4 3	0 0 8	0 0 3	0 1 7	0 3 3	0 0 9	0 3 0	0 4 1	0 2 2	0 4 7	0 2 4	0 4 2	0 2 6	0 2 1	0 1 9	0 4 5	0 4 9	0 0 1	0 0 2	0 0 4	0 0 5	0 0 6	0 0 7	0 1 0	0 1 1	
WEEKS ON Study	000	0 0 4	0 5 4	0 5 9	0 7 1	0 7 7	0 7 7	0 8 3	0 8 6	0 8 6	0 8 7	0 8 8	0 9 0	0 9 3	0 9 4	9 4	1 0 3	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibroma	+	N	+	+	+	+	+	+	+	+	+	+	N	+	+	+	+	+	+	+	+	+	*	+	+	
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Trachea	+++	++	++	+	+ +	+ +	+	+ +	++	+++	+++	+ +	++	++	++	+ +	++	+ +	-+	++	+++	++	++	++	++	
HEMATOPOIETIC SYSTEM Bone marrow Spleen Osteosarroma, metastatic Lymph nodes Thymus	++++++	+ + + +	++++-	+++++	++ ++ ++	++++++	++++++	+ + + +	+ - + + +	++ ++	++++-	++++-	+ + + +	+++-	+ + + +	+++++	++++	++ ++ ++	+++++	++-++	++ + +	++++-	++ ++ ++	+ + + +	+ + + +	
CIRCULATORY SYSTEM Heart Neurilemoma	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+	
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Hepatocellular carcinoma	++++	+++	+ +	+ +	+++	+ +	++++	+++	+ +	+++	++++	+++	+ +	+ +	+ +	++++	+ +	+ +	+ +	+ +	+++	+ + X	++++	+++	+ +	
Leukemia, mononuclear cell Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+ 2 + + + + +	+ Z + + + +	+ + + + 1	+ 2 + + + + +	+ + + + + + + + +	+ 2 + + + + + +	+ 2 + + + + + +	+z+++i+	+ 2 + + + + +	+ 2 + +	+2+++++	+ 2 + + + + +	+2+++=	+2+++++	+2+++++	+ 2 + + + + +	+ 2 + + + +	+ Z + + + + 1	+ 2 + + + + +	+2+++++	+ 2 + + + +	x + x + + + + + + + + + + + + + + + + +	+ Z + + + + +	X + N + + + + +	+ 2 + + + + +	
URINARY SYSTEM Kidney Kidney/pelvis Transitional cell carcinoma Urinary bladder	++++++	+++	 + + +	+++	+++	+ + +	+++++	+ + +	+ + +	+ + +	+ + +	+++++	+ + +	++++++	+++++	+++++	+ + +	++++	+++++	+ + +	+++++	+++++	+ + +	+ + +	+ + +	
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Adrenal Cortical adenoma Pheochromocytoma Thyroid C-cell carcinoma Parathyroid	+++++++++++++++++++++++++++++++++++++++	++++++	+ *	+ + +	+ X + +	+ + +	+ + +	+ X + +	+ X + +	+ + +	+++++	+ x + +	* * +	+ X + +	+ + +	+ + -	* * +	+ * * +	+ + +	+ x + x +	+++++	+ + +	+ + + x +	+ X + +	+ + +	
Fancratic islets Islet cell adenoma Islet cell carcinoma	+	+	+	+ x	+	+	+	+	+	-	÷	+	+	÷	÷	÷	+	+	+	+	×	* x	+	+	+	
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Preputial/elitoral gland Carcinoma, NOS Uterus	N N +	N N +	N N +	+ N +	+ N +	+ x N +	+ NX+	+ X N +	+ N +	+ N +	+ N +	+ N +	+ X N +	+ x N +	+ N +	+ N +	+x N +	+ x N +	+ N +	+ x N +	+ N +	+ N +	+ x N +	+ x N +	+ N +	
Leiomyoma Leiomyosarcoma Endometrial stromal polyp Ovary Epithelial tumor, NOS, benign	+	+	+	+	+	+	+	• +	, +	+	x +	+	+	+	х +		+	х х +	+	, +	x +	+ X	, +	+	+	
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Carcinoma, NOS, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+ X	+	+	
MUSCULOSKELETAL SYSTEM Bone Osteosarcoma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	
ALL OTHER SYSTEMS Multiple organs, NOS Leukemia, mononuclear cell	N	N	N X	N	N	N	N	N	N	N	N X	N	N	N	N	N X	N X	N	N	N	N X	N	N X	N	N	
ANIMAL	T O	0	0		0			-0	- AT	0	0	0	0	0	0	- 51	0		- 01		- 01	0	- 01	0	0	
--	---	--------------------	---	---	---------------	----------------------	---------------	--------------------	---	---------------	----------------------	---------------------	-----------------------	------------------------	---	-----------------------	--------------------	---	---	----------------------	---------------	------------------	---	---	--------------------	--
NUMBER	1 2	1 3	1	1 5	1	1	20	23	0 2 5	27	28	2 9	3 1	32	3 4	3 5	3 6	3 7	3	3 9	4	4 4	4	4	5 0	TOTAL:
WEEKS ON STUDY	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	TOTAL: TISSUES TUMORS
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibroma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	*50
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Trachea	+++++	+ +	+ +	++	+	 + +	+ +	++	+ +	+++	+ +	+ +	+ +	+ +	++	+ +	+++	* *	++	+ +	+ +	+ +	++	+ +	+ +	49 1 50
HEMATOPOIETIC SYSTEM Bone marrow Spleen Osteosarcoma, metastatic Lymph nodes Thymus	+ + X + +	+ + + +	+++++++	+++	++++++	++++-	+ + +	+ + + +	+++++	+++++	++++++	++++++	++++++	++ ++	++++++	+ + + +	+ + + +	++++	+ + + +	++++-	++++++	- + + +	+ + + +	++ ++	+ + +	49 49 1 45 41
CIRCULATORY SYSTEM Heart Neurilemoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1
DIGESTIVE SYSTEM Salivary gland Liver Neoplastic nodule Hepatocellular carcinoma Leukema, mononuclear cell	+++	- + X	+++	+ +	+ +	++	+++	+++	+ +	+ +	+ +	+ +	+++++	+++	+ +	+++	+++	+ +	+++	+ +	+++	+ +	+ +	+ +	++++	49 50 1 1 1
Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+Z++++	+ z + + + + +	+ Z + + + + +	+ Z + + + + +	+ Z + + + + +	+ Z + + + + +	+ Z + + + + 1	+ Z + + + +	+ Z + + + + +	+ Z + + + + +	+ Z + + + + +	+ + + + + + + + + +	+ z + + + +	+ Z + + + + +	+ Z + + + +	+ z + + + + +	+	+ Z + + + + +	+ X + + + + 1	+ Z + + + + +	+ Z + + + + +	+ z + + + + +	+ X + + + +	+ Z + + + + +	+ + + + Z +	50 *50 49 48 50 46 36
URINARY SYSTEM Kidney Kidney/pelvis Transitional cell carcinoma Urinary bladder	+++++++++++++++++++++++++++++++++++++++	+ + +	++++++	+ + +	+ + +	+ + +	+ + +	+ + +	+ + +	+++++	+ + X +	+++++	+++	++++++	+ + +	+ + +	+ + +	+++++	+ + +	+ + +	+++++	+ + +	+ + +	+++++	+ + +	50 50 1 46
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Adrenal Cortical adenoma Phaochromocytoma Thyroid C-cell carcinoma Pancreatic islets Islet cell adenoma Islet cell carcinoma	+ X + + + + + + + + + + + + + + + + + +	+ X + + +	+ + + + + + + + + + + + + + + + + + + +	+++++++++++++++++++++++++++++++++++++++	++++++	+ X + + X - +	+ + + +	+ X + + +	+ + + + + + + + + + + + + + + + + + + +	+ X+ + + +	+ x + x + + + +	+ x + + -+	+ + + + +	+ + X + -+	+ + + + + + + + + + + + + + + + + + + +	+ + + - X	+ X + + +	+ X + + + + + + + + + + + + + + + + + +	+++++++++++++++++++++++++++++++++++++++	+ + + +	+ x + x + - +	+ + + +	+++++++++++++++++++++++++++++++++++++++	+ x + + + + + + + + + + + + + + + + + +	+ X + + +	50 3 20 50 3 49 1 20 49 2 2 2
REPRODUCTIVE SYSTEM Mammary gland Fibroadenoma Preputial/citoral gland Carcinoma, NOS	+ N	+ X N	+ X N	+ N	N N	+ X N	+ X N	+ X N	+ N	+ X N	+ N	+ X N	+ X N	+ X N	N N	+ X N	+ X N	+ N	N N	+ X N	+ X N	N N	+ X N	* X N	+ X N	*50 25 *50 1
Uterus Leiomyoma Leiomyosarcoma Endometrial stromal polyp Ovary Epithelial tumor, NOS, benign	+	+	+ X +	+	+	+	+	+	+	+ +	+	++	+	+	+ X +	+	+	+ +	+	+	+	+	+ +	+	+	50 1 5 49 1
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Carcinoma, NOS, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1 1
MUSCULOSKELETAL SYSTEM Bone Osteosarcoma	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50 1
ALL OTHER SYSTEMS Multiple organs, NOS Leukemia, mononuclear cell	N X	N	N X	N	N	N	N	N X	N	N X	N X	N X	N	N	N	N X		N X	N X	N X	N	N	N	N	N X	*50 18

TABLE A4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS: LOW DOSE (Continued)

TABLE A4.	INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE RATS IN THE TWO-YEAR
	GAVAGE STUDY OF AMPICILLIN TRIHYDRATE: HIGH DOSE

ANIMAL NUMBER	0 1 3	0 0 1	0 2 4	0 0 5	0 4 1	0 1 1	0 4 9	009	0 3 6	0 3 5	0 5 0	0 1 8	0 4 4	0 0 2	0 3 9	0 0 7	0 0 8	0 3 8	0 4 8	0 0 3	0	0 0 6	0 1 0	0 1 2	0 1 4
WE EKS ON Stud y	0 5 8	0 7 4	0 7 6	0 8 0	0 8 4	0 9 1	0 9 2	0 9 3	0 9 3	0 9 5	0 9 6	0 9 7	0 9 7	0 9 8	1 0 0	1 0 2	1 0 2	1 0 3	1 0 3	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibroma Fibrosarcoma Lipoma	+	+	+	+	+	+	+	*	*	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi Squamous cell carcinoma Adenocarcinoma, NOS, metastatic Alveolar/bronchiolar adenoma	+	+	+	+	+	+	+	+	+	*	+	+	+	+	+	+	+	+	+	+	+ X	+	+	+	+
Trachea HEMATOPOIETIC SYSTEM Bone marrow Spieen Leukamia, mononuciear celi Lymph nodes Thymus	++++++	+ + + +	+++++	+ + + +	+ + + +	++x+-	+ + + + +	+ + + +	+ + + +	++ ++ ++	+++-	+ + + +	+ + + +	+ + + + +	+ + + +	++++-	+++++	++x+-	+++++	+ + + + +	+ + + + +	+ + + + +	+ + + + + + +	+ + + +	+++++++++++++++++++++++++++++++++++++++
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Bile duct Galibladder & common bile duct Pacreas Esophagus Stomach Stomach Stage intestine Large intestine	+++2+++++	+++2+++++++++++++++++++++++++++++++++++	+++Z++++++	+++2+++++	+++2+++1	+++2+++++	+++Z+++++	+++2+++++	+++2+++1	+++2+++++	+++z++1+1	+++2++111	+++2+++++	+++2+++++	+++2+++++	+++2++++1	+++2+++++	+++2+++++	+++21+111	+++2+++++	+++2+++++	+++2+++++	+++2++++++	+++2+++++	+++2+++++
URINARY SYSTEM Kidasy Nephroblastoma Urinary bladder Transitional cell pepilloma	+	+ +	+ -	+	+ -	+++	+++	+++	+	+ +	++	+ -	+	+ *	+	++	++	+ +	-+	+ +	+ +	++	++	++	+++
ENDOCHINE SYSTEM Pituitary Carrinoma, NOS Adrenal Cortical adrona Cortical carrinoma Cortical carrinoma	+++	+	+ *	+	+ +	+ X +	+	+	+	+	+	- +	+	+ X +	+ X +	+ X +	+	+ X +	+ X +	+ x + x	+	+ + X	+ X +	+ *	+ +
Pheochromocytoma Pheochromocytoma, malignant Thyroid Follicular cell adenoma C-cell carcinoma Parathyroid Pancreat: cialeta Isiet cell adenoma Isiet cell carcinoma	+ -+	+ - +	+ - +	+ + +	+ +++	+ -+ +	+ -+ +	+ -+ +	+ -+	+ ++	x + -+	++++	+ -+ +	+ + +	+ -+ +	+ -+ +	X + + + + + +	+ +++	+ =	++++	X + + + + +	+ ++	+ + +	+ + +	+ ++
REPRODUCTIVE SYSTEM Mammary gland Adeaccarrinoma, NOS Fibroadenoma Preputal/clitoral gland Adeacoma, NOS	N N	+ N	+ N	+ N	+ X N	+ X N	+ N	N N	א א	+ N	+ N	N N	+ N	+ N	+ KN	+ X N	+ 222	+ * *	+ × N	+ #2	* X N	+ N	+ X N	+ X N	+ א
Adenocarcinoma, NOS Uterus Adenomatous polyp, NOS Endometrial stromal polyp Hemangiosarcoma Ovary Luteoma	+	+	+	-	+	+	+	+	+	+ +	+	+	+	+	+ +	+ +	+	+	+	+	+	+ *	+	+	+
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Granular cell tumor, NOS	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	+	+	+	+	+
MUSCULOSKELETAL SYSTEM Bone Osteosarcoma Mukce Rhabdomyosarcoma	1			ท ท			N +		N N									N N			-	N N	N N	-	
BODY CAVITIES Mediastinum Squamous cell carcinoma, invasive Peritoneum Nephroblastoma, metastatic				พ พ	א א	-	N N	-	ท ท	N X N		א א		N N		N N		N		N		N N	N	N N	-
ALL OTHER SYSTEMS Multiple organs, NOS Squamous cell carcinoma, metastatic Leukemia, mononuclear cell	N	N X	N	N X	N	N	N	N	N	N X X	N	N X		N	N	N	N X	N	N	N	N	N X	N	N	N

TABLE A4.	INDIVIDUAL	ANIMAL	TUMOR	PATHO	LOGY	OF	FEMALE	RATS:	HIGH DOSE	

(Continued)

ANIMAL NUMBER	ु	ņ	0	o	0	0	0	0	0	0	0	0	02	0	0 3	0 3	0 3	0	9	0 4	0	0	0	ç	0	<u> </u>
	5	6	7	19	20	2 1	2	2 3	2 5	2 6	2 7	8	9	3 0	i	2	3	4	3 7	ō	2	3	5	4	8	TOTAL:
WEEKS ON STUDY	104	1 0 4	104	104	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	04	104	104	04	04	104	104	1 0 4	1 0 4	1 0 4	104	104	1 0 4	TISSUES
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibroma Fibrosarcoma Lipoma	+	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	*50 3 1 1
RESPIRATORY SYSTEM Lungs and bronchi Squamous cell carcinoma Adenocarcinoma, NOS, metastatic Alveolar/bronchiolar adenoma Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ *	+	+	+	+	+	+	50 1 1 1 50
HEMATOPOIETIC SYSTEM Bons marrow Spissa Leukamia, mononuclear cell Lymph nodes Thymus	+++-++	++ ++	++ ++	+++++	++ ++	++++	+++++	++ +-	++ -+	++++	++ +1	++ ++	+++-+	++ ++	++++	++ ++	++++	++ ++	+++++	+++++	++++	++ ++	+++++	++ ++	++ ++	50 50 2 45 41
CIRCULATORY SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DIGESTIVE SYSTEM Salivary gland Liver Galibladder & common bile duct Pancreas Esophagus Stomach Stomach Small intestine Large intestine	+++2+++++	+++2+++++	+++X+++++	+++2+++++	+++2+++++	+++2+++++	+++Z+++++	+++Z+++++	-++Z++++++	+++Z+++++	+++2+++++	+++2+++++	+++2++++	++++2++++++	+++2+++++	+++2+++++	+++2+++++	+++2+++++	+++2++++	+++2+++1	+++2+++++	+++2+++++	+++Z+++++	+++Z+++++	+++2+++++	49 50 50 •50 49 50 47 42 41
URINARY SYSTEM Kidasy Nephroblastoma Urinary bladder Transitional cell papilloma	+	++	+ +	++	+	+ +	++	+ +	+ +	+ +	++	+ +	+ +	++	+ +	+ +	++	+ +	+ +	++	+ x +	+	++	+ +	+ +	49 1 41 1
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adread Cortical adenoma Cortical carcinoma Pheochromocytoma, malignant Thyroid Folligniar cell adenoma C-cell carcinoma Parathyroid Pancreatic isleta Liste cell adenoma	+x +x + ++	+ + + + + + + + + + + + + + + + + + + +	+x + x + ++	+ + + +	+ + + + x + + x	+ + + +	+ x + +	+ x+ + ++	+ x + + -+	+ + + X++	+ x + + -+	+ + + -	+ + + +	+ x + + + + + + + + + + + + + + + + + +	+x + ++	+ x + + + + + + + + + + + + + + + + + +	+ x + + + + + + + + + + + + + + + + + +	+ + + -	+ x + + + + + + + + + + + + + + + + + +	+ x + + + + + + + + + + + + + + + + + +	+ x + + + +	+ x + ++	+ x + + + + + + + + + + + + + + + + + +	+ x + x + -+	+ X + + -+	49 3 22 49 4 1 4 1 49 1 28 49 1
Isiet cell carcinoma REPRODUCTIVE SYSTEM Mammary gland Adesocarcinoma, NOS Fibrosesoma	+	+	+	+	+	+	+	N	+	+ T	N	N	+	X N	N	+	+ x	+ X	+	+	+ *	+	+	+	+	1 *50 1 19
Preputial/citoral gland Adenoma, NOS Adenocarcinoma, NOS Uterus Adenomatous polyp, NOS	N +	N +	ิท +	N +	ñ +	N +	N +	N +	Ñ +	N X +	N +	N +	Ñ +	N +	N +	ñ +	ที่ +	ñ +	N +	N +	ñ +	N +	N + X	NXX+	א +	*50 2 2 49 1
Endometrial stromal polyp Hemangiosarcoma Ovary Luteoma	+	+	+	+ x	-	+	+	+	+	+	+	+	+	+	X +	+	+	+	X +	+	+	+	+	+	+	1 1 47 2
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Granular cell tumor, NOS	i	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1 1
MUSCULOSKELETAL SYSTEM Bone Ostossarcoma Muscie Rhabdomyosarcoma		N N									N N				X						N N					*50 1 *50 1
BODY CAVITIES Mediastiaum Squamous cell carrinome, invesive Peritoneum Nephroblastoma, metastatic	N N	N N	-				N				N N				N N		N N		N				N N	N N		*50 1 *50 1
ALL OTHER SYSTEMS Multiple organs, NOS Squamous cell carcinoms, metastatic Leukemis, mononuclear cell	N X	N	N	N	N X	N	N X	N	N	N X	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N X	*50 1 13

Ampicillin Trihydrate, NTP TR 318

APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE IN THE TWO-YEAR GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE

TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE

С	ONTE	IOL (VEH)	LOW	DOSE	HIG	h dose
ANIMALS INITIALLY IN STUDY	50		50		50	
ANIMALS MISSING			1		1	
ANIMALS NECROPSIED	50		49		49	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		49		49	
INTEGUMENTARY SYSTEM						
*Subcutaneous tissue	(50)		(49)		(49)	
Sarcoma, NOS			1	(2%)		
Fibroma		(2%)		(2%)		
Fibrosarcoma	2	(4%)	7	(14%)	†5	(10%)
Fibrosarcoma, unclear primary or metastatic			1	(2%)		
Rhabdomyosarcoma	1	(2%)				
RESPIRATORY SYSTEM		······				
#Lung	(50)		(49)		(47)	
Hepatocellular carcinoma, metastatic					1	(2%)
Alveolar/bronchiolar adenoma	1	(2%)	3	(6%)		(2%)
Alveolar/bronchiolar carcinoma	5	(10%)	3	(6%)	2	(4%)
Cortical carcinoma, metastatic	1	(2%)				
Fibrosarcoma, metastatic	1	(2%)				
HEMATOPOIETIC SYSTEM						
*Multiple organs	(50)		(49)		(49)	
Malignant lymphoma, NOS					2	(4%)
Malignant lymphoma, lymphocytic type	1	(2%)	2	(4%)	1	(2%)
Malignant lymphoma, histiocytic type	1	(2%)				
*Mediastinum	(50)		(49)		(49)	
Malignant lymphoma, lymphocytic type	1	(2%)				
#Spleen	(50)		(47)		(47)	
Malignant lymphoma, lymphocytic type					1	(2%)
Malignant lymphoma, mixed type					1	(2%)
#Jejunum	(45)		(44)		(37)	
Malignant lymphoma, mixed type	1	(2%)				
#Thymus	(28)		(22)		(24)	
Malignant lymphoma, lymphocytic type	1	(4%)				
CIRCULATORY SYSTEM						
#Heart	(50)		(49)		(47)	
Hemangioma	1	(2%)				
#Heart/ventricle	(50)		(49)		(47)	
Hemangiosarcoma, metastatic		(2%)				
#Liver	(50)		(48)		(46)	
Hemangiosarcoma		(2%)		(2%)		
#Pancreas	(47)	(07)	(44)		(42)	
Hemangioma	1	(2%)				
DIGESTIVE SYSTEM						
#Liver	(50)		(48)		(46)	
Hepatocellular adenoma		(6%)		(4%)	3	(7%)
Hepatocellular carcinoma		(12%)		(4%)	4	(9%)
Fibrosarcoma, metastatic	1	(2%)	1	(2%)		

	CONTROL (VEH)	LOW DOSE	HIGH DOSE
URINARY SYSTEM None			
ENDOCRINE SYSTEM), , , , , , , , , , , , , , , , ,	<u></u>	
#Adrenal	(48) 1 (2%)	(48)	(45)
Cortical carcinoma #Adrenal/capsule	(48)	(48)	(45)
Adenoma, NOS			1 (2%)
#Adrenal medulla	(48)	(48)	(45)
Pheochromocytoma	3 (6%)	1 (2%)	(00)
#Thyroid	(42) 3 (7%)	(44) 1 (2%)	(39) 1 (3%)
Follicular cell adenoma #Pancreatic islets	(47)	(44)	(42)
Islet cell adenoma		1 (2%)	(42)
REPRODUCTIVE SYSTEM None			
NERVOUS SYSTEM None	<u></u>		
SPECIAL SENSE ORGANS		, , , , , , <u>, , , , , , , , , , ,</u>	
*Harderian gland	(50)	(49)	(49)
Papillary adenoma		1 (2%)	1 (2%)
MUSCULOSKELETAL SYSTEM		(10)	(40)
*Muscle of trunk Fibrosarcoma, unclear primary or metast	(50) atic 1 (2%)	(49)	(49)
BODY CAVITIES None			
ALL OTHER SYSTEMS			<u> </u>
*Multiple organs	(50)	(49)	(49)
Fibrosarcoma, metastatic		1 (2%)	· · · · · · · · · · · · · · · · · · ·
ANIMAL DISPOSITION SUMMARY	50	50	50
Animals initially in study Natural death	50 12	50 14	50 17
Moribund sacrifice	5	8	6
Terminal sacrifice	32	21	20
Accidentally killed, nda		1	1
Accidentally killed, NOS Animal missing	1	5 1	5 1
Annat missing		•	4

TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

TABLE B1. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTROL (VEH)	LOW DOSE	HIGH DOSE
TUMOR SUMMARY			
Total animals with primary tumors**	23	21	18
Total primary tumors	35	27	24
Total animals with benign tumors	11	9	6
Total benign tumors	13	10	. 7
Total animals with malignant tumors	15	16	14
Total malignant tumors	21	16	17
Total animals with secondary tumors##	3	2	1
Total secondary tumors	4	2	1
Total animals with tumors uncertain			
primary or metastatic	1	1	
Total uncertain tumors	1	1	

* Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically.

* Multiple occurrence of morphology in the same organ; tissue is counted once only.
 ** Primary tumors: all tumors except secondary tumors
 # Number of animals examined microscopically at this site

Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

	CONTR	OL (VEH)	LOW	DOSE	HIG	H DOSE
ANIMALS INITIALLY IN STUDY	50	······································	50		50	
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALL	Y 50		50		50	
INTEGUMENTARY SYSTEM	<u> </u>	· ·	<u></u>			
*Skin	(50)		(50)		(50)	
Papilloma, NOS				(a a)	1	(2%)
Squamous cell carcinoma *Subcutaneous tissue	(50)			(2%)	(50)	
Subcutaneous tissue Sarcoma, NOS	(50)	(2%)	(50)		(50)	(2%)
Fibrosarcoma		(2%)	1	(2%)		(2%)
RESPIRATORY SYSTEM		· · · ·	·····			
#Lung	(50)	·	(50)		(50)	
Alveolar/bronchiolar adenoma		(2%)	-	(0.2)	4	(8%)
Alveolar/bronchiolar carcinoma	1	(2%)	3	(6%)		.0.0
Sarcoma, NOS, metastatic				(90)	1	(2%)
Fibrosarcoma, metastatic			1	(2%)		
HEMATOPOIETIC SYSTEM	(20)					
*Multiple organs	(50)		(50)	(90)	(50)	
Malignant lymphoma, NOS Malignant lymphoma, undiffer type	1	(2%)	1	(2%)		
Malignant lymphoma, undiffer type Malignant lymphoma, lymphocytic type		(2%)	8	(12%)	٥	(18%)
Malignant lymphoma, histiocytic type		(2%)	0			(18%)
Malignant lymphoma, mixed type		(2%)	3	(6%)		(4%)
Lymphocytic leukemia	1	(2%)			1	(2%)
#Spleen	(49)		(50)		(50)	
Malignant lymphoma, lymphocytic type		(2%)				(2%)
#Thoracic lymph node	(32)		(37)		(37)	
Sarcoma, NOS, metastatic	(10)		(50)			(3%)
#Liver	(49)		(50)		(49)	(0 ~)
Malignant lymphoma, lymphocytic type	(50)		(20)			(2%)
*Mesentery Malignant lymphoma, NOS	(50)	(2%)	(50)		(50)	
#Kidney	(49)	(270)	(50)		(50)	
Malignant lymphoma, NOS		(2%)	(00)		(00)	
#Thymus	(27)		(26)		(30)	
Malignant lymphoma, lymphocytic type	1	(4%)		(8%)		
DIRCULATORY SYSTEM						
*Subcutaneous tissue	(50)	(4.00)	(50)		(50)	
Hemangioma	2	(4%)		(90)		
Hemangiosarcoma #Bono morrow	(49)			(2%)	(40)	
#Bone marrow Hemangioma	(48)		(50)		(49)	(2%)
#Spleen	(49)		(50)		(50)	(270)
Hemangioma		(2%)			(00)	
DIGESTIVE SYSTEM		·····				
#Forestomach	(47)		(49)		(49)	
Squamous cell carcinoma			1	(2%)		
#Jejunum	(43)		(47)		(46)	
Čarcinoma, NOS			1	(2%)		

TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEARGAVAGE STUDY OF AMPICILLIN TRIHYDRATE

	CONTROL (VEH)	LOW DOSE	HIGH DOSE
URINARY SYSTEM		······	· · · · · · · · · · · · · · · · · · ·
None			
ENDOCRINE SYSTEM			
#Anterior pituitary	(44)	(40)	(36)
Carcinoma, NOS	1 (2%)	1 (3%)	1 (3%)
Adenoma, NOS	7 (16%)	1 (3%)	5 (14%)
Acidophil adenoma		1 (3%)	
#Adrenal/capsule	(47)	(48)	(47)
Adenoma, NOS	1 (2%)		1 (2%)
#Adrenal medulla	(47)	(48)	(47)
Pheochromocytoma	2 (4%)	1 (2%)	(10)
#Thyroid	(42)	(47)	(43)
Follicular cell adenoma	1 (2%)	1 (2%)	1 (2%)
REPRODUCTIVE SYSTEM			
*Mammary gland	(50)	(50)	(50)
Adenocarcinoma, NOS	1 (2%)	1 (2%)	
#Uterus	(49)	(50)	(48)
Leiomyoma			1 (2%)
Endometrial stromal polyp			1 (2%)
#Ovary	(46)	(43)	(45)
Papillary cystadenoma, NOS		1 (2%)	
Granulosa cell tumor			1 (2%)
Teratoma, benign	1 (2%)		
NERVOUS SYSTEM			·····
#Brain/meninges	(50)	(50)	(50)
Meningioma	1 (2%)		
#Brain/thalamus	(50)	(50)	(50)
Carcinoma, NOS, invasive	1 (2%)		
SPECIAL SENSE ORGANS			
*Harderian gland	(50)	(50)	(50)
Adenocarcinoma, NOS		(~~)	1 (2%)
Papillary cystadenoma, NOS	1 (2%)		~ ~~~~//
MUSCULOSKELETAL SYSTEM None			
BODY CAVITIES			·
*Mesentery	(50)	(50)	(50)
Lipoma	1 (2%)		
	+ (<i>4</i> /0)		
ALL OTHER SYSTEMS			(50)
*Multiple organs	(50)	(50)	(50)
Adenocarcinoma, NOS, metastatic	- 1 (901)		1 (2%)
Sarcoma, NOS, unclear primary or metastati	c 1 (2%)		

TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTROL (VEH)	LOW DOSE	HIGH DOSE
ANIMAL DISPOSITION SUMMARY	······································		
Animals initially in study	50	50	50
Natural death	12	19	10
Moribund sacrifice	4	4	2
Terminal sacrifice	34	27	28
Accidentally killed, NOS			10
rumor summary			*********
Total animals with primary tumors**	32	21	28
Total primary tumors	45	27	35
Total animals with benign tumors	16	5	12
Total benign tumors	18	5	15
Total animals with malignant tumors	25	18	19
Total malignant tumors	26	22	19
Total animals with secondary tumors##	1	1	2
Total secondary tumors	1	1	3
Total animals with tumors uncertain			-
benign or malignant			1
Total uncertain tumors			1
Total animals with tumors uncertain			-
primary or metastatic	1		
Total uncertain tumors	1		

TABLE B2. SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

* Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically. ** Primary tumors: all tumors except secondary tumors

Number of animals examined microscopically at this site

Secondary tumors: metastatic tumors or tumors invasive into an adjacent organ

GAVAGE STUDI	Or	n.	VLF .	IUI		114	1 1/		1 1	102							01	• • •							
ANIMAL NUMBER	0 3 2	0 4 2	0 4 8	0 3 0	0 0 7	0 4 5	0 0 6	0 4 3	0 1 7	0 2 7	0 4 9	0 2 6	0 0 5	0 1 5	0 2 1	0 4 0	0 2 8	0 2 9	0 0 1	0 0 2	0 0 3	0 0 4	0 0 8	0 0 9	0 1 0
WEEKS ON STUDY	0 0 3	0 1 6	0 1 6	0 1 9	0 2 1	0 2 1	0 2 3	0 2 4	0 3 0	0 5 9	0 6 9	0 7 2	0 8 4	0 8 4	0 8 7	0 9 4	0 9 7	0 9 7	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibroma Fibrosarcoma Rhabdomyosarcoma	N	+	+	+	+	+	+	+	+	+	+	+	+	+	*	+ x	+	N	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Cortical carcinoma, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	+	+	+	+	+	* x	+	+ X
Fibrosarcoma, metastatic Trachea	+	+	+	-	-	+	+	+			+	х _	+	+	+	+	+	+	+	+	+	+	+	+	+
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus Malignant lymphoma, lymphocytic type	++-++++++++++++++++++++++++++++++++++++	+++++++	+ + + +	+++-+++++++++++++++++++++++++++++++++++	+ + +	-+ +-+ +	+ + - +	+++++	+ + - +	++++	+ + - +	++++	+ + + -	++++	++	- + -	+ + + -	+ + + -	++	+ + + -	++-++-+++++++++++++++++++++++++++++++++	+++++	++	+ + + +	++
CIRCULATORY SYSTEM Heart Hemangioma Hemangiosarcoma, metastatic	+	+	+	+	+	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+ X	+	+
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma	+++	+ +	+ +	+ +	+	+++	++++	++++	+++	+++	++++	++++	+ + X	+ + X	- + X	 +	+ + X	++++	+ +	+ +	+ +	+ +	+++	+ +	+++
Fibrosarcoma, metastatic Hemangiosarcoma Bile duct Galibladder & common bile duct Pancreas Hemangioma Esophagus Stomach Stall intestine Malignant lymphoma, mixed type Large intestine	+++++++++++++++++++++++++++++++++++++++	+++ +++ +	+++ +++ +	+++ +++ +	+++ + +	+++ ++ +	+++ +++	+++ +++ +	+++	+X+ +++ +	++++++++	X + + + + + + + + +	+++ +++ +	++- +++ +	+++++++++++++++++++++++++++++++++++++++	+ Z + + + +	+2+++++++++++++++++++++++++++++++++++++	+ Z + + + - +	+++ +++ +	+++++++++++++++++++++++++++++++++++++++	+++ +++ +	+++ +++ +	X + + + + + + + + + + + + + + + + + + +	+ + + + X + + + + +	+++ +++ +
URINARY SYSTEM Kidney Urinary bladder	+++++	+	+++	++++	+ +	+++	++++	+++++	+++	+ +	+ + +	+ + +	++++	+++	+	++++	+++++	+++	++++	+++	+	+ +	++++	++++	+ + +
ENDOCRINE SYSTEM Pituitary Adrenal Cortical carcinoma Phaochromocytoma Thyroid Follicular cell adenoma	- + -	+ + +	 + +	++ -	 + -	+ -+	 + +	+++++	+ - +	- + +	+++++	+++++	+++++	+ + X +	+ * X +	- + +	+	+++	++	+ + +	+ + +	+ + +	-+ + x	+++++	+++++
Parathyroid REPRODUCTIVE SYSTEM Mammary gland Testis Prostate	- N + +	+ + + +	+ N + +	- N + +	- N + +	+ N + +	+ N + +	+ N + +	- N + +	- N + +	- N + +	- N + +	+ N + +	- N + +	+ N + +	N + -	- N + +	N + +	+ N + +	- N + +	- N + +	N + -	+ N + +	+ N + -	+ N + +
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
MUSCULOSKELETAL SYSTEM Muscle Fibrosarcoma, unclear primary or metastatic	N	+	+	N	N	N	N	N	N	N	N	N X	+	N	N	N	N	N	N	N	N	N	N	N	N
BODY CAVITIES Mediastinum Malignant lymphoma, lymphocytic type	N	Ň	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, lymphocytic type Malignant lymphoma, histiocytic type	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
									~																

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE TWO-YEAR
GAVAGE STUDY OF AMPICILLIN TRIHYDRATE: VEHICLE CONTROL

+: Tissue examined microscopically
 -: Required tissue not examined microscopically
 X: Tumor incidence
 N: Necropsy, no autolysis, no microscopic examination
 S: Animal missexed

: No tissue information submitted C: Necropsy, no histology due to protocol A: Autolysis M: Animal missing B: No necropsy performed

									.011		ueo	•/														
ANIMAL NUMBER	0 1 1	0 1 2	0 1 3	0 1 4	0 1 6	0 1 8	0 1 9	0 2 0	0 2 2	0 2 3	0 2 4	0 2 5	0 3 1	0 3 3	0 3 4	0 3 5	0 3 6	0 3 7	0 3 8	0 3 9	0 4 1	0 4 4	0 4 6	0 4 7	0 5 0	TOTAL:
WEEKS ON STUDY	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	TISSUES
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibroma Fibrosarcoma Rhabdomyosarcoma	+	+	+	+	+	+	+ X	+	+	+	+	+	+	+	N	+	+	+ X	+	+	+	+	+	+	+	*50 1 2 1
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Cortical carcinoma, metastatic Fibrosarcoma, metastatic	+	+	+	+	+ X	+	+	+	+	+	+	+ X	+	+	+	+	+	+ X	+	+	+	+	+	+ x	+	50 1 5 1 1
Trachea HEMATOPOIETIC SYSTEM	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	44
Bone marrow Spleen Lymph nodes Thymus Malig. lymphoma, lymphocytic type	+++++++	+ + -	+ + + +	+ + + +	+++++++++++++++++++++++++++++++++++++++	+ + -	++++	+ + - +	+ + -+ +	+ + - +	- + + -	++	+ + +	+ +	++++	++	+-+-++++++++++++	+ + -	+ + +	- + + +	+ + - +	+++++	+ + + X	+++-	+ + -	45 50 24 28 1
CIRCULATORY SYSTEM Heart Hemangioma Hemangiosarcoma, metastatic	+	x+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1 1
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma Fibrosarcoma, metastatic	+ + x	+++	++++	+++	+++	+++	+ +	++++	+ +	+ +	+ + X	+++	+ +	+ +	+++	+++	+ + X	++++	+++	+ + X	+ +	+++	+++	+ + X	+ +	47 50 3 6 1
Hemangiosarcoma Bile duct Gallbladder & common bile duct Pancreas Hemangioma Esophagus Stomach Small intestine Malignant lymphoma, mixed type	+++ +++	+++ +++	+++ +++	+++ +++	+++ +++	+++ ++	+++ +++	+++ +++	+++++++	+++++++	+++++++	+++++++	+++++++	++++++	++++++	+++++++	++-+++	++++++	+++++++	+++++++	+++ +++	+++ +++	+ + + + + + x	+++ +++	+++++++	1 50 *50 47 1 47 50 45 1
Large intestine URINARY SYSTEM Kidney Urinary bladder	+	+	+	+	+++	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+++++	+ + +	+	46 50 47
ENDOCRINE SYSTEM Pituitary Adrenal Cortical carcinoma Pheochromocytoma Thyroid Follicular cell adenoma Parathyroid	+++++++++++++++++++++++++++++++++++++++	+ + + + +	+++++	+++++	+ + + +	- + -	+ + +	++++++	++++-	+++++++++++++++++++++++++++++++++++++++	+ + +	++++++	+++++++	++++++	+ + + X -	+ + + +	+ + X -	+ + + +	+++	++++++	+ + + +	+ + + +	++++++	++++	+ + + + x +	40 48 1 3 42 3 29
REPRODUCTIVE SYSTEM Mammary gland Testis Prostate	N + +	N + +	N + +	+ + +	N + +	N + +	N + +	N + +	N + +	N + -	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	*50 50 46
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
MUSCULOSKELETAL SYSTEM Muscle Fibrosarcoma, unclear prim or meta	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50
BODY CAVITIES Mediastinum Malig. lymphoma, lymphocytic type	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	*50 1
ALL OTHER SYSTEMS Multiple organs, NOS Malig. lymphoma, lymphocytic type Malignant lymphoma, histiocytic type	N	N	N	N	N	N	N X	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	*50 1 1

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE: VEHICLE CONTROL (Continued)

ANIMAL NUMBER	0 1 8	0 0 7	0 4 2	0 3 4	0 4 6	0 4 8	0 3 5	0 3 2	0 0 6	0 0 8	0 4 9	0 1 2	0 2 3	0 0 3	0 1 3	0 2 1	0 0 5	0 4 3	0 5 0	0 1 6	0 1 9	0 2 8	0 4 4	0 1 5	0 4 1
WEEKS ON STUDY	000	0 0 3	0 1 3	0 1 9	0 2 9	0 2 9	0 3 3	0 3 4	0 3 5	0 3 9	0 4 0	0 5 6	0 6 1	0 7 7	0 8 1	0 8 5	0 8 8	0 8 9	0 9 4	0 9 6	0 9 6	0 9 6	0 9 8	0 9 9	1 0 0
INTEGUMENTARY SYSTEM Subcutaneous tissue Sarcoma, NOS Fibroma Fibrosarcoma Fibrosarcoma, unclear primary or metastatic	+	М	+	+	+	+	+	+	+	N	+	+	+	* x	+ X X	+	+ X	+ X	+	+	+	+	+	+ x	+
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	M M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X +	+	+	* * +	++	+	* * +
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus	+++++++++++++++++++++++++++++++++++++++	M M M	++++	+++++++	+ + + +	+++++	+ + + +	++-++	+ + - +	++	++	+++++++++++++++++++++++++++++++++++++++	+ + + +	++	++++-	+ + + +	++	++	++	++	- + +	++	+++-	++ +- -	+ - + -
CIRCULATORY SYSTEM Heart	+	М	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salıvary gland Lıver	++++	M M	+++	+++	++++	+++	+++	+++	+++	+++	++++	+++	+++	++	+++	++++	++++	+++	+++	++++	+++++	 +	++++	++++	++++
Hepatocellular adenoma Hepatocellular carcinoma Fibrosarcoma, metastatic Hemangiosarcoma Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small untestine Large intestine	+++++-	M M M M M M	++-+++	+ 1 + + 1 +	+++++++++++++++++++++++++++++++++++++++	+ + + + + + +	+ N + + + + +	+ 1 + + + + + + + + + + + + + + + + + +	+++++++	+ + + + + +	+ N ~ + + + +	+ 2, + + + + +	+ + + + + + +	+ + + + + + +	++-++++	+ X + + + + +	X + + + + + + + + + + + + + + + + + + +	+ + + + + + + + + + + + + + + + + + + +	+ + + + + + +	+ 2 + + +	+ + + + + + +	+ + + + + + +	+N + + + + +	+ 2 + + + + +	+ Z + + +
URINARY SYSTEM Kidney Urinary bladder	+++	M M	++++	+++++	++++	+	+++++	+++	++++	+++	+++	+++	++++	+ +	++++	+	++++	++++	+++	++++	++++	+	+ + +	++++	++++
ENDOCRINE SYSTEM Pituitary Adrenal Pheochromocytoma Thyroid Folicular cell adenoma Parathyroid Pancreatic islets Islet cell adenoma	+++++++++++++++++++++++++++++++++++++++	M M M M		+++++++++++++++++++++++++++++++++++++++	+ + - +	-++	- + + +	+ + + +	-+ +	- + + +	++	+ + + + +	+ + + +	++ + +	- + + -	- + + +	+ + + +	+ + + +	+++-+	+++++++++++++++++++++++++++++++++++++++	+++++	+ + + +	+ + + +	+ + + +	++ ++ +
REPRODUCTIVE SYSTEM Mammary gland Testis Prostate	N + +	M M M	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + -	N + +	N + +	N + -	N + +	N + +	N + -	N + +	N + +	N + +	N + ~	N + +	N + +	N + +	N + +
NERVOUS SYSTEM Brain	+	M	+	+	+	+	+	+	+	+	+	+	+	 +	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS Hardernan gland Papillary adenoma	N	.M.	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
ALL OTHER SYSTEMS Multiple organs, NOS Fibrosarcoma, metastatic Mahgnant lymphoma, lymphocytic type	N	M	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE TWO-YEARGAVAGE STUDY OF AMPICILLIN TRIHYDRATE: LOW DOSE

ANÍMAL NUMBER	0 0 4	0 2 6	0 2 7	0 3 0	0 0 1	0 0 2	0 0 9	0 1 0	0 1 1	0 1 4	0 1 7	0 2 0	0 2 2	0 2 4	0 2 5	0 2 9	0 3 1	0 3 3	0 3 6	0 3 7	0 3 8	0 3 9	0 4 0	0 4 5	0 4 7	TOTAL
WEEKS ON STUDY	1 0 1	1 0 1	1 0 1	1 0 2	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	TOTAL: TISSUES TUMORS
INTEGUMENTARY SYSTEM Subcutaneous tissue Sarcoma, NOS Fibroma Fibrosarcoma Fibrosarcoma, unclear prim or meta	+	+ x	+	+	+	+ X X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+ x	+	+	*49 1 1 7 1
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	+	+	++	+	++	+	++	+	++	+	+ X +	++	+	+	+ +	+ X +	++	++	+	++	+	* * +	++	+	49 3 3 42
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus	+	+++-	++	++++	++++-	+++-+++++++++++++++++++++++++++++++++++	++++++	++++-	+++	++++	++	+++	++-+	+++++++++++++++++++++++++++++++++++++++	+++	++++-	++ + + + + + + + + + + + + + + + + + + +	+++++	+++++	+++++++++++++++++++++++++++++++++++++++	+++-	+++++	+ + - +	+ + +	 + + +	47 47 27 22
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma Hepatocellular carcinoma Fibrosarcoma, metastatic Hemangiosarcoma Bile duct		+ +	+ + X	+++	+++	+++	+++	+++	+ + x	++++	+++	+ +	++++	++++	++++	+++++	+++++++++++++++++++++++++++++++++++++++	+ + x	+ + X	++	+++	+++	+++	+ + X +	++++	47 48 2 2 1 1 48
Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine		+ z + + + + 1	+++++	+++++++	++++++	+++++++	+++++++	+ Z + + + + +	+ Z + + + + +	+ + + + + + +	+ + + + + + +	+ + + + + + +	+ + + + + + +	+ + + + + + +	+++++1	+ X + + + + +	* + + + + + +	++++++	+ + + + + + +	+++++++	+ + + + + + +	+ Z + + + + +	+ z + + + + +	++++++	+ Z + + + + + +	40 *49 44 48 48 48 44 43
URINARY SYSTEM Kidney Urinary bladder	+	++++	++++	+++	++++	++++	++++	+++	+ +	+++	+++	++++	+++	++++	++++	++++	++++	+ +	+ +	++++	++++	++++	++++	+ +	+++	49 45
ENDOCRINE SYSTEM Pituitary Adrenal Pheochromocytoma Thyroid Follicular ceil adenoma Parathyroid Pancreatic islets Islet cell adenoma		+ + + +	- + + +	+ + + +	+ + + +	-+ ++++	++X + + + + + +	+ + + - +	+ + + +	++ + + +	++++++	+ + + X +	++++++	+ + + + +	+ + + + +	-++++	++++++	++++++	+ + + + +	+ + + +	+ + + +	+ + + + +	+ + + + X	+ + + +	+++++	37 48 1 44 1 23 44 1
REPRODUCTIVE SYSTEM Mammary gland Testis Prostate	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + + +	N + +	N + -	N + +	N + +	N + +	N + +	N + +	N + -	N + -	N + +	N + -	N + -	N + +	N + +	N + +	*49 49 40
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
SPECIAL SENSE ORGANS Harderian gland Papillary adenoma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	*49
ALL OTHER SYSTEMS Multiple organs, NOS Fibrosarcoma, metastatic Malig. lymphoma, lymphocytic type	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X		N	N	N	*49 1 2

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE: LOW DOSE (Continued)

ANIMAL NUMBER	0 3 1	0 0 1	0 4 5	0 0 5	0 0 3	0 4 2	0 1 9	0 3 4	0 3 9	0 2 1	0 0 6	0 2 4	0 0 4	0 2 7	0 3 2	0 3 3	0 4 1	0 5 0	0 1 1	0 2 2	0 2 9	0 3 8	0 1 6	0 4 7	0 2 3
WEEKS ON STUDY	0 0 4	0 0 9	0 1 0	0 1 1	0 1 2	0 2 5	0 2 6	0 2 6	0 3 5	0 3 8	0 4 2	0 4 5	0 5 6	0 6 9	0 7 2	0 7 2	0 7 3	0 8 0	0 8 3	0 8 4	0 8 7	0 8 8	0 9 7	0 9 7	0 9 8
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibrosarcoma		+	N	+	+	+	+	+	N	+	+	+	+	* x	+	+	+	+ X@	 2 +	+	+	+	+	*	N
RESPIRATORY SYSTEM Lungs and bronchi Hepatocellular carcinoma, metastatic Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	* *	+	+	+	+
HEMATOPOIETIC SYSTEM								,							. <u> </u>			·							
Bone marrow Spleen	+	+	+	+	+	+	+	+	+	+	++	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Malignant lymphoma, lymphocytic type Malignant lymphoma, mixed type			- -	_	Ť	- -	_	Ť	-	-	- -	_	T	- -	т +	- -	-	Ť	- -	- -	- -	-	Ţ	-	Ť
Lymph nodes Thymus	+	+	-	+	+	÷	+	+	+	+	-	-	-	+	+	+	-	÷	+	-	-	-	+	-	+
CIRCULATORY SYSTEM Heart		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver		+++++	+	+	+	+	+	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	++++
Hepatoceilular adenoma Hepatoceilular carcinoma Bile duct	+	, +	- -	+	' +	ţ	+ +	- -	- +	+	- -	+ +	+ +	+ +	+ +	- -	+	- -	Ť	+	x +	+	X +	, +	+
Gallbladder & common bile duct Pancreas	+	Ň +	Ň +	+	÷	+	+	+	Ń	+++	Ń +	+++	+++++	Ň +	+++	++++	+ +	+	÷	Ń +	Ń +	++++	+	++++	Ń +
Esophagus	+	+	+	+	+	-	÷	+	+	-	+	+	÷	+	+	÷	+	+	+	+	+	+	+	+	+
Stomach Small intestine Large intestine	-	+ + +	+ + +	+ - +	++-	+ 	+ + +	++-	++++	+ + +	+ + +	+ + +	+ + +	+++	+ + +	+ + +	+++	+ + +	+ - -	+ + +	+ - +	+ + -	+ +	+ + +	+ +
URINARY SYSTEM Kidney Urinary bladder	++++	+	+ +	++++	+++	+++	+++	+++++	+ + +	++++	++++	+ +	+++	++++	++++	++++	++++	+	+ +	++++	++++	+++	+++++++++++++++++++++++++++++++++++++++	+ +	++++
ENDOCRINE SYSTEM										<u> </u>															
Pituitary Adrenal	-	4-	++	+++	+++++++++++++++++++++++++++++++++++++++	+	++	++	+	++	+++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++	+	+++++++++++++++++++++++++++++++++++++++	+	++	++	+	++	+	++	+	_
Adenoma, NOS Thyroid	-	+	+	_	+	-	+	+	_	+	+	_	+	+	+	+	+	+	+	+	+	+		-	+
Follicular cell adenoma Parathyroid	-		-	_	+	-	-	+	_	-	-	+	_	+	+	-	+	-	_	+	-	+	-	_	+
REPRODUCTIVE SYSTEM																									
Mammary gland Testis	N +	N 	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	N +	+ +	N +	N +	N +	N +	N +
Prostate	-	÷	+	+	+	+	+	+	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	-	+
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS Harderian gland Papillary adenoma	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, NOS Malignant lymphoma, lymphocytic type	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N X	N	N X

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE IN THE TWO-YEARGAVAGE STUDY OF AMPICILLIN TRIHYDRATE: HIGH DOSE

@ Multiple occurrence of morphology

								(501		ue	u)														
ANIMAL NUMBER	0 1 3	0 2 0	$\begin{array}{c} 0 \\ 1 \\ 2 \end{array}$	0 4 8	0 4 9	0 0 2	0 0 7	0 0 8	0 0 9	0 1 0	0 1 4	0 1 5	0 1 7	$\begin{array}{c} 0 \\ 1 \\ 8 \end{array}$	0 2 5	0 2 6	0 2 8	0 3 0	0 3 5	0 3 6	0 3 7	0 4 0	0 4 3	0 4 4	0 4 6	TOTAL
WEEKS ON STUDY	0 9 9	1 0 1	$ \begin{array}{c} 1 \\ 0 \\ 2 \end{array} $	$1 \\ 0 \\ 2$	1 0 2	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	TOTAL: TISSUES TUMORS
INTEGUMENTARY SYSTEM Subcutaneous tissue Fibrosarcoma	+	М	N	+	+	+	+	+	+	+	+	+	+	+	+	+	+ X	+	+	N	+	+	+ X	+	+	*49 5
RESPIRATORY SYSTEM Lungs and bronchi Hepatocellular carcinoma, metastatic	+	М	-	+	-	+	+	+	+	+	+	+	÷	+	+	+	+	+	+	+	+	+	+	+	+	47
Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	М	-	+	-	+	+	+	+	+	+	+	+	+	+	+	X +	X +	+	+	х +	+	÷	+	+	$\begin{array}{c}1\\2\\41\end{array}$
HEMATOPOIETIC SYSTEM Bone marrow Spleen Malig, lymphoma, lymphocytic type	+++	M M	-	+ +	+++	++++	+	+++	+++	+++++	++++	+++	++	+ +	++++	++	- +	+++	+++	+ +	+ +	+ + ¥	+ +	+++	+ +	47 47 1
Malignant lymphoma, mixed type Lymph nodes Thymus	+	M M	-	-	-	-	+ 	- +	+ +	+ +	+ -	+ -	+ -	+ +	x + -	+ -	+	+ -	+ -	- +	+ +	+	-	 +	+ +	1 23 24
CIRCULATORY SYSTEM Heart	+	M	-	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
DIGESTIVE SYSTEM Salivary gland Liver Hepatocellular adenoma	+++	M M	-	-	-	+ + X	+ +	++	+ +	+ +	+ +	+ +	+++	+ +	+ +	+ +	+ +	+ + X	+ +	+ + X	+ +	+++	+ +	+ +	+++	44 46 3
Hepatocellular carcinoma Bile duct Galibladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+ N + + + + + + + + + + + + + + + + + +	M M M M M	Z I	N + i	Z +	+ + + + + + +	X + + + + + + +	+ + + + + + +	+ X + + + + +	+ + + + + +	+ Z + + + + +	+++++ +	+ Z + + + + +	+ + + + + +	+ z + + + + +	X + X + + + + +	++++++	+ + + + + + +	+ + + + + +	+ + + + + + +	~ + + + + + +	+ + + + + +	+++++++	+ Z + + + + +	+ + + + + +	4 46 *49 42 44 45 37 39
URINARY SYSTEM Kidney Urinary bladder	+	M M	+	+	+	++++	+++++++++++++++++++++++++++++++++++++++	++++	+++	++++	+++	++++	+++	++++	+ +	+++++++++++++++++++++++++++++++++++++++	++++	+++	+++	+++	++++	+ + +	+++	+ +	+ +	49 44
ENDOCRINE SYSTEM Pituitary Adrenal	++++	M M	- +	-	 +	+++++	+++	 +	+++	++++	+++	++++	++++	++++	 +	+	- +	 +	 +	-+	++++	+ +	+	+++++++++++++++++++++++++++++++++++++++	- +	33 45
Adenoma, NOS Thyroid Follicular cell adenoma Parathyroid	+++	M M	-	+ +	-	+ +	+ +	+ +	+ +	+ 	+ +	-	+ +	+ +	+ +	+	+ +	+ +	* *	x + +	+ +	+ +	+ +	+ +	+ +	1 39 1 27
REPRODUCTIVE SYSTEM Mammary gland Testis Prostate	N + +	M M M	N -	N + -	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + -	N + + +	N + +	N + +	N + +	N - +	N + +	N + -	N + +	N + +	N + +	*49 46 42
NERVOUS SYSTEM Brain	+	М	-	+	+	+		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	47
SPECIAL SENSE ORGANS Harderian gland Papillary adenoma	N	М	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	*49 1
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, NOS Malig. lymphoma, lymphocytic type	N	м	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*49 2 1

TABLE B3. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF MALE MICE: HIGH DOSE (Continued)

GAVAGE STUDI	<u> </u>			101									• -							~					
ANIMAL NUMBER	0 2 7	0 4 5	0 4 6	0 2 2	0 1 2	0 1 4	0 4 2	0 3 0	0 4 7	0 3 1	0 1 5	0 1 9	0 4 3	0 3 8	0 0 1	0 4 1	0 0 2	0 0 3	0 0 4	0 0 5	0 0 6	0 0 7	0 0 8	0 0 9	0 1 0
WEEKS ON STUDY	0 1 1	0 5 5	0 6 3	0 6 6	0 7 8	0 8 2	0 8 8	0 9 1	0 9 3	0 9 4	0 9 5	0 9 9	0 9 9	1 0 1	1 0 2	1 0 2	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4
INTEGUMENTARY SYSTEM Subcutaneous tissue Sarcoma, NOS Fibrosarcoma Hemangioma	+	+	+	+	N	+	+	+	+	+	+	N	+	+ X	* X	+	+	+	+	+	+	+	+	+	+
RESPIRATORY SYSTEM Lungs and bronch: Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+++	+	++	+	+	+	+	+	+	+	+	+	++
HEMATOPOIETIC SYSTEM Bone marrow Spleen Hemangnoma Malignant lymphoma, lymphocytic type Lymph nodes	+++	++	+ +	+++	+++	+++	++++	+++	++++	+++++	+ +		+++	+ + X	+++	+++	++++	+ +	+++	++++	++++	+++	+	+ + X +	+ + +
Thymus Malignant lymphoma, lymphocytic type	+	+	-	+	+	+	+	-	+	-	+	-	-	-	-	-	+	+	+	+	-	-	+	-	+
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	++++++++	+++++++++++++++++++++++++++++++++++++++	++++++	+++2 ++++	+++++++++++++++++++++++++++++++++++++++	+ + + N + + + + + + + + + + + + + + + +	+++++++++++++++++++++++++++++++++++++++	1+++1111	+++2+++++	+ + + N - +	++++		+ + + N + + 1	+++++-+	+++2++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++X++++	+++X++++	+++++++++++++++++++++++++++++++++++++++	+++X++++	++++++++
URINARY SYSTEM Kidney Malignant lymphoma, NOS Urinary bladder	 + +	+++	++++	++++	+++	+ +	++++	+	+ + +	+++	+++	-	+++	+++	+ + +	+++	+++	+++	+++	+++	+ + +	 + +	+++	+ + +	++++
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Adenai	+	+	+	+	+	+	+	+	+	+	+	+	+	+		+	+	+ X	+	+	+	+	+ X	+	+
Adenoma, NOS Pheochromocytoma Thyroid Follicular cell adenoma Parathyroid		-	+ +	+	+ -	+ +	+		-	-	• + -	-	+ -	+ +		+ -	, + +	+	+ +	+	x + -	+ 		+ X +	++
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Uterus Ovary Teratoma, benign	+ + + X	+ + +	+ + +	N + -	N + +	N + +	+++++	N + +	N + +	N + -	N + +	N 	+ + +	+++++	N + +	+ + -	N + +	+ + +	+ + +	+ + +	N + +	+ ++	+ + +	N + +	N + +
NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Meningioma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS Harderian gland Papillary cystadenoma, NOS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
BODY CAVITIES Mesentery Lipoma Malignant lymphoma, NOS	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N X	N	N	N	N	N	N	N	N	N
ALL OTHER SYSTEMS Multiple organs, NOS Sarcoma, NOS, unclear primary or metastatic Malignant lymphoma, undiffer type Malignant lymphoma, lymphocytic type Malignant lymphoma, histocytic type Malignant lymphoma, mixed type Lymphocytic leukemia	N	N	N	N	N X	N X	N	N X	N	N	N	N	N	N	N	N	N	N	N	N		N X		N	N X

TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE TWO-YEARGAVAGE STUDY OF AMPICILLIN TRIHYDRATE: VEHICLE CONTROL

Tissue examined microscopically Required tissue not examined microscopically Tumor incidence Necropsy, no autolysis, no microscopic examination Animal missexed

+ - XN S

- No tissue information submitted C Necropsy, no histology due to protocol A. Autolysis A Animal missing B No necropsy performed

								•																		
ANIMAL NUMBER	0 1 1	0 1 3	0 1 6	0 1 7	0 1 8	0 2 0	0 2 1	0 2 3	0 2 4	0 2 5	0 2 6	0 2 8	0 2 9	0 3 2	0 3 3	0 3 4	0 3 5	0 3 6	0 3 7	0 3 9	0 4 0	0 4 4	0 4 8	0 4 9	0 5 0	TOTAL
WEEKS ON STUDY	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	TOTAL. TISSUES TUMORS
INTEGUMENTARY SYSTEM Subcutaneous tissue Sarcoma, NOS Fibrosarcoma Hemangioma	+	+ X	+	+	+	+	+	+	+	+	N	+ X	+	+	+	+	+	+	+	N	+	+	+	+	+	*50 1 1 2
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Alveolar/bronchiolar carcinoma Trachea	+++	+	* *	+	++	+	+	+	+	+	+	+	+	++	+ x	+	+	+	+	+	+	+	+	+	++	50 1 1 45
HEMATOPOIETIC SYSTEM Bone marrow Spleen Hemangioma Malig. lymphoma, lymphocytic type Lymph nodes Thymus	++++	++++-	+ + +	+ + +	+ + +	+++++++++++++++++++++++++++++++++++++++	++ +	++++++	+++++++++++++++++++++++++++++++++++++++	++++-	+++	++++-	++++	++++++	++++-	+ + + +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++	+++++	+ + +	+ + +	+++	+ + + +	+ + +	48 49 1 1 32 27
Malıg. lymphoma, lymphocytic type CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	x 	+	+	+	+	+	50
DIGESTIVE SYSTEM Salvary gland Liver Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Stall intestine Large intestine	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++2+++++	+++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++++++	+++2+++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++	+++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++	+++X+++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+ + + N + + + + + + + + + + + + + + + +	+++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++	48 49 49 *50 44 47 47 43 43 43
URINARY SYSTEM Kidney Malignant lymphoma, NOS Urinary bladder	++++	++	+++	+++	++	* * *	+++	+++	+++	+++	++	++	+++	+	++	+	+	+++	++	++	+++	+++	++	+	+++	49 1 48
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Adrenai Adenoma, NOS Pheochromocytoma Thyroid Follcular cell adenoma Farathyroid	+++++	+ + +	* * + +	+ + + +	+ + + +	+ X + + +	++++	++++-	++++	- + +	- + + +	- + +	+ X + +	+ + +	+ + + +	+ X + +	+ + + +	- + + +	+ + + +	+ + x + -	++++-	+ - + +	- + +	+ X + + +	+ X + X + +	44 1 7 47 1 2 42 1 24
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Uterus Oyary	N + +	N + +	N + +	N + +	+ + +	N + +	N + +	N + +	N + +	N + +	N + +	+++++	N + +	N + +	N + +	N + +	N + +	N + +	N + +	N + +	+ + +	+ X + +	N + +	N + +	N + +	*50 1 49 46
Teratoma, benign NERVOUS SYSTEM Brain Carcinoma, NOS, invasive Meningioma	+ x	+	*	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	1 50 1 1
SPECIAL SENSE ORGANS Harderan gland Papillary cystadenoma, NOS	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50 1
BODY CAVITIES Mesentery Lipoma Malignant lymphoma, NOS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50 1 1
ALL OTHER SYSTEMS Muitiple organs, NOS Sarcoma, NOS, unclear prim or meta Malug lymphoma, undiffer type Malug lymphoma, lymphocytic type Malug iymphoma, histocytic type Malugnant lymphoma, mixed type Lymphocytic leukemia	N	N X	N	N X	N X	N	N	N	N X	N	N	N	N	N X	N	N X	N	N	N	N	N X	N X	N X	N	N X	*50 1 1 1 1 1 1 1

TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE: VEHICLE CONTROL (Continued)

ANIMAL NUMBER	0 1 8	0 2 1	0 3 0	0 3 4	0 2 0	0 0 1	0 1 7	0 3 2	0 0 2	0 3 5	0 4 0	0 2 6	0 0 8	0 3 8	0 1 9	0 2 7	0 4 1	0 1 6	0 1 1	0 2 2	0 3 1	0 3 7	0 0 3	0 0 4	0 0 5
WEEKS ON STUDY	0 7 6	0 7 7	0 7 7	0 8 0	0 8 3	0 8 5	0 8 5	0 8 5	0 8 7	0 8 8	0 8 9	0 9 0	0 9 2	0 9 2	0 9 5	0 9 5	0 9 5	0 9 6	0 9 7	0 9 9	0 9 9	1 0 2	1 0 4	1 0 4	1 0 4
INTEGUMENTARY SYSTEM																									
Skin Squamous cell carcinoma Subcutaneous tissue Fibrosarcoma Hemangiosarcoma	+	+	+	+	+ +	+ +	+	+	+	+	+ +	+ +	N N	+ +	+	+ +	+	+	+	+	+	+ + X	+ +	+	+
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar carcinoma Fibrosarcoma, metastatic Trachea	+	++	+	+	++	++	++	+	+ X +	+	+	+	+	+	++	++	+	+	+	+	+	+ X +	++	++	+
HEMATOPOIETIC SYSTEM Bone marrow Spleen Lymph nodes Thymus Malignant lymphoma, lymphocytic type	+++++++	+++-	+ + + +	+ + -	++++	+ + + +	+ + + +	++++++	+++-+++++++++++++++++++++++++++++++++++	+++-	+ + + -	++	+ + + -	++	+++-	++++	++++-	++++++	++++	++	++	+ + +	++++	++++-	+ + - +
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+		+	+	+	_	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Gallbladder & common bile duct Pancreas Esophagus Stomach Squamous cell carcinoma Small intestine Carcinoma, NOS Large intestine URINARY SYSTEM Kidney Urinary bladder ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Acidophil adenoma	-++N-+++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++X+++ + + + + + + + + + + + + + + + +	+++++++++++++++++++++++++++++++++++++++	+++X+++ + + + + + + + + + + + + + + + +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++++-++++++++++++++++++++++++++++++++++	+++X+++ + - +- + + + + +	+++X+++ + + + + + + + + + + + + + + + +	-++N+++ + - +- ++ + + + + + + + + + + +	++++-++ ++ + - + +++ - + -	+++N+++ + + + + + + + + + + + + + + + +	+++X-+ ++ + + +	+++++++++++++++++++++++++++++++++++++++	++++N+++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++ + + + + + + + + + + + + + +	++++N+++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++X+++ + + + + + + + + + + + + + + + +	++++++ + + + + + + + + + + + + + + + + +
Parathyroid	+	-	-	-	-	-	+	+	+	_	+	+	+	-	+	-	+	-	+	~	-	+	+	-	-
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Uterus Ovary Papillary cystadenoma, NOS	N + +	+ + -	N + -	+ + +	+ + +	N + +	N + -	N + +	+ + +	N + +	+ + +	N + +	N + +	N + -	N + +	++++++	N + +	N + -	N + +	N + +	N + +	N + +	N + +	+ + +	N + +
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, NOS Malignant lymphoma, lymphocytic type Malignant lymphoma, mixed type	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N X	N X	N	N X	N	N	N X	N	N

TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE TWO-YEARGAVAGE STUDY OF AMPICILLIN TRIHYDRATE: LOW DOSE

												• /														
ANIMAL NUMBER	0 0 6	0 0 7	0 0 9	0 1 0	0 1 2	0 1 3	0 1 4	0 1 5	0 2 3	0 2 4	0 2 5	0 2 8	0 2 9	0 3 3	0 3 6	0 3 9	0 4 2	0 4 3	0 4 4	0 4 5	0 4 6	0 4 7	0 4 8	0 4 9	0 5 0	
WEEKS ON STUDY	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	TOTAL: TISSUES TUMORS
INTEGUMENTARY SYSTEM Skin Squamous cell carcinoma Subcutaneous tissue Fibrosarcoma	+++	+ +	++	+ +	+ +	++	+ +	+	+++	++	+ +	+ +	+++	++	+ +	+ +	++	++	+++	+	 + +	N N	+ X +	+ +	N N	*50 1 *50 1
Hemangiosarcoma RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar carcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	× +	+	+ x	+	+	+	+	+	+	+ X	+	+	1
Fibrosarcoma, metastatic Trachea HEMATOPOIETIC SYSTEM	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	48
Bone marrow Spleen Lymph nodes Thymus Malig. lymphoma, lymphocytic type	++++++	+ + +	+ + + +	+ + + X	+ + -	++-+	+ + + 1	+ + + +	+ + + +	+ + + +	+++-	+ + +	++-+	+ + + +	+ + + +	+++	+ + + + X	+ + + -	+ + +	+ + + +	++ +-++	+ + + +	+ + + +	+ + + +	+ + +	50 50 37 26 2
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	49
DIGESTIVE SYSTEM Salivary gland Liver Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Squamous cell carcinoma Small intestine Carcinoma, NOS -Large intestine	+ + + + + + + + + + + + + + + + + + +	+++Z+++ + +	++++++ + +	+ + + + + + + +	+++++++++++++++++++++++++++++++++++++++	+++Z+++ +	+ + + + + + + +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+ + + + + + -	+++Z+++ + +	+++ Z +++ + +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++ X + +	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	48 50 50 *50 46 48 49 1 47 1 42
URINARY SYSTEM Kidney Urinary bladder	++++	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ -	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+ +	+++	+ +	+ +	50 42
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Addenoma, NOS Acidophil adenoma Adrenal Pheochromocytoma Thyroid Follicular cell adenoma Parathyroid	 + +	+ + + +	+ + + +	+ + + +	+++++	- + +	++++++	+ + + +	++++-	- + +	++++	+ x + -	+ X + + +	+ + + +	+ + x + +	+ + + +	++++	+ + + +	+ + + +	+++++	++++++	+ + + +	- + + +	+ + * *	- + +	40 1 1 48 1 47 1 32
REPRODUCTIVE SYSTEM Mammary gland Adenocarcinoma, NOS Uterus Ovary Papillary cystadenoma, NOS	N + +	+ + +	+ + +	+ + +	N + +	+ X + + + X	N + +	+++++	N + +	N + +	+ + -	N + +	N ++ +	+ + +	+ + +	N + +	+ + +	+ + +	N + +	N ++	+ + +	N + +	+ + -	N + +	N + +	*50 1 50 43 1
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
ALL OTHER SYSTEMS Multiple organs, NOS Malignant lymphoma, NOS Malig, lymphoma, lymphocytic type Malignant lymphoma, mixed type	N	N	N	N	N	N	N	N X	N	N	N X	N	N	N	N X	N	N	N	N X	N	N	N	N X	N	N	*50 1 6 3

TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE: LOW DOSE (Continued)

ANIMAL NUMBER	0 4 9	0 0 6	0 0 8	0 0 9	0 1 0	0 3 1	0 3 2	0 3 3	0 3 4	0 3 5	0 4 0	0 0 2	0 1 7	0 2 0	0 2 8	0 4 4	0 1 4	0 1 9	0 2 4	0 5 0	0 4 3	0 4 6	0 0 1	0 0 3	0 0 4
WEEKS ON STUDY	0 3 1	0 3 4	0 7 4	0 7 7	0 8 7	0 8 8	0 8 9	0 9 2	0 9 4	0 9 4	0 9 6	0 9 6	0 9 7	0 9 7	1 0 4	1 0 4	1 0 4								
INTEGUMENTARY SYSTEM Skin Papilloma, NOS Subcutaneous tissue Sarcoma, NOS Fibrosarcoma	++	+ +	N N	++	+++	+ +	+ +	+ +	++	+ +	+	++	N N	+ +	++	+ + X	+ +	++	+ +	+ + x	++	++	+ +	+ +	++
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Sarcoma, NOS, metastatic Trachea	+	+	+	+	+	++	+	+	+	+	+	* * +	+++	+	++	+ X +	+	+	++	+	+	+	* * +	+	++
HEMATOPOIETIC SYSTEM Bone marrow Hemangioma Spleen Malignant lymphoma, lymphocytic type Lymph nodes Sarcoma, NOS, metastatic Thymus	++++	+ + -	+ + -	++++	+++	++	++++++	++	+++-++	+ + + +	+ + - +	+ + -	+++-++	+ + + -	++++	+ + + x	+++++	+ + + +	+ X + + -	+++++	++++++	++++++	+ + -	+ + + +	++
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
DIGESTIVE SYSTEM Salivary gland Liver Malignant lymphoma, lymphocytic type Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomaci Stamaci Large intestine Large intestine	+++++++++++++++++++++++++++++++++++++++	++ +Z+++++	++ +2+++++	++ +Z+++++	++ +2+++++	++ +Z ++++	++ +Z+++++		++ +++++++	++ +2+++++	++ ++++++++++++++++++++++++++++++++++++	++ +++++++	I + + Z I + 1	++ +Z+++++	++ ++++++++++++++++++++++++++++++++++++	+++++++	++ +++++	++++2++111	++ ++++++++++++++++++++++++++++++++++++	++ +++++	++ ++ 1++++	++ +++++	++ +++++++	+++++++++++++++++++++++++++++++++++++++	+ + x + z + + + + + + + + + + + + + + +
URINARY SYSTEM Kidney Urinary bladder	++++	++++	+++	++++	+++	+++	+++	+	+++	+++	+++	+	+	++++	+++	+	++++	+++	+	+++++	+	+++	+++	+++	+++
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Adrenal Adenoma, NOS Thyroid Follicular cell adenoma Parathyroid	+++++++++++++++++++++++++++++++++++++++	- + -	+	+	++	+++++	++++++		+	++++	++++++	+++++	+ +	+++++	++++	+++	+ +		+++++	- + +	+ - +	+++++	++++++	+ + +	+++++
REPRODUCTIVE SYSTEM Mammary gland Uterus Leiomyoma Endometrial stromal polyp Ovary Granulosa cell tumor	++++	N + +	N + +	N + +	N + +	+++++	+ + +	N -	N + +	N + -	+ + +	+ N + +	N + -	+++	+++++	N + +	+++++	N -	+ + +	+ + +	N + +	+ N + +	+ + +	N + +	+ + + *
NERVOUS SYSTEM Brain		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
SPECIAL SENSE ORGANS Harderian gland Adenocarcinoma, NOS	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
ALL OTHER SYSTEMS Multiple organs, NOS Adenocarcinoma, NOS, metastatic Malignant lymphoma, lymphocytic type Malignant lymphoma, mixed type Lymphocytic leukemia	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N X	N	N	N	N	N	N X	N X	N	N	N

TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE IN THE TWO-YEARGAVAGE STUDY OF AMPICILLIN TRIHYDRATE: HIGH DOSE

									on			-,														
ANIMAL NUMBER	0 0 5	0 0 7	0 1 1	0 1 2	0 1 3	0 1 5	0 1 6	0 1 8	0 2 1	0 2 2	0 2 3	0 2 5	0 2 6	0 2 7	0 2 9	0 3 0	0 3 6	0 3 7	0 3 8	0 3 9	0 4 1	0 4 2	0 4 5	0 4 7	0 4 8	TOTAL:
WEEKS ON STUDY	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	1 0 4	TUMORS
INTEGUMENTARY SYSTEM Skin Papilloma, NOS Subcutaneous tissue Sarcoma, NOS Fibrosarcoma	+++	+ +	++	+ +	+ +	+ +	N N	+ +	+ +	+ +	++	+ +	+ +	++	+ +	+ +	+ +	++	++	+ +	++	++	* *	++	+ +	*50 1 *50 1 1
RESPIRATORY SYSTEM Lungs and bronchi Alveolar/bronchiolar adenoma Sarcoma, NOS, metastatic Trachea	+	+ +	+	++	++	+	+	++	* *	+	+	++	++	* *	+	+	+	+	++	+	+	+	++	+	+	50 4 1 44
HEMATOPOIETIC SYSTEM Bone marrow Hemangioma Spleen Malig, lymphoma, lymphocytic type Lymph nodes Sarcoma, NOS, metastatic Thymus	+++++++++++++++++++++++++++++++++++++++	+ + +	+ + +	+ + +	+ + +	+ + + +	+ + + +	++-++	+ + +	+ +	+ + +	++++	+ + +	+ + +	+ + +	+ + + +	+ + +	+ + +	+ + +	- + +	+ + + +	+++++	+ + +	+ + X +	+ + + -	49 1 50 1 37 1 30
CIRCULATORY SYSTEM Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
DICESTIVE SYSTEM Salivary gland Liver Malig, lymphoma, lymphocytic type Bile duct Gallbladder & common bile duct Pancreas Esophagus Stomach Small intestine Large intestine	+++++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++++	++ ++++++++++++++++++++++++++++++++++++	++ +2+++++	++ +Z+++++	++ +Z+++++	++ + Z +++++	++ +++++++	++ +Z+++++	++++2+++++	++ +2+++++	++ ++++++++	++ +++++++	++ ++ +++++++++++++++++++++++++++++++++	++ +++++++	++ ++++++++	++ +Z+++++	++++2++++++	++ +++++++	++ +Z+++++	++ +++++++	++ +++++++	++ ++++++++++++++++++++++++++++++++++++	++ ++++++++++++++++++++++++++++++++++++	++ +Z+++++	47 49 1 49 *50 45 48 49 46 44
URINARY SYSTEM Kidney Urinary bladder	++++	+++	++++	++++	++++	+ + +	+ +	+ +	+ +	+ +	+ +	++++	++++	++++	+++	++	+++	+++	++++	++++	+	++	+ +	+++	+ · +	50 43
ENDOCRINE SYSTEM Pituitary Carcinoma, NOS Adenoma, NOS Adrenal Adenoma, NOS Thyroid Follicular cell adenoma Parathyroid	+++++++++++++++++++++++++++++++++++++++	+ + +	+++++	+ + *	- + +	 + +	* * + +	 + + +	+ X + + +	+ X + +	+++++	+++++	+ X + +	+++++	+++++	- + +	+ + + -	++++++	- + + +	++++	- + +	+ X + +	+ X + +	- + +	- + x + +	36 1 5 47 1 43 1 34
REPRODUCTIVE SYSTEM Mammary gland Uterus Leiomyoma Endometrial stromal polyp Ovary Granulosa cell tumor	+++++++++++++++++++++++++++++++++++++++	N + +	N + +	++++	X + +	+++++	N + +	N + +	+++++	++++++	N + +	+++++	++++++	+++++	N + +	N + +	N + +	++++++	N + +	+ + +	N + X +	N + +	++++++	N + +	N + X +	*50 48 1 1 45 1
NERVOUS SYSTEM Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
SPECIAL SENSE ORGANS Harderian gland Adenocarcinoma, NOS	N	N	N	N	N X	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	*50 1
ALL OTHER SYSTEMS Multiple organs, NOS Adenocarcinoma, NOS, metastatic Malig, lymphoma, lymphocytic type Malignant lymphoma, mixed type Lymphocytic leukemia	N X	N	N X	N	N X	N X	N	N X	N	N	N	N X	N X	N X	N	N X	N	N	N	N X	N	N X	N	N	N	*50 1 9 1 2 1

TABLE B4. INDIVIDUAL ANIMAL TUMOR PATHOLOGY OF FEMALE MICE: HIGH DOSE (Continued)

Ampicillin Trihydrate, NTP TR 318

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APPENDIX C

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN RATS IN THE TWO-YEAR GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE

TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE

	CONTR	OL (VEH)	LOW	DOSE	HIG	h dose
ANIMALS INITIALLY IN STUDY	50		50		50	
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY	Y 50		50		50	
NTEGUMENTARY SYSTEM		<u>-</u>				10 I
*Skin	(50)		(50)		(50)	
Hemorrhage		(2%)				
Inflammation, acute focal Inflammation, chronic focal	I	(2%)			1	(2%)
Hyperplasia, epithelial	1	(2%)	1	(2%)	1	(270)
Hyperkeratosis		(2%)		(6%)		
Acanthosis		(2%)	•	(•)		
*Subcutaneous tissue	(50)		(50)		(50)	
Steatitis			1	(2%)		
Inflammation, acute focal Inflammation, chronic focal	1	(2%)			2	(4%)
RESPIRATORY SYSTEM				· · · · · · · · · · · · · · · · · · ·		
#Trachea	(50)		(46)		(50)	
Inflammation, acute diffuse	1	(2%)				
Inflammation, chronic focal	/= ^					(2%)
#Tracheal gland	(50)	(00)	(46)	(10)	(50)	(00)
Dilatation, NOS Hyperplasia, focal		(2%) (2%)	Z	(4%)	1	(2%)
#Lung	(50)	(2%)	(49)		(50)	
Foreign body, NOS		(4%)	(43)			(4%)
Vegetable foreign body		(2%)				(2%)
Congestion, acute passive		(10%)	4	(8%)		(10%)
Edema, NOS	2	(4%)	1	(2%)		
Hemorrhage	4	(8%)		(8%)	1	(2%)
Lymphocytic inflammatory infiltrate		(4%)	1	(2%)		
Inflammation, multifocal		(2%)				
Inflammation, acute necrotizing		(4%)		(00)	0	(1001)
Inflammation, chronic focal		(14%) (2%)	4	(8%)	9	(18%)
Inflammation, granulomatous Inflammation, granulomatous focal		(36%)	5	(10%)	1	(2%)
Inflammation, pyogranulomatous	10	(30%)		(2%)	1	(270)
Foreign material, NOS			-	(1,0)	1	(2%)
Hyperplasia, alveolar epithelium	2	(4%)	1	(2%)		(4%)
Histiocytosis	5	(10%)			2	(4%)
HEMATOPOIETIC SYSTEM	(50)		(10)			
#Bone marrow Hemorrhage	(50)	(2%)	(48)	(9%)	(50)	
Necrosis, focal		(2%) (2%)	1	(2%)		
Necrosis, diffuse	•	(= /0)	1	(2%)		
Hyperplasia, focal				(2%)		
Myelofibrosis		(2%)	2	(4%)		(2%)
Hyperplasia, hematopoietic		(14%)		(33%)		(34%)
#Spleen	(50)	(07)	(49)		(49)	
Hemorrhage Amyloidosis		(2%) (2%)	1	(2%)		
Hemosiderosis		(2%) (8%)		(2%) (8%)	ი	(4%)
Depletion, lymphoid		(070)		(6 %) (4 %)	4	(-s /0)
Lipomatosis	1	(2%)	2	(~/~)		
Hyperplasia, hematopoietic	•	- ~ /			1	(2%)
Hyperplasia, lymphoid	2	(4%)				(2%)
Hematopoiesis	4			(4%)		(4%)

	CONTROL (VEH)		LOW DOSE		HIGH DOSI		
HEMATOPOIETIC SYSTEM (Continued)		<u></u>					
#Splenic capsule	(50))	(49)		(49)		
Fibrosis, multifocal			(40)		,	(2%)	
#Splenic follicles	(50)	1	(49)		(49)		
Necrosis, focal		(2%)	(40)		(40)		
#Lymph node	(45)		(42)		(38)		
Hemorrhage	(40)			(2%)	(00)		
#Mandibular lymph node	(45)		(42)		(38)		
Cyst, NOS	(45))		(2%)	(38)		
			1	(270)		(0.01)	
Edema, NOS						(3%)	
Inflammation, chronic focal		(0.7)			I	(3%)	
Necrosis, focal		(2%)				.00	
Histiocytosis	1					(3%)	
Plasmacytosis	8	(18%)	6	(14%)		(16%)	
Erythrophagocytosis	~	(19)			1	(3%)	
Hyperplasia, plasma cell		(4%)	-	(10%)	-	(0 ~)	
Hyperplasia, lymphoid		(7%)		(12%)		(8%)	
#Bronchial lymph node	(45)		(42)		(38)		
Edema, NOS						(3%)	
Histiocytosis						(3%)	
#Pancreatic lymph node	(45)		(42)		(38)		
Edema, NOS					1	(3%)	
Hemorrhage			1	(2%)			
#Renal lymph node	(45)		(42)		(38)		
Dilatation/sinus						(3%)	
Hemorrhage			1	(2%)			
Erythrophagocytosis				(2%)			
Hyperplasía, lymphoid				. ,	1	(3%)	
#Thymic lymph node	(45)		(42)		(38)		
Cyst, NOS	(10)		()			(3%)	
Congestion, acute passive						(3%)	
Hemorrhage	4	(9%)	5	(12%)		(3%)	
Hemosiderosis	-	(0,0)	Ŭ	(14,0)		(3%)	
Histiocytosis	1	(2%)				(3%)	
Plasmacytosis		(7%)			1		
Erythrophagocytosis		(4%)	2	(5%)	1	(3%)	
Hunonplacia lumphoid	2	(490)			1	(370)	
Hyperplasia, lymphoid	(50)			(2%)	(= 0)		
#Liver	(50)	(0~)	(49)	(0~)	(50)	(0~)	
Hematopoiesis		(2%)		(6%)		(2%)	
#Colon	(39)		(38)	(0~)	(36)		
Hyperplasia, lymphoid				(3%)			
#Adrenal	(50)		(50)	(90)	(49)		
Hematopoiesis #Thumus	100		-	(2%)	(00)		
#Thymus	(38)	(00)	(32)		(38)		
Cyst, NOS		(3%)					
Congestion, acute passive		(3%)	~	(0 ~)	-	.0~	
Hemorrhage		(11%)		(3%)		(8%)	
Hyperplasia, epithelial	4	(11%)	3	(9%)	4	(11%)	
IRCULATORY SYSTEM			<u></u>	<u></u>			
#Left atrium	(20)		(40)		(50)		
Thrombus, organized	(50)		(49)	(90)	(50)		
#Left ventricle				(2%)			
	(50)	(0.01)	(49)		(50)		
Inflammation, focal	I	(2%)		.0~	-		
Hyperplasia, focal				(2%)		(2%)	
#Myocardium	(50)	(0.0 %)	(49)	(000)	(50)	1000	
Degeneration, NOS		(82%)		(92%)		(80%)	
*Testicular artery	(50)		(50)		(50)	(0~~)	
Inflammation, chronic diffuse					1	(2%)	

TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE
TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTROL (VEH)		LOW	DOSE	HIGH DOSE		
IGESTIVE SYSTEM			·····	••••••			
#Salivary gland	(49)		(46)		(46)		
Dilatation/ducts		(2%)				(2%)	
Lymphocytic inflammatory infiltrate		(2%)					
Inflammation, acute/chronic		(=,			1	(2%)	
Inflammation, chronic focal	3	(6%)	4	(9%)		(11%)	
Inflammation, chronic diffuse		(4%)		(2%)		(4%)	
Fibrosis, multifocal		(4%)		(=,,,,		(-/-/	
Cytoplasmic vacuolization	_	(-,-,			1	(2%)	
Atrophy, focal			1	(2%)		. ,	
Hyperplasia, focal	2	(4%)		(4%)	2	(4%)	
Hyperplasia, diffuse		,		(- / - /		(2%)	
Metaplasia, NOS	7	(14%)	4	(9%)		(13%)	
#Salivary mucous gland	(49)		(46)		(46)		
Inflammation, chronic focal			1	(2%)			
Metaplasia, NOS			1	(2%)			
#Parotid gland	(49)		(46)		(46)		
Inflammation, chronic focal	1	(2%)					
Fibrosis, multifocal			1	(2%)			
Atrophy, focal	2	(4%)					
#Liver	(50)		(49)		(50)		
Cyst, NOS	1	(2%)					
Congestion, acute passive	3	(6%)			2	(4%)	
Congestion, chronic passive		(2%)					
Inflammation, acute/chronic					1	(2%)	
Inflammation, granulomatous focal	1	(2%)	5	(10%)	5	(10%)	
Fibrosis, multifocal					1	(2%)	
Necrosis, coagulative			3	(6%)			
Amyloidosis					1	(2%)	
Cholesterol deposit					1	(2%)	
Basophilic cyto change	36	(72%)	34	(69%)	23	(46%)	
Eosinophilic cyto change	1	(2%)					
Clear cell change	14	(28%)	12	(24%)	10	(20%)	
Cell size alteration	1	(2%)			1	(2%)	
#Liver/hepatocytes	(50)		(49)		(50)		
Cytoplasmic vacuolization	2	(4%)	5	(10%)	10	(20%)	
Hyperplasia, focal					1	(2%)	
#Bile duct	(50)		(49)		(50)		
Fibrosis, focal			4	(8%)			
Hyperplasia, focal	35	(70%)	24	(49%)	18	(36%)	
#Pancreas	(47)		(45)		(49)		
Hemorrhage	1	(2%)					
#Pancreatic duct	(47)		(45)		(49)		
Inflammation, chronic focal			1	(2%)			
Hyperplasia, focal						(2%)	
#Pancreatic acinus	(47)		(45)		(49)		
Lymphocytic inflammatory infiltrate						(2%)	
Inflammation, chronic focal		(9%)	5	(11%)	3	(6%)	
Inflammation, chronic diffuse		(2%)					
Atrophy, focal		(19%)	15	(33%)	13	(27%)	
Atrophy, diffuse	2	(4%)					
Hyperplasia, focal				(2%)			
#Peripancreatic tissue	(47)		(45)		(49)		
Inflammation, acute/chronic				(2%)			
#Esophagus	(50)		(48)		(49)		
Vegetable foreign body				- ···	1	(2%)	
Inflammation, acute/chronic				(2%)			
Hyperkeratosis			1	(2%)			

TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTR	OL (VEH)	LOW	DOSE	HIG	h dose
DIGESTIVE SYSTEM (Continued)						<u></u>
#Stomach	(48)		(44)		(45)	
Ulcer, NOS		(2%)		(2%)	,	
Inflammation, chronic focal				(2%)	2	(4%)
Infection, fungal			-	(= , , ,		(2%)
#Gastric submucosa	(48)		(44)		(45)	
Fibrosis, diffuse	(10)			(2%)		
#Gastric muscularis	(48)		(44)	,	(45)	
Inflammation, acute/chronic					1	(2%)
#Gastric serosa	(48)		(44)		(45)	
Inflammation, focal					1	(2%)
Inflammation, chronic focal			1	(2%)		
#Cardiac stomach	(48)		(44)		(45)	
Ulcer, NOS			1	(2%)	1	(2%)
Inflammation, acute focal			1	(2%)		(4%)
Inflammation, acute/chronic						(4%)
Inflammation, chronic focal	2	(4%)	1	(2%)	1	(2%)
Erosion					1	(2%)
Necrosis, focal	1	(2%)				
Hyperplasia, epithelial	3	(6%)	3	(7%)		(16%)
Hyperplasia, diffuse					1	(2%)
Hyperkeratosis	3	(6%)		(14%)		(20%)
Acanthosis				(5%)		(11%)
#Colon	(39)		(38)		(36)	
Dilatation, NOS				(3%)		
Parasitism	4	(10%)		(11%)	1	(3%)
Hyperplasia, diffuse				(3%)		
#Cecum	(39)		(38)		(36)	
Edema, NOS				(3%)		
*Rectum	(50)		(50)		(50)	
Hyperplasia, diffuse					1	(2%)
IRINARY SYSTEM		<u> </u>				
#Kidney	(50)		(48)		(48)	
Hydronephrosis				(2%)		
Cyst, NOS				(4%)	2	(4%)
Hemorrhage			1	(2%)	1	(2%)
Glomerulonephritis, NOS	1	(2%)				
Lymphocytic inflammatory infiltrate					4	(8%)
Pyelonephritis, acute			1	(2%)		(4%)
Inflammation, chronic focal						(2%)
Nephropathy	41	(82%)	40	(83%)		(90%)
Nephrosis, NOS		(2%)			_	
Infarct, focal	_				1	(2%)
#Perirenal tissue	(50)		(48)		(48)	
Hemorrhage				(2%)		
Inflammation, chronic focal				(2%)		
#Kidney/tubule	(50)		(48)		(48)	
Cast, NOS		(2%)				
#Kidney/pelvis	(50)		(48)		(48)	
Inflammation, acute focal					1	(2%)
Hyperplasia, epithelial		(2%)		(2%)		
#Urinary bladder	(47)		(44)		(46)	
Cast, NOS		(9%)		(2%)	1	(2%)
Hemorrhage	1	(2%)		(2%)		
Inflammation, acute focal			1	(2%)		
Inflammation, acute diffuse					1	(2%)
Inflammation, acute/chronic			1	(2%)		
Inflammation, chronic focal		(4%)				
Inflammation with fibrosis	1	(2%)				
				(EM)		
Hyperplasia, epithelial Hyperplasia, diffuse			Z	(5%)		(2%)

TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE
TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTR	ROL (VEH)	LOW DOSE		HIGH DOSI		
URINARY SYSTEM (Continued)							
#Urinary bladder/mucosa	(47)		(44)		(46)		
Erosion	(=)			(5%)		(2%)	
Hyperplasia, epithelial				(2%)	-	(2,0)	
#Urinary bladder/serosa	(47)		(44)	(2,0)	(46)		
Erosion	()			(2%)	()		
*Prostatic urethra	(50)		(50)	(_ /)	(50)		
Cast, NOS	8	(16%)	4	(8%)	10	(20%)	
Inflammation, acute			1	(2%)	1	(2%)	
Erosion	1	(2%)					
Hyperplasia, epithelial					1	(2%)	
ENDOCRINE SYSTEM	······································						
#Anterior pituitary	(46)		(49)		(46)		
Cyst, NOS	3	(7%)	2	(4%)	1	(2%)	
Multiple cysts			2	(4%)			
Hemorrhage	2	(4%)			2	(4%)	
Hemorrhage, chronic			1	(2%)			
Necrosis, focal	1	x = · · · ·					
Hyperplasia, focal		(9%)		(10%)		(22%)	
#Adrenal	(50)		(50)		(49)		
Atypia, NOS			1	(2%)	-		
Hyperplasia, focal						(2%)	
#Adrenal cortex	(50)		(50)		(49)		
Accessory structure				(2%)	2	(4%)	
Hemorrhagic cyst	1	(2%)	1	(2%)	_		
Degeneration, lipoid	_		_			(2%)	
Cytoplasmic vacuolization		(4%)		(4%)		(4%)	
Focal cellular change	1	(2%)	5	(10%)		(14%)	
Atypia, NOS						(2%)	
Hypertrophy, focal		(0.7.)	•	(1~)		(4%)	
Hyperplasia, focal		(2%)		(4%)		(10%)	
#Adrenal medulla	(50)		(50)		(49)	(2%)	
Hemorrhage Hemorrhagic cyst	1	(2%)			1	(2.70)	
Focal cellular change		(2%)					
Hyperplasia, focal		(2%)	10	(20%)	Q	(16%)	
#Thyroid	(50)	(20%)	(48)	(20%)	(46)	(10,0)	
Follicular cyst, NOS		(2%)	(40)		(40)		
Hemorrhage, chronic	1				1	(2%)	
Hyperplasia, C-cell	4	(8%)	11	(23%)		(15%)	
Hyperplasia, follicular cell	-			(20 /0)		(2%)	
#Pancreatic islets	(47)		(45)		(49)		
Hyperplasia, focal		(6%)		(11%)	2	(4%)	
REPRODUCTIVE SYSTEM							
*Mammary gland	(50)		(50)		(50)		
Hyperplasia, focal	3	(6%)		(10%)	2	(4%)	
Hyperplasia, diffuse				(2%)			
Hyperplasia, cystic		(2%)	-	(10%)		(4%)	
*Preputial gland	(50)		(50)		(50)		
Abscess, NOS	1	(2%)					
Inflammation, acute/chronic			1	(2%)		(2%)	
Hyperkeratosis						(2%)	
#Prostate	(49)		(48)		(47)		
Hemorrhage		(2%)					
Inflammation, acute focal	4	(8%)		(2%)	2	(4%)	
Inflammation, acute diffuse			1	(2%)			

TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTROL (VEH)		LOW DOSE		HIGH DOSE		
REPRODUCTIVE SYSTEM						<u> </u>	
#Prostate (Continued)	(49)		(48)		(47)		
Abscess, NOS	×		1	(2%)	1	(2%)	
Inflammation, active chronic			1	(2%)			
Inflammation, acute/chronic	12	(24%)	16	(33%)	28	(60%)	
Inflammation, chronic focal	5	(10%)	8	(17%)	5	(11%)	
Inflammation, granulomatous focal					1	(2%)	
Inflammation with fibrosis	1						
Hyperplasia, focal		(4%)				(6%)	
*Seminal vesicle	(50)		(50)		(50)		
Cast, NOS		(4%)					
Atrophy, NOS	2	(4%)	3	(6%)		(2%)	
Hyperplasia, diffuse						(2%)	
#Periprostatic tissue	(49)		(48)		(47)		
Inflammation, acute/chronic	1	(2%)					
#Testis	(50)		(49)		(50)		
Degeneration, NOS					1	(2%)	
Atrophy, NOS	3	(6%)	3	(6%)		(6%)	
Atrophy, diffuse	•					(2%)	
Hyperplasia, interstitial cell	20	(40%)	14	(29%)		(40%)	
#Testis/tubule	(50)		(49)		(50)	• /	
Atrophy, diffuse			(/			(2%)	
VERVOUS SYSTEM							
#Brain/meninges	(50)		(50)		(50)		
Inflammation, chronic focal	(50)			(2%)	(00)		
#Brain	(50)		(50)	(210)	(50)		
Hydrocephalus, NOS		(2%)		(4%)	(00)		
Hemorrhage		(4%)		(2%)	0	(6%)	
#Brain/thalamus	(50)	(** 70)	(50)	(470)	(50)	(070)	
#Brain/thalamus Malacia	(60)		(00)			(901.)	
	•	(10)	0	(10)		(2%)	
Atrophy, pressure #Cerebellum		(4%)		(4%)		(2%)	
Malacia	(50)	(2%)	(50)		(50)	(2%)	
		(470)	150			(270)	
*Spinal nerve Degeneration, Wallerian	(50)		(50) 1	(2%)	(50)		
SPECIAL SENSE ORGANS							
*Eye	(50)		(50)		(50)		
		(900)	(50)		(50)		
Hemorrhage Hemorrhage		(20%)					
Hemorrhage, chronic		(14%)					
Inflammation, acute diffuse		(2%)					
Inflammation, acute/chronic		(2%)					
Synechia, anterior		(2%)					
Synechia, posterior		(26%)					
Cataract		(12%)			(ED)		
*Eye/retina	(50)	(9.4.01.)	(50)		(50)		
Degeneration, NOS		(34%)			(20)		
*Eye/crystalline lens	(50)	(100)	(50)	(00)	(50)		
Cataract	9	(18%)	1	(2%)			
IUSCULOSKELETAL SYSTEM							
*Skull	(50)		(50)		(50)		
Osteosclerosis				(2%)	,		
*Skeletal muscle	(50)		(50)		(50)		
Hemorrhage		(2%)	(007		(00)		
	+	- /0/					

TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE
TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTR	CONTROL (VEH)		LOW DOSE		H DOSE
BODY CAVITIES					<u></u>	
*Mediastinum	(50)		(50)		(50)	
Foreign body, NOS	1	(2%)				
Vegetable foreign body	1	(2%)			1	(2%)
Hemorrhage	2	(4%)	1	(2%)	1	(2%)
Inflammation, acute focal	2	(4%)				
Inflammation, granulomatous focal	1	(2%)				
*Abdominal cavity	(50)		(50)		(50)	
Hemorrhage			1	(2%)		
Inflammation, acute focal					1	(2%)
*Mesentery	(50)		(50)		(50)	
Mineralization			1	(2%)		
Hemorrhage	1	(2%)				
Inflammation, diffuse			1	(2%)		
Inflammation, acute/chronic			2	(4%)		
Inflammation, chronic focal	2	(4%)	4	(8%)	1	(2%)
Inflammation, chronic diffuse			2	(4%)		
Necrosis, fat	4	(8%)	9	(18%)	2	(4%)
ALL OTHER SYSTEMS				······		
Adipose tissue						
Hemorrhage			1			
Hemorrhage, chronic			1			
Inflammation, chronic focal			1			
Fibrosis, multifocal			1			

TABLE C1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically.
 Number of animals examined microscopically at this site

TABLE C2.	SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN
	THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE

		ROL (VEH)	LOW DOSE		HIGH DOSE		
ANIMALS INITIALLY IN STUDY	50		50		50		
ANIMALS NECROPSIED	50		50		50		
ANIMALS EXAMINED HISTOPATHOLOGICALLY	50		50		50		
INTEGUMENTARY SYSTEM		· · · · · · · · · · · · · · · · · · ·					
*Skin	(50)		(50)		(50)		
Epidermal inclusion cyst Ulcer, NOS			1	(2%)		(4%)	
Inflammation, chronic focal						(2%) (4 %)	
Hyperplasia, epithelial	1	(2%)			2	(470)	
Hyperkeratosis		(8%)	1	(2%)			
*Subcutaneous tissue	(50)	(0.07)	(50)		(50)		
Inflammation, acute/chronic					1	(2%)	
RESPIRATORY SYSTEM							
*Maxillary sinus	(50)	(07)	(50)		(50)		
Inflammation, pyogranulomatous		(2%)	(=0)		(50)		
#Trachea Inflammation, chronic focal	(50)	(8%)	(50)	(6%)	(50)		
#Tracheal gland	(50)	(0.07)	(50)		(50)		
Dilatation, NOS		(2%)	(00)			(4%)	
#Lung	(50)	()	(49)		(50)		
Foreign body, NOS			1	(2%)	2	(4%)	
Atelectasis					-	(2%)	
Congestion, acute passive		(2%)		(10%)	_	(4%)	
Hemorrhage	-	(6%)	4	(8%)	-	(6%)	
Lymphocytic inflammatory infiltrate Inflammation, acute focal	2	(4%)			-	(4%) (2%)	
Inflammation, acute/chronic					-	(2%) (2%)	
Inflammation, chronic focal	10	(20%)	12	(24%)		(8%)	
Inflammation, granulomatous focal		(24%)		(=-,,		(6%)	
Inflammation, necrotizing granulomatous		(2%)					
Infection, fungal	1	(2%)					
Foreign material, NOS		(07)		(2%)			
Hyperplasia, alveolar epithelium		(2%)		(2%)		(4%)	
Histiocytosis #Lung/alveoli	(50)	(4%)	(49)	(2%)	5 (50)	(10%)	
Mineralization	(30)		· · ·	(2%)	(00)		
HEMATOPOIETIC SYSTEM							
#Bone marrow	(50)		(49)		(50)		
Hemorrhage						(2%)	
Osteosclerosis		(90)	1	(2%)	1	(2%)	
Histiocytosis Myelofibrosis		(2%) (6%)	Ę	(10%)	6	(12%)	
Hyperplasia, hematopoietic		(26%)		(45%)		(12%) (50%)	
Mastocytosis	10	()		(2%)	~0		
#Spleen	(50)		(49)		(50)		
Fibrosis, focal					2	(4%)	
Fibrosis, diffuse			1	(2%)			
Necrosis, focal	1	(2%)	-	(0~)			
Necrosis, diffuse	-	(100)		(2%)	•	(60)	
Hemosiderosis Depletion, lymphoid		(10%) (2%)	2	(4%)		(6%) (2%)	
		(2%)			1	(470)	
Hyperplasia, lymphoid							

	CONTR	ROL (VEH)	LOW	DOSE	HIGH DOSI		
HEMATOPOIETIC SYSTEM (Continued)			·····	·····			
#Lymph node	(43)		(45)		(45)		
Edema, NOS			1	(2%)			
#Mandibular lymph node	(43)		(45)		(45)		
Cyst, NOS		(2%)					
Edema, NOS	1	(2%)			2	(4%)	
Hemorrhage		(5%)	2	(4%)	1	(2%)	
Histiocytosis	1	(2%)					
Plasmacytosis	8	(19%)		(18%)	11	(24%)	
Hyperplasia, lymphoid		(2%)	2	(4%)	4	(9%)	
#Pancreatic lymph node	(43)		(45)		(45)		
Hemorrhage		(2%)			1	(2%)	
Erythrophagocytosis	1	(2%)					
#Thymic lymph node	(43)		(45)		(45)		
Congestion, acute passive					1	(2%)	
Edema, NOS			1	(2%)		(2%)	
Hemorrhage		(2%)	11	(24%)	3	(7%)	
Inflammation, chronic diffuse	1	(2%)					
Pigmentation, NOS	1	(2%)			1	(2%)	
Histiocytosis			1	(2%)			
Plasmacytosis			1	(2%)			
Erythrophagocytosis	2	(5%)					
Hyperplasia, lymphoid			1	(2%)			
#Liver	(50)		(50)		(50)		
Hematopoiesis		(4%)		(6%)		(4%)	
#Adrenal	(50)		(50)	(2)	(49)	,	
Hematopoiesis		(4%)			,		
#Thymus	(35)		(41)		(41)		
Cyst, NOS		(3%)	<,				
Multiple cysts		,			1	(2%)	
Hemorrhage			2	(5%)		(5%)	
Inflammation, acute			-			(2%)	
Hyperplasia, epithelial	1	(3%)	4	(10%)	-	(,	
Hyperplasia, lymphoid		(3%)	-	()			
TIRCULATORY SYSTEM							
#Myocardium	(50)		(50)		(50)		
Degeneration, NOS	40	(80%)	32	(64%)	39	(78%)	
DIGESTIVE SYSTEM							
*Tongue	(50)		(50)		(50)		
Cyst, NOS						(2%)	
#Salivary gland	(48)	(0.2)	(49)		(49)		
Dilatation/ducts		(2%)	2	(4%)	1	(2%)	
Lymphocytic inflammatory infiltrate	1	(2%)					
Inflammation, acute focal		_		(2%)			
Inflammation, acute/chronic		(2%)		(2%)			
Inflammation, chronic focal	8	(17%)	2	(4%)		(4%)	
Necrosis, focal				.		(2%)	
Atrophy, focal			1	(2%)		(2%)	
Atrophy, diffuse						(2%)	
Hyperplasia, focal		(4%)				(4%)	
Metaplasia, NOS		(10%)		(6%)		(4%)	
#Liver	(50)		(50)		(50)		
Mineralization						(2%)	
Congestion, acute passive	-	(0.4)	2	(4%)		(2%)	
Congestion, chronic passive	1	(2%)		.	1	(2%)	
Inflammation, chronic focal				(6%)	_		
Inflammation, granulomatous focal	17	(34%)	17	(34%)	23	(46%)	
Fibrosis, focal				(4%)			

TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTROL (VEH)		LOW DOSE		HIGH DOSI		
DIGESTIVE SYSTEM			· · · · · · · · · · · · · · · · · · ·				
#Liver (Continued)	(50)		(50)		(50)		
Necrosis, focal			()			(6%)	
Necrosis, coagulative	1	(2%)	1	(2%)	1	(2%)	
Basophilic cyto change		(76%)		(72%)		(66%)	
Focal cellular change		(· · · · · · ·				(2%)	
Clear cell change	7	(14%)	1	(2%)	4	(8%)	
Atrophy, diffuse	•	X				(2%)	
Angiectasis			1	(2%)			
#Liver/hepatocytes	(50)		(50)		(50)		
Cytoplasmic vacuolization	2	(4%)	4	(8%)	4	(8%)	
#Bile duct	(50)		(50)		(50)		
Inflammation, chronic focal			,			(4%)	
Fibrosis, focal	1	(2%)	1	(2%)		(2%)	
Hyperplasia, focal	27	(54%)		(26%)		(26%)	
#Pancreas	(48)		(49)		(49)		
Dilatation/ducts		(2%)			• •		
Cystic ducts		(2%)					
#Pancreatic duct	(48)		(49)		(49)		
Hyperplasia, focal			(1	(2%)	
#Pancreatic acinus	(48)		(49)		(49)	,	
Inflammation, chronic focal		(8%)		(4%)		(4%)	
Nuclear aggregate, NOS	7	(0.0)	2	× « /V /		(2%)	
Atrophy, focal	16	(33%)	12	(27%)		(22%)	
Hyperplasia, focal		(2%)		(2%)	11	(4470)	
#Peripancreatic tissue	(48)	(=,	(49)	(2/0)	(49)		
Inflammation, chronic focal		(2%)	(43)		(43)		
#Esophagus	(48)	(270)	(48)		(50)		
Hemorrhage		(2%)	(40)		(00)		
#Gastric mucosa	(49)	(2.70)	(50)		(47)		
Dilatation, NOS		(2%)	,	(2%)	(4)		
#Gastric submucosa	(49)	(270)	(50)	(270)	(47)		
Inflammation, chronic focal		(4%)		(4%)	(4)		
#Cardiac stomach	(49)	(4970)	(50)	(+ 70)	(47)		
Ulcer, NOS		(6%)	(50)		(47)		
			•	(00)	1	(901)	
Inflammation, chronic focal	1	(2%)		(2%)	1	(2%)	
Necrosis, focal	0	(02)		(2%)			
Hyperplasia, epithelial		(6%)		(2%)		(2%)	
Hyperkeratosis #Durahan harata		(4%)		(2%)		(6%)	
#Duodenal mucosa	(48)		(46)		(42)		
Lymphocytic inflammatory infiltrate			(0.0)			(2%)	
#Colon Parasitism	(37)		(36)	(90)	(41)	(10~)	
#Cecum	(97)		-	(8%)		(10%)	
Infarct, hemorrhagic	(37)		(36)		(41)	(90%)	
*Rectum	(20)		(EA)			(2%)	
Parasitism	(50)		(50)		(50)	(90)	
					1	(2%)	
RINARY SYSTEM		· · · · · · · · · · · · · · · · · · ·			<u></u>	·	
#Kidney	(50)		(50)		(49)		
Cyst, NOS						(2%)	
Congestion, acute passive			1	(2%)	-		
Inflammation, acute/chronic				(2%)			
Inflammation, chronic	1	(2%)	•				
Nephropathy		(68%)	32	(64%)	36	(73%)	
Nephrosis, NOS	01			(4%)	00		
Inephrosis, INOS				· • /• /			
	1	(2%)					
Nephrosis, NOS Nephrosis, hemoglobinuric Glomerulosclerosis, NOS		(2%) (2%)					

TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTR	CONTROL (VEH)		LOW DOSE		H DOSE
URINARY SYSTEM (Continued)		· · - · · ·				
#Kidney/tubule	(50)		(50)		(49)	
Pigmentation, NOS		(2%)		(2%)	,	
#Kidney/pelvis	(50)		(50)		(49)	
Cyst, NOS			1	(2%)		
Hemorrhage	1	(2%)				
Inflammation, focal	1	(2%)				
Erosion		(2%)				
*Ureter	(50)		(50)		(50)	
Hyperplasia, epithelial	1	(2%)				
#Urinary bladder	(46)		(46)		(41)	
Inflammation, focal	1	(2%)				
Inflammation, chronic focal	1	(2%)	1	(2%)		(2%)
Hyperplasia, epithelial					1	(2%)
ENDOCRINE SYSTEM						
#Pituitary	(49)		(50)		(49)	
Hemorrhagic cyst					1	(2%)
#Anterior pituitary	(49)		(50)		(49)	
Cyst, NOS		(10%)		(10%)		(10%)
Multiple cysts		(4%)		(8%)		(12%)
Hemorrhagic cyst	-	(8%)	-	(6%)	-	(4%)
Hemorrhage, chronic	3	(6%)		(4%)	1	(<i>?</i> %)
Abscess, NOS			1	(2%)		
Hyperplasia, focal	8	(16%)				(12%)
Hyperplasia, diffuse						(2%)
#Adrenal	(50)		(50)		(49)	
Accessory structure	1	(2%)				
Atypia, NOS				(2%)		(4%)
#Adrenal cortex	(50)		(50)		(49)	
Cyst, NOS			1	(2%)		
Hemorrhage	_			(0~)	1	(2%)
Hemorrhagic cyst	2	(4%)		(2%)	-	(10)
Necrosis, focal			1	(2%)	2	(4%)
Amyloidosis		(2%)	-		-	(00)
Cytoplasmic vacuolization	1	(2%)	7	(14%)		(6%)
Basophilic cyto change						(2%)
Focal cellular change	6	(12%)		(24%)	15	(31%)
Atypia, NOS				(2%)		
Hypertrophy, focal		(6%)		(4%)	-	
Hyperplasia, focal	•	(10%)	-	(12%)		(6%)
#Adrenal medulla	(50)	.007	(50)	(1.4.0)	(49)	(10~)
Hyperplasia, focal	-	(36%)		(14%)		(12%)
#Thyroid	(50)	(0.00)	(49)		(49)	
Follicular cyst, NOS	1	(2%)				(901)
Inflammation, chronic focal	10	(900)	10	(910.)		(2%)
Hyperplasia, C-cell Hyperplasia, follioular coll	10	(20%)		(24%)	21	(43%)
Hyperplasia, follicular cell	(40)			(2%)	(49)	
#Pancreatic islets	(48)	(9%)	(49)	(196)		(196)
Hyperplasia, focal	1	(2%)	Z	(4%)	2	(4%)
REPRODUCTIVE SYSTEM						
*Mammary gland	(50)		(50)		(50)	
Cyst, NOS				(2%)		
Hyperplasia, focal		(12%)		(4%)	2	(4%)
Hyperplasia, diffuse		(2%)		(12%) (30%)		(40%)
Hyperplasia, cystic		(32%)				

TABLE C2.SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN
THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)
	CONTR	ROL (VEH)	LOW	DOSE	HIGH DOS	
REPRODUCTIVE SYSTEM (Continued)						
*Preputial gland	(50)		(50)		(50)	
Dilatation/ducts	(00)			(2%)	(00)	
Inflammation, chronic focal	1	(2%)	-	(,		
Fibrosis, multifocal		(2%)				
Hyperplasia, focal		(2%)			1	(2%)
Hyperkeratosis	-	(2.0)				(2%)
#Uterus	(50)		(50)		(49)	
Prolapse	(,			(2%)		
Dilatation, NOS	4	(8%)		(6%)	3	(6%)
Hemorrhage, chronic						(2%)
Abscess, NOS	1	(2%)				
Inflammation, acute/chronic		(2%)				
Inflammation, chronic focal		(2%)	1	(2%)	2	(4%)
#Cervix uteri	(50)		(50)	(= /)	(49)	(- / • /
Cyst, NOS		(2%)	(00)			
Inflammation, acute focal	•	(2,0)	1	(2%)		
Inflammation, chronic focal			1	(10)	t	(2%)
Hyperplasia, diffuse			1	(2%)	1	
#Endometrial gland	(50)		(50)	(2.07	(49)	
Dilatation, NOS	(00)			(2%)	(40)	
Hyperplasia, focal	3	(6%)	-	(4%)	3	(6%)
Hyperplasia, diffuse	Ū			(4%)		(4%)
Hyperplasia, cystic	3	(6%)		(4%)		(6%)
Metaplasia, squamous		(2%)	4	(470)	0	(0,0)
#Ovary	(50)	(270)	(49)		(47)	
Parovarian cyst		(10%)		(8%)	(41)	
Hemorrhage	0	(10.0)	4	(0.0)	1	(2%)
Hyperplasia, epithelial			1	(2%)	1	(270)
			<u></u>	<u></u>		
NERVOUS SYSTEM						
#Brain/meninges	(50)		(50)		(50)	
Inflammation, acute/chronic	1	(2%)				
Fibrosis, multifocal						(2%)
#Cerebrum	(50)		(50)		(50)	
Inflammation, chronic focal	1	(2%)				
Gliosis					1	(2%)
#Brain	(50)		(50)		(50)	
Hydrocephalus, NOS	1	(2%)	1	(2%)	1	(2%)
Hemorrhage			2	(4%)	1	(2%)
Necrosis, focal					1	(2%)
#Brain/thalamus	(50)		(50)		(50)	
Atrophy, pressure	1	(2%)	3	(6%)	5	(10%)
*Facial nerve	(50)		(50)		(50)	
Inflammation, pyogranulomatous	1	(2%)				
PECIAL SENSE ORGANS				<u> </u>		
*Eye	(50)		(50)		(50)	
Hemorrhage, chronic		(22%)		(2%)	2	(4%)
Inflammation, acute diffuse	1	(2%)	1	(2%)		
Inflammation, chronic focal					1	(2%)
Synechia, anterior		(4%)				
Synechia, posterior		(22%)		(2%)		
*Eye/cornea	(50)		(50)		(50)	
Hyperplasia, epithelial	1	(2%)				
Vascularization					1	(2%)
Dysplasia, NOS					1	(2%)
			(50)		(50)	
*Eyeball, tunica vasculosa Degeneration, NOS	(50)		(50)		(30)	

TABLE C2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTI	ROL (VEH)	LOW	DOSE	HIG	HIGH DOSE	
SPECIAL SENSE ORGANS (Continued)							
*Eye/retina	(50)	1	(50)		(50)		
Degeneration, NOS	17	(34%)		(6%)	2	(4%)	
Atrophy, diffuse	1	(2%)					
*Eye/crystalline lens	(50)		(50)		(50)		
Degeneration, NOS						(2%)	
Cataract		(34%)		(4%)		(4%)	
*Eye/conjunctiva	(50)		(50)		(50)		
Inflammation, necrotizing		(2%)	(50)		(50)		
*Harderian gland Pigmentation, NOS	(50)		(50) 1	(2%)	(50)		
MUSCULOSKELETAL SYSTEM							
*Skull	(50)		(50)		(50)		
Osteosclerosis			1	(2%)			
*Temporal bone	(50)		(50)		(50)		
Osteosclerosis				(2%)			
*Femur	(50)		(50)		(50)		
Osteosclerosis			-	(4%)		(4%)	
*Tibia	(50)		(50)		(50)		
Osteosclerosis				(2%)		(2%)	
*Muscle of neck Inflammation, chronic focal	(50)	(2%)	(50)		(50)		
BODY CAVITIES *Mediastinum Foreign body, NOS Hemorrhage *Abdominal cavity Inflammation, chronic Inflammation, chronic focal *Pleura	(50) (50) (50)		(50) (50) 1 (50)	(2%)	1 (50) 1	(2%) (2%) (2%)	
	(50)		<pre></pre>	(00)	(50)		
Fibrosis, focal *Epicardium	(50)		(50)	(2%)	(50)		
Inflammation, chronic focal		(2%)	(00)		(50)		
*Mesentery	(50)		(50)		(50)		
Inflammation, acute/chronic		(4%)		(2%)	(23)		
Inflammation, chronic focal		(6%)			1	(2%)	
Inflammation, chronic diffuse	1	(2%)		(2%)	1	(2%)	
Inflammation, granulomatous focal				(2%)			
Fibrosis, focal			1	(2%)	-	(A A)	
Necrosis, focal Necrosis, fat	7	(14%)	9	(18%)		(2%) (12%)	
ALL OTHER SYSTEMS							
*Multiple organs	(50)		(50)		(50)		
Hemorrhage				(2%)			
Inflammation, acute focal			1	(2%)			
Adipose tissue					-		
Hemorrhage Information chronic diffuse					1		
Inflammation, chronic diffuse Necrosis, fat	1						
	1						

TABLE C2.SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS IN
THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

None

Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically.
 Number of animals examined microscopically at this site

APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE IN THE TWO-YEAR GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE

TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE

	CONTR	ROL (VEH)	LOW	DOSE	HIG	H DOSE
ANIMALS INITIALLY IN STUDY	50	· · · · · · · · · · · · · · · · · · ·	50		50	
ANIMALS MISSING			1		1	
ANIMALS NECROPSIED	50		49		49	
ANIMALS EXAMINED HISTOPATHOLOGICALL	Y 50		49		49	
INTEGUMENTARY SYSTEM	- 712		****			<u> </u>
*Skin	(50)		(49)		(49)	
Edema, NOS	1	(2%)				
Ulcer, NOS				(2%)		(2%)
Inflammation, suppurative				(2%)	2	(4%)
Inflammation, chronic	1	(2%)	2	(4%)		
Ulcer, chronic					2	(4%)
Parasitism				(2%)		
Atrophy, NOS	_			(2%)		
Hyperkeratosis	5	(10%)		(10%)		(6%)
Acanthosis				(14%)		(6%)
*Subcutaneous tissue	(50)		(49)		(49)	(00)
Inflammation, acute diffuse						(2%) (9%)
Inflammation chronic suppurative				(90)	1	(2%)
Inflammation, granulomatous focal				(2%)		
Infection, fungal			1	(2%)		
RESPIRATORY SYSTEM						
#Lung	(50)		(49)		(47)	
Aspiration, foreign body		· • • • ·	-	(6%)		(2%)
Congestion, acute	-	(4%)	7	(14%)	7	(15%)
Hemorrhage		(4%)	10	(0.5.4)	0	(189)
Lymphocytic inflammatory infiltrate	7	(14%)		(27%)	8	(17%)
Inflammation, suppurative Fibrosis, focal			1	(2%)	1	(2%)
Hyperplasia, alveolar epithelium	1	(2%)	0	(4%)		(2%)
Histiocytosis		(4%)		(2%)		(2%)
HEMATOPOIETIC SYSTEM			1.71 Bi i i i i i i i i i i i i i i i i i i	<u></u>		
*Multiple organs	(50)		(49)		(49)	
Leukemoid reaction		(6%)	1	(6%)		(2%)
Hyperplasia, lymphoid	-	(2%)	Ŭ		-	
#Bone marrow	(45)	, _ <i>,</i>	(47)		(47)	
Hemorrhage				(2%)	,	
Infarct, NOS	1	(2%)		-		
Infarct, focal					1	(2%)
Myelofibrosis			1	(2%)		
Hyperplasia, erythroid						(4%)
Hyperplasia, granulocytic	7	(16%)	13	(28%)	13	(28%)
#Spleen	(50)		(47)		(47)	
Depletion, lymphoid		(12%)		(13%)		(19%)
Hyperplasia, lymphoid		(28%)		(6%)		(13%)
#Splenic red pulp	(50)		(47)		(47)	
Hemosiderosis						(2%)
Atrophy, diffuse		(2%)				(9%)
Hematopoiesis		(16%)		(23%)		(15%)
#Lymph node	(24)		(27)		(23)	
Cyst, NOS					1	(4%)
Hyperplasia, diffuse	1	(4%)				

	CONT	ROL (VEH)	LOV	V DOSE	HIG	H DOSE
HEMATOPOIETIC SYSTEM (Continued)						
#Mandibular lymph node	(24))	(27)		(23)	
Inflammation, suppurative		·		(4%)	(20)	
Inflammation, acute/chronic			-	(-,-,	1	(4%)
Plasma cell infiltrate	1	(4%)			-	(4/0)
Histiocytosis		(4%)			1	(4%)
Hyperplasia, lymphoid		(4%)				(9%)
Hematopoiesis			1	(4%)	-	
#Mesenteric lymph node	(24))	(27)		(23)	
Hemorrhage	1	(4%)				
Hyperplasia, lymphoid	1	(4%)				
#Lung	(50))	(49)		(47)	
Leukemoid reaction				(2%)		
#Liver	(50)		(48)		(46)	
Leukemoid reaction				(2%)		
Hematopoiesis			-	(6%)		(2%)
*Mesentery	(50)		(49)		(49)	
Hematopoiesis				(2%)		
#Thymus	(28)		(22)		(24)	
Cyst, NOS				(5%)		
Necrosis, diffuse		(4%)	_	(9%)		(4%)
Depletion, lymphoid	2	(7%)	2	(9%)	4	(17%)
CIRCULATORY SYSTEM				<u> </u>		
#Heart	(50)		(49)		(47)	
Fibrosis, focal	1	(2%)				
#Heart/atrium	(50)		(49)		(47)	
Inflammation, focal	1	(2%)				
#Myocardium	(50)		(49)		(47)	
Mineralization					1	(2%)
*Pulmonary artery	(50)		(49)		(49)	
Hypertrophy, NOS			1	(2%)		
#Hepatic sinusoid	(50)		(48)		(46)	
Dilatation, NOS			1	(2%)		
*Preputial gland	(50)		(49)		(49)	
Lymphangiectasis			1	(2%)		
IGESTIVE SYSTEM						
#Salivary gland	(47)		(47)		(44)	
Multiple cysts			1	(2%)		
Lymphocytic inflammatory infiltrate	15	(32%)	18	(38%)	14	(32%)
Inflammation, acute/chronic			1	(2%)		
Inflammation, granulomatous focal	1	(2%)				
Necrosis, focal					1	(2%)
Atrophy, focal	1	(2%)			-	
Hypertrophy, diffuse	1	(2%)				
#Liver	(50)		(48)		(46)	
Inflammation, focal	1	(2%)				
Lymphocytic inflammatory infiltrate			3	(6%)		
Inflammation, granulomatous focal		(2%)		(2%)		
Necrosis, coagulative	1	(2%)		(2%)	2	(4%)
Infarct, NOS				(2%)		
Cytoplasmic vacuolization	1	(2%)	3	(6%)		(4%)
Basophilic cyto change	-	(0.4)			2	(4%)
Eosinophilic cyto change	1	(2%)		(2%)		
Hyperplasia, focal			2	(4%)	1	(2%)
Angiectasis Histiocytosis	1	(2%)				
				(2%)		

TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTE	ROL (VEH)	LOW	DOSE	HIG	h dose
IGESTIVE SYSTEM (Continued)						
#Liver/centrilobular	(50)		(48)		(46)	
Congestion, acute	(30)		(40)			(2%)
Degeneration, NOS			1	(2%)	1	(270)
Cytoplasmic change, NOS				(2%)	1	(2%)
Cytoplasmic vacuolization			1	(270)	1	(4%)
#Liver/periportal	(50)		(48)		(46)	(4170)
		(2%)	(40)		(40)	
Eosinophilic cyto change			(40)		(40)	
#Liver/hepatocytes	(50)		(48)	(00)	(46)	
Mitotic alteration	(70)		-	(2%)		
*Gallbladder	(50)		(49)		(49)	
Calculus, microscopic examination			1	(2%)		
Inflammation, granulomatous focal		(2%)				
Eosinophilic cyto change		(2%)				
#Pancreas	(47)		(44)		(42)	
Lymphocytic inflammatory infiltrate		(2%)				
Necrosis, fat		(2%)				
Hypoplasia, NOS		(4%)				
Atrophy, focal	1	(2%)				
Hyperplasia, NOS	1	(2%)				
Hyperplasia, focal					1	(2%)
#Esophagus	(47)		(48)		(44)	
Hyperkeratosis						(2%)
#Gastric fundal gland	(50)		(48)		(45)	(= /0 /
Dilatation, NOS	(00)			(6%)	(40)	
#Glandular stomach	(50)		(48)		(45)	
Ulcer, acute	(00)			(2%)	(40)	
#Forestomach	(50)		(48)	(270)	(45)	
Ulcer, NOS	(50)			(13%)		(4%)
Inflammation, focal						
				(2%) (50%)		(2%)
Inflammation, suppurative				(50%)	-	(42%)
Infection, fungal		(000)	-	(17%)		(13%)
Hyperkeratosis		(22%)		(58%)		(44%)
Acanthosis		(18%)		(58%)		(44%)
#Jejunum	(45)	(a ~)	(44)		(37)	
Ulcer, NOS	1	(2%)				
RINARY SYSTEM						
#Kidney	(50)		(49)		(49)	
Congestion, acute		-		(24.22)		(2%)
Lymphocytic inflammatory infiltrate		(52%)		(71%)	13	(27%)
Glomerulonephritis, subacute		(2%)	2	(4%)		
Infarct, healed	1	(2%)		(90)		
Hyperplasia, tubular cell	-	(9.77)	1	(2%)		
Metaplasia, osseous		(2%)				
#Kidney/interstitial tissue	(50)		(49)		(49)	
Inflammation, chronic				(2%)		
#Kidney/medulla	(50)		(49)		(49)	
Congestion, acute				(2%)		
#Renal papilla	(50)		(49)		(49)	
Necrosis, NOS				(2%)		
#Kidney/tubule	(50)		(49)		(49)	
Mineralization	2	(4%)			1	(2%)
Dilatation, NOS	6	(12%)	3	(6%)	4	(8%)
Cyst, NOS				(6%)		
Necrosis, focal	2	(4%)	-			
Cytoplasmic change, NOS					1	(2%)
Cytoplasmic vacuolization						(2%)
	0	100	4	(8%)		(6%)
Atrophy, focal	5	12%)	4			10/01

TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE
TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTR	ROL (VEH)	LOW	DOSE	HIG	H DOSE
URINARY SYSTEM (Continued)						
*Ureter	(50)		(49)		(49)	
Inflammation, suppurative		(2%)	()		(10)	
#Urinary bladder	(47)		(45)		(44)	
Distention	21	(45%)	20	(44%)	14	(32%)
Lymphocytic inflammatory infiltrate	6	(13%)	1	(2%)	6	(14%)
Inflammation, suppurative	1	(2%)				
Hyperplasia, epithelial		(2%)				
#Urinary bladder/submucosa	(47)		(45)		(44)	
Edema, NOS				(2%)		
*Urethra	(50)		(49)	((49)	
Obstruction, NOS		(4%)	-	(6%)	2	(4%)
Inflammation, suppurative	1	(2%)	1	(2%)		
Inflammation, chronic suppurative					1	(2%)
ENDOCRINE SYSTEM	· · · · · · · · · · · · · · · · · · ·					
#Anterior pituitary	(40)		(37)		(33)	
Cyst, NOS			1	(3%)		
Congestion, NOS					1	(3%)
Hyperplasia, NOS		(3%)				
Hyperplasia, focal		(5%)				
#Adrenal/capsule	(48)		(48)		(45)	
Hyperplasia, focal	38	(79%)	35	(73%)		(67%)
Hyperplasia, diffuse						(4%)
#Adrenal cortex	(48)		(48)		(45)	
Accessory structure			-	(4%)		
Eosinophilic cyto change		(4%)		(4%)	•	(10)
Hyperplasia, focal #Adrenal medulla		(15%)		(4%)		(4%)
	(48)	(6%)	(48)		(45)	
Hyperplasia, NOS #Thyroid		(0%)	(4.4)		(20)	
Follicular cyst, NOS	(42)	(2%)	(44)	(2%)	(39)	
Lymphocytic inflammatory infiltrate	1	(270)		(2%)		
Hyperplasia, follicular cell				(2%)	1	(3%)
#Parathyroid	(29)		(23)	(2,0)	(27)	(0.07
Cyst, NOS	(23)			(4%)	(21)	
						<u></u>
REPRODUCTIVE SYSTEM *Penis	(50)		(49)		(49)	
Ulcer, NOS		(4%)	(487)		(43)	
Inflammation, chronic focal		(2%)				
*Prepuce	(50)	,	(49)		(49)	
Inflammation, suppurative		(2%)	(40)			(2%)
Inflammation, chronic	-		1	(2%)		(2%)
Ulcer, chronic	1	(2%)	-		-	,
Hyperkeratosis	-	-			1	(2%)
*Preputial gland	(50)		(49)		(49)	
Retention of content			2	(4%)	1	(2%)
Inflammation, focal	1	(2%)				
Inflammation, suppurative				(6%)		(6%)
Inflammation, chronic				(2%)		(6%)
#Prostate	(46)		(40)		(42)	
Spermatocele	1	(2%)				
Hemorrhage				(3%)		
Lymphocytic inflammatory infiltrate		(7%)		(5%)		(5%)
Inflammation, suppurative		(7%)	4	(10%)	2	(5%)
Hyperplasia, focal		(2%)				
*Seminal vesicle	(50)		(49)	1021	(49)	
Distention	6	(12%)	5	(10%)	3	(6%)

TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE
TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTR	OL (VEH)	LOW	DOSE	HIG	H DOSE
REPRODUCTIVE SYSTEM (Continued)						
#Testis	(50)		(49)		(46)	
Atrophy, focal				(2%)		
Hyperplasia, interstitial cell	(50)			(6%)	(40)	
#Testis/tubule	(50)		(49)		(46)	(2%)
Mineralization			1	(2%)	1	(2%)
Degeneration, NOS #Spermatogonia	(50)		(49)	(270)	(46)	
Dysplasia, NOS		(2%)	(40)		(40)	
NERVOUS SYSTEM						
#Brain	(50)		(49)		(47)	
Mineralization		(32%)		(29%)		(28%)
Hydrocephalus, internal					1	(2%)
SPECIAL SENSE ORGANS						
*Eye/cornea	(50)		(49)		(49)	
Ulcer, chronic					-	(2%)
*Ear	(50)	(0.07.)	(49)		(49)	
Inflammation chronic suppurative	1	(2%)				
MUSCULOSKELETAL SYSTEM						
*Bone	(50)		(49)		(49)	
Osteosclerosis	-	(2%)				(2%)
*Knee joint	(50)		(49)		(49)	
Ankylosis	1	(2%)				(00)
Osteoarthritis	(50)		(10)		(49)	(2%)
*Tarsal joint	(50)	(100)	(49)	(100)	• /	(60)
Ankylosis *Skeletal muscle	9 (50)	(18%)	5 (49)	(10%)	3 (49)	(6%)
-Skeletal muscle Mineralization	(50)		(/	(4%)		(2%)
Inflammation, suppurative			2	(7 /0 /	-	(2%)
BODY CAVITIES						
*Mesentery	(50)		(49)		(49)	
Necrosis, fat	3	(6%)	2	(4%)	3	(6%)
ALL OTHER SYSTEMS	<u> </u>					
*Multiple organs	(50)		(49)		(49)	•
Lymphocytic inflammatory infiltrate	6	(12%)		(0~)		(10%)
Inflammation, suppurative			1	(2%)	1	(2%)
SPECIAL MORPHOLOGY SUMMARY						
Animal missing/no necropsy			1		1	

TABLE D1. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE IN THE
TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

* Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically.
 # Number of animals examined microscopically at this site

TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THETWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE

	CONTR	ROL (VEH)	LOW	DOSE	HIG	h dose
ANIMALS INITIALLY IN STUDY					50	
ANIMALS NECROPSIED	50		50		50	
ANIMALS EXAMINED HISTOPATHOLOGICALL	Y 50		50		50	
INTEGUMENTARY SYSTEM		<u> </u>				
*Skin	(50)		(50)		(50)	
Edema, NOS						(2%)
Inflammation, suppurative	1	(2%)			5	(10%)
Ulcer, chronic				(2%)		
Inflammation chronic suppurative	~	(1.4.01.)		(2%)		.00
Hyperkeratosis Acanthosis	7	(14%)		(8%) (2%)	4	(8%)
Acanthosis			1	(2%)		
RESPIRATORY SYSTEM				-		
#Lung	(50)		(50)		(50)	
Aspiration, foreign body		(901)			4	(8%)
Bronchiectasis Congestion, acute	1	(2%)			0	(1907)
Congestion, acute Hemorrhage	1	(2%)	0	(4%)	9	(18%)
Lymphocytic inflammatory infiltrate		(2%) (12%)		(4%) (26%)	0	(6%)
Inflammation, interstitial	0	(1470)		(26%) (2%)		(6%) (2%)
Inflammation, suppurative	1	(2%)		(2%)		(2%)
Hemosiderosis		(2%)	1	(270)	1	(470)
Histiocytosis		(4%)				
HEMATOPOIETIC SYSTEM			·			
#Brain/meninges	(50)		(50)		(50)	
Hyperplasia, lymphoid	(00)		(00)			(2%)
*Multiple organs	(50)		(50)		(50)	(2,0)
Leukemoid reaction		(2%)		(2%)	(00)	
Hyperplasia, lymphoid					3	(6%)
Hematopoiesis			1	(2%)		
*Blood erythrocytes	(50)		(50)		(50)	
Reticulocytosis			1	(2%)		
#Bone marrow	(48)		(50)		(49)	
Atrophy, NOS		(2%)	1	(2%)		
Histiocytosis		(2%)		(00%)	-	(100)
Myelofibrosis Hyporplacia arythroid	-	(31%)	15	(30%)		(12%)
Hyperplasia, erythroid Hyperplasia, granulocytic		(6%) (23%)	10	(38%)		(2%) (12%)
#Spleen	(49)	(23%)	(50)	(30%)	(50)	(14%)
Depletion, lymphoid		(10%)	<pre>< = - /</pre>	(18%)		(14%)
Hyperplasia, lymphoid		(29%)		(32%)		(26%)
#Splenic red pulp	(49)		(50)		(50)	
Congestion, NOS						(2%)
Hematopoiesis		(35%)		(44%)		(24%)
#Lymph node	(32)		(37)		(37)	
Hemorrhage	1	(3%)				
Abscess, NOS				(3%)	-	
Hyperplasia, lymphoid	(00)			(3%)		(3%)
#Mandibular lymph node	(32)		(37)	(201.)	(37)	
Inflammation, suppurative Plasma cell infiltrate			1	(3%)	1	(30)
Hemosiderosis	1	(3%)	. ,	(3%)	1	(3%)
Histiocytosis		(3%)	1	(0.70)		

	CONTROL (VE)	H) LOW DOSE	HIGH DOSE
HEMATOPOIETIC SYSTEM (Continued)	••••••••••••••••••••••••••••••••••••••		,
#Cervical lymph node	(32)	(37)	(37)
Inflammation, suppurative		1 (3%)	
#Mediastinal lymph node	(32)	(37)	(37)
Hemorrhage	2 (6%)		
Abscess, NOS		1 (3%)	
Plasma cell infiltrate		1 (3%)	
Hyperplasia, lymphoid			1 (3%)
#Pancreatic lymph node	(32)	(37)	(37)
Histiocytosis		1 (3%)	
#Mesenteric lymph node	(32)	(37)	(37)
Inflammation, suppurative	1 (3%)		
Plasma cell infiltrate		1 (3%)	
Inflammation, granulomatous focal			1 (3%)
Hyperplasia, lymphoid	1 (3%)		1 (3%)
#Renal lymph node	(32)	(37)	(37)
Inflammation, acute/chronic		1 (3%)	
Plasma cell infiltrate	1 (3%)		
#Liver	(49)	(50)	(49)
Hematopoiesis	15 (31%)	20 (40%)	9 (18%)
#Stomach wall	(47)	(49)	(49)
Hyperplasia, lymphoid		1 (2%)	
#Peyers patch	(43)	(47)	(46)
Hyperplasia, lymphoid			1 (2%)
#Adrenal cortex	(47)	(48)	(47)
Hematopoiesis	2 (4%)	5 (10%)	
#Thymus	(27)	(26)	(30)
Plasma cell infiltrate	1 (4%)		
Depletion, lymphoid	2 (7%)	3 (12%)	3 (10%)
Hyperplasia, lymphoid	1 (4%)	1 (4%)	
CIRCULATORY SYSTEM			
#Brain stem	(50)	(50)	(50)
Embolus, foreign body	1 (2%)	(())	
#Heart/atrium	(50)	(49)	(50)
Inflammation, acute/chronic		1 (2%)	
Inflammation, chronic focal	1 (2%)	1 (10)	
Inflammation, chronic suppurative	1 (2%)		
#Left ventricle	(50)	(49)	(50)
Thrombosis, NOS	· - · · /	1 (2%)	/
#Myocardium	(50)	(49)	(50)
Bacterial septicemia		1 (2%)	
Necrosis, focal		1 (2%)	
#Hepatic sinusoid	(49)	(50)	(49)
Dilatation, NOS		1 (2%)	1 (2%)
IGESTIVE SYSTEM		······································	
#Salivary gland	(48)	(48)	(47)
Mineralization	(40)	1 (2%)	1 (2%)
Lymphocytic inflammatory infiltrate	9 (19%)	7 (15%)	7 (15%)
#Liver	(49)	(50)	(49)
Lymphocytic inflammatory infiltrate	3 (6%)	2 (4%)	3 (6%)
Inflammation, suppurative	3 (0,0)	1 (2%)	J (U/V)
			1 (2%)
Inflammation, granulomatous focal		1 (901)	- (11/0)
Inflammation, granulomatous focal Fibrosis, focal		1 (2%)	
Fibrosis, focal	3 (6%)	1 (2%)	
Fibrosis, focal Necrosis, coagulative	3 (6%) 2 (4%)		1 (2%)
Fibrosis, focal	3 (6%) 2 (4%)	1 (2%) 1 (2%) 1 (2%)	1 (2%)

TABLE D2.SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE
TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTR	ROL (VEH)	LOW	DOSE	HIG	H DOSE
DIGESTIVE SYSTEM (Continued)				<u> </u>		
#Liver/centrilobular	(49)		(50)		(49)	
Necrosis, coagulative	,,			(2%)	,	
Cytoplasmic vacuolization	1	(2%)			1	(2%)
#Liver/Kupffer cell	(49)		(50)		(49)	
Hyperplasia, diffuse	()			(4%)	(/	
*Gallbladder	(50)		(50)	,	(50)	
Lymphocytic inflammatory infiltrate		(2%)	((,	
Plasma cell infiltrate			1	(2%)		
Hyperplasia, focal			ī	(2%)		
#Pancreas	(44)		(46)		(45)	
Lymphocytic inflammatory infiltrate	3	(7%)	1	(2%)	1	(2%)
Plasma cell infiltrate			1	(2%)		
Hypoplasia, NOS					1	(2%)
Atrophy, focal			1	(2%)		(2%)
Hyperplasia, focal	2	(5%)	-	-	-	
#Gastric fundal gland	(47)		(49)		(49)	
Dilatation, NOS		(2%)		(8%)		(2%)
#Glandular stomach	(47)		(49)	,	(49)	~ /0/
Multiple cysts	(41)		(40)		1	(2%)
Ulcer, chronic	1	(2%)			1	(2 /0)
Inflammation, chronic suppurative	1	(4,0)			2	(4%)
Necrosis, focal						(2%)
Eosinophilic cyto change			1	(2%)		(2%)
#Gastric submucosa	(47)		(49)	(270)	(49)	(270)
Inflammation, granulomatous focal	,	(2%)	(43)		(43)	
#Gastric subserosa	(47)		(49)		(49)	
Inflammation, suppurative	(=)			(2%)	(40)	
#Forestomach	(47)		(49)	(470)	(49)	
Ulcer. NOS	(11)		(- -)	(4%)		(12%)
Lymphocytic inflammatory infiltrate			2	(4-70)		(12%)
Inflammation, suppurative	F	(11%)	90	(500)	-	
Plasma cell infiltrate	5	(11%)		(59%)	21	(55%)
Infection, fungal	1	(90)		(2%)	0	(100)
Hyperkeratosis		(2%) (36%)		(31%) (80%)	-	(16%)
Acanthosis					-	(65%)
#Small intestine		(23%)		(76%)		(69%)
Inflammation, acute/chronic	(43)		(47)	(2%)	(46)	
Ulcer, chronic				(2%) (2 %)		
#Jejunum	(49)		-	(2%)	(46)	
Amyloid, NOS	(43)		(47)		(46)	(971)
#Colon	(43)		(42)		(44)	(2%)
Inflammation, granulomatous focal	(43)		(42)			(2%)
						(270)
RINARY SYSTEM						
#Kidney	(49)		(50)		(50)	
Hydronephrosis	-					(2%)
Lymphocytic inflammatory infiltrate	8	(16%)		(42%)	10	(20%)
Inflammation, suppurative	_	(100)		(4%)		
Glomerulonephritis, subacute		(10%)		(18%)	1	(2%)
Plasma cell infiltrate	3	(6%)	4	(8%)	-	
Infection, bacterial						(2%)
Infarct, healed					1	(2%)
Keratin pearl formation				(2%)		
#Kidney/cortex	(49)		(50)		(50)	
Necrosis, NOS						(2%)
Eosinophilic cyto change						(2%)
#Renal papilla	(49)		(50)		(50)	
Necrosis, NOS			3	(6%)	2	(4%)

TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE
TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTR	ROL (VEH)	LOW	DOSE	HIG	h dose
URINARY SYSTEM (Continued)					<u></u>	
#Kidney/glomerulus	(49)		(50)		(50)	
Inflammation, suppurative	1	(2%)				
#Kidney/tubule	(49)		(50)		(50)	
Dilatation, NOS			1	(2%)		
Cast, hemoglobin		(2%)	_	4		
Degeneration, granular	3	(6%)	_	(4%)		
Cytoplasmic change, NOS			1	(2%)		(0.01)
Cytoplasmic vacuolization				(00)		(2%)
Eosinophilic cyto change		(00)		(6%)		(4%)
Atrophy, focal Regeneration, NOS	3	(6%)		(4%)	4	(8%)
	(40)			(2%)	(50)	
#Kidney/pelvis Inflammation, suppurative	(49)		(50)	(00)	(50)	
#Urinary bladder	(48)		-	(2%)	(49)	
Distention	· · - ·		(42)		(43)	
Hemorrhage	1	(2%)	•	(2%)		
Lymphocytic inflammatory infiltrate	11	(23%)	_	(2%) (24%)	10	(23%)
		(20 //)				(2070)
INDOCRINE SYSTEM						
#Pituitary	(44)		(40)		(36)	
Angiectasis		(2%)			-	
#Anterior pituitary	(44)		(40)		(36)	
Congestion, NOS		(2%)			-	
Hyperplasia, focal		(5%)	-	(13%)	-	(8%)
#Adrenal/capsule	(47)		(48)		(47)	
Lymphocytic inflammatory infiltrate		(0)			1	(2%)
Plasma cell infiltrate		(2%)	A 4	(440)		
Hyperplasia, focal Hyperplasia, diffusa		(64%) (26%)		(44%)		(55%)
Hyperplasia, diffuse #Adrenal cortex		(36%)	-	(52%)		(45%)
#Adrenal cortex Hamartoma	(47)		(48)		(47)	(4%)
Lymphocytic inflammatory infiltrate						(4%) (2%)
Inflammation, suppurative	1	(2%)			1	(210)
Amyloid, NOS	ľ		5	(10%)	5	(11%)
Cytoplasmic vacuolization	1	(2%)		(2%)	5	(11/0)
Eosinophilic cyto change		(2%)		(6%)	Ę	(11%)
Hyperplasia, focal		(6%)	-	(2%)		(11%) (4%)
#Thyroid	(42)	(070)	(47)	(470)	(43)	(4/0)
Follicular cyst. NOS	(42)			(2%)		(2%)
Inflammation, focal			1	(2010)		(2%)
Hyperplasia, follicular cell	5	(12%)	1	(2%)		(2%)
#Pancreatic islets	(44)		(46)		(45)	
Hyperplasia, focal	(***)			(2%)	(30)	
EPRODUCTIVE SYSTEM		<u></u>		<u></u>		
*Mammary gland	(50)		(50)		(50)	
Inflammation, NOS	(00)			(2%)	(00)	
Lymphocytic inflammatory infiltrate	1	(2%)	-	(2%)		
#Uterus	(49)		(50)		(48)	
Inflammation, suppurative		(2%)		(2%)		(2%)
Inflammation, chronic suppurative		(2%)		(2%)	1	
#Cervix uteri	(49)		(50)		(48)	
Inflammation, suppurative		(2%)	,00)		(40)	
#Uterus/endometrium	(49)	·- ·- ·	(50)		(48)	
Congestion, NOS				(2%)	(10)	
Inflammation, suppurative	9	(18%)		(14%)	1	(2%)
Hyperplasia, cystic		(78%)		(88%)		(79%)
Angiectasis			1	(2%)	1	(2%)
Metaplasia, squamous					•	(2%)

TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTH	ROL (VEH)	LOW	DOSE	HIG	h dose
REPRODUCTIVE SYSTEM (Continued)						
#Endometrial stroma	(49)		(50)		(48)	
Hyperplasia, focal	1	(2%)		(2%)		
#Fallopian tube	(49)		(50)		(48)	
Lymphocytic inflammatory infiltrate		(2%)		(2%)		
Inflammation, suppurative Hyperplasia, intraductal	1	(2%)	1	(2%)		(4%)
#Ovary	(46)		(43)		(45)	(2%)
Cyst, NOS		(13%)		(28%)		(13%)
Hematoma, NOS	,			(20,0)		(2%)
Hematoma, organized			2	(5%)	-	
Hemorrhagic cyst					1	(2%)
Lymphocytic inflammatory infiltrate					1	(2%)
Inflammation, suppurative		(4%)		(2%)		
Abscess, NOS		(2%)		(5%)		.
Abscess, chronic	3	(7%)	8	(19%)		(2%)
Hyperplasia, granulosa cell					1	(2%)
NERVOUS SYSTEM				ann an 8549 ann		
#Brain	(50)		(50)		(50)	
Mineralization	20	(40%)	19	(38%)	12	(24%)
SPECIAL SENSE ORGANS						
*Eye	(50)		(50)		(50)	
Synechia, NOS	1	(2%)				
Phthisis bulbi				(2%)		
*Eye/cornea	(50)		(50)		(50)	
Inflammation, suppurative	1	(2%)				
IUSCULOSKELETAL SYSTEM						
*Bone	(50)		(50)		(50)	
Osteosclerosis		(8%)		(2%)		(4%)
*Joint of lower extremity	(50)		(50)		(50)	
Inflammation, active chronic				(2%)		
*Muscle of trunk	(50)		(50)		(50)	(00)
Necrosis, focal					1	(2%)
ODY CAVITIES						
*Mediastinum	(50)		(50)		(50)	
Abscess, NOS				(2%)		
*Peritoneum	(50)		(50)		(50)	
Inflammation, suppurative	(20)			(6%)	(20)	
*Peritoneal cavity Abscess, chronic	(50)		(50)	(4%)	(50)	
*Mesentery	(50)		(50)	(** 70)	(50)	
Hematoma, NOS		(2%)	(00)		(00)	
Inflammation, suppurative	-				1	(2%)
Plasma cell infiltrate	1	(2%)	1	(2%)	-	
Necrosis, fat		(2%)	-		5	(10%)

TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE
TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

TABLE D2. SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	CONTR	OL (VEH)	LOW	DOSE	HIGI	I DOSE
ALL OTHER SYSTEMS						
*Multiple organs	(50)		(50)		(50)	
Lymphocytic inflammatory infiltrate	25	(50%)	18	(36%)	20	(40%)
Inflammation, suppurative		•••••	4	(8%)	1	(2%)
Abscess, chronic				(2%)		
Site unknown						
Abscess, NOS					1	
Adipose tissue						
Necrosis, fat	1					

None

Number of animals receiving complete necropsy examination; all gross lesions including masses examined microscopically.
 Number of animals examined microscopically at this site

APPENDIX E

ANALYSES OF PRIMARY TUMORS IN RATS AND MICE IN THE TWO-YEAR GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE

	Vehicle Control	750 mg/kg	1,500 mg/kg
Skin: Squamous Cell Papilloma			<u></u>
Overall Rates (a)	3/50 (6%)	3/50 (6%)	3/50 (6%)
Adjusted Rates (b)	9.7%	10.5%	11.5%
Terminal Rates (c)	3/31 (10%)	2/27 (7%)	3/26 (12%)
Week of First Observation	104	102	104
Life Table Tests (d)	P = 0.495	P = 0.604	P = 0.581
Incidental Tumor Tests (d)	P = 0.558	P = 0.642N	P = 0.581
Cochran-Armitage Trend Test (d)	P = 0.583		
Fisher Exact Test (d)		P = 0.661	P = 0.661
kin: Papilloma or Squamous Cell Papillon	na		
Overall Rates (a)	3/50 (6%)	3/50 (6%)	4/50 (8%)
Adjusted Rates (b)	9.7%	10.5%	14.2%
Terminal Rates (c)	3/31 (10%)	2/27 (7%)	3/26 (12%)
Week of First Observation	104	102	94
Life Table Tests (d)	P = 0.341	P = 0.604	P = 0.420
Incidental Tumor Tests (d)	P = 0.444	P = 0.642N	P = 0.502
Cochran-Armitage Trend Test (d)	P = 0.421		
Fisher Exact Test (d)		P = 0.661	P = 0.500
kin: Basal Cell Tumor			
Overall Rates (a)	1/50 (2%)	0/50 (0%)	4/50 (8%)
Adjusted Rates (b)	3.2%	0.0%	12.3%
Terminal Rates (c)	1/31 (3%)	0/27 (0%)	2/26 (8%)
Week of First Observation	104		71
Life Table Tests (d)	P = 0.070	P = 0.528N	P = 0.152
Incidental Tumor Tests (d)	P = 0.086	P = 0.528N	P = 0.210
Cochran-Armitage Trend Test (d)	P = 0.082		
Fisher Exact Test (d)		P = 0.500 N	P = 0.181
kin: Basal Cell Tumor or Carcinoma			
Overall Rates (a)	1/50 (2%)	1/50 (2%)	4/50 (8%)
Adjusted Rates (b)	3.2%	2.3%	12.3%
Terminal Rates (c)	1/31 (3%)	0/27 (0%)	2/26 (8%)
Week of First Observation	104	76	71
Life Table Tests (d)	P = 0.088	P = 0.748	P = 0.152
Incidental Tumor Tests (d)	P = 0.102	P = 0.717N	P = 0.210
Cochran-Armitage Trend Test (d)	P = 0.101		
Fisher Exact Test (d)		P = 0.753	P = 0.181
ubcutaneous Tissue: Fibroma			
Overall Rates (a)	4/50 (8%)	0/50 (0%)	4/50 (8%)
Adjusted Rates (b)	11.8%	0.0%	12.2%
Terminal Rates (c)	3/31 (10%)	0/27 (0%)	1/26 (4%)
Week of First Observation	83		92
Life Table Tests (d)	P = 0.548	P = 0.079 N	P = 0.595
Incidental Tumor Tests (d)	P = 0.556N	P = 0.095 N	P = 0.585N
Cochran-Armitage Trend Test (d)	P = 0.588		
Fisher Exact Test (d)		P = 0.059 N	P = 0.643
tegumentary System: Fibroma			
Overall Rates (a)	4/50 (8%)	0/50 (0%)	5/50(10%)
Adjusted Rates (b)	11.8%	0.0%	15.7%
Terminal Rates (c)	3/31 (10%)	0/27(0%)	2/26 (8%)
Week of First Observation	83		92
Life Table Tests (d)	P = 0.373	P = 0.079 N	P = 0.443
Incidental Tumor Tests (d)	P = 0.437	P = 0.095 N	P = 0.551
Cochran-Armitage Trend Test (d)	P = 0.417		
Fisher Exact Test (d)		P = 0.059 N	P = 0.500

TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR GAVAGE STUDYOF AMPICILLIN TRIHYDRATE

	Vehicle Control	750 mg/kg	1,500 mg/kg
ntegumentary System: Fibroma or Fibro	sarcoma		<u></u>
Overall Rates (a)	4/50 (8%)	1/50 (2%)	5/50 (10%)
Adjusted Rates (b)	11.8%	3.1%	15.7%
Terminal Rates (c)	3/31 (10%)	0/27 (0%)	2/26 (8%)
Week of First Observation	83	99	92
Life Table Tests (d)	P = 0.371	P = 0.210N	P = 0.443
Incidental Tumor Tests (d)	P = 0.371 P = 0.491	P = 0.210 N P = 0.168 N	P = 0.443 P = 0.551
	P = 0.491 P = 0.421	r - 0.100.N	F = 0.551
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P=0.421	P = 0.181 N	P = 0.500
ung Alvalar/Branchialar Adanama			
ung: Alveolar/Bronchiolar Adenoma Overall Rates (a)	1/50 (2%)	2/40 (60)	1/50 (90)
		3/49 (6%)	1/50 (2%)
Adjusted Rates (b)	3.2%	8.8%	2.5%
Terminal Rates (c)	1/31 (3%)	1/27(4%)	0/26 (0%)
Week of First Observation	104	91	89
Life Table Tests (d)	P = 0.606	P = 0.303	P = 0.760
Incidental Tumor Tests (d)	P = 0.608	P = 0.325	P = 0.708
Cochran-Armitage Trend Test (d)	P = 0.609		
Fisher Exact Test (d)		P = 0.301	P = 0.753
ung: Alveolar/Bronchiolar Adenoma or (Carcinoma		
Overall Rates (a)	3/50 (6%)	4/49 (8%)	1/50 (2%)
Adjusted Rates (b)	9.2%	12.3%	2.5%
Terminal Rates (c)	2/31 (6%)	2/27 (7%)	0/26(0%)
Week of First Observation	93	91	89
Life Table Tests (d)		P = 0.480	
	P = 0.272N		P = 0.319N
Incidental Tumor Tests (d)	P = 0.223N	P = 0.579	P = 0.261 N
Cochran-Armitage Trend Test (d)	P = 0.253N		
Fisher Exact Test (d)		P = 0.489	P = 0.309 N
lematopoietic System: Mononuclear Cell	Leukemia		
Overall Rates (a)	5/50 (10%)	14/50 (28%)	13/50 (26%)
Adjusted Rates (b)	13.8%	41.9%	38.8%
Terminal Rates (c)	2/31 (6%)	8/27 (30%)	7/26 (27%)
Week of First Observation	83	89	63
Life Table Tests (d)	P = 0.024	P = 0.019	P = 0.029
Incidental Tumor Tests (d)	P = 0.069	P = 0.040	P = 0.025 P = 0.066
		r = 0.040	F = 0.000
Cochran-Armitage Trend Test (d)	P = 0.034	D-0.000	D-0.000
Fisher Exact Test (d)		P = 0.020	P=0.033
ematopoietic System: Leukemia		14/20 (00 2)	14/20 (00~)
Overall Rates (a)	5/50 (10%)	14/50 (28%)	14/50 (28%)
Adjusted Rates (b)	13.8%	41.7%	40.6%
Terminal Rates (c)	2/31 (6%)	8/27 (30%)	7/26 (27%)
Week of First Observation	83	89	63
Life Table Tests (d)	P = 0.015	P = 0.019	P=0.019
Incidental Tumor Tests (d)	P = 0.049	P = 0.040	P = 0.052
Cochran-Armitage Trend Test (d)	P = 0.020	· · · · · · · ·	
Fisher Exact Test (d)		P = 0.020	P=0.020
ematopoietic System: Leukemia or Lymp	phoma		
Overall Rates (a)	6/50 (12%)	16/50 (32%)	14/50 (28%)
Adjusted Rates (b)			
Terminal Rates (c)	16.4%	44.1%	40.6%
	2/31 (6%)	8/27 (30%)	7/26 (27%)
		58	63
Week of First Observation	83		D
Week of First Observation Life Table Tests (d)	P = 0.032	P = 0.017	P = 0.037
Week of First Observation Life Table Tests (d) Incidental Tumor Tests (d)			P = 0.037 P = 0.114
Week of First Observation Life Table Tests (d)	P = 0.032	P = 0.017	

TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	Vehicle Control	750 mg/kg	1,500 mg/kg
Pituitary Gland: Adenoma		<u></u>	<u></u>
Overall Rates (a)	11/46(24%)	18/49 (37%)	14/46 (30%)
Adjusted Rates (b)	35.1%	49.2%	44.4%
Terminal Rates (c)	10/30 (33%)	10/27 (37%)	10/26 (38%)
Week of First Observation	87	66	45
Life Table Tests (d)	P = 0.199	P = 0.073	P = 0.211
Incidental Tumor Tests (d)	P = 0.232	P=0.095	P = 0.207
Cochran-Armitage Trend Test (d)	P = 0.286		
Fisher Exact Test (d)		P = 0.128	P = 0.320
tuitary Gland: Adenoma or Carcinoma			
Overall Rates (a)	12/46(26%)	20/49 (41%)	16/46 (35%)
Adjusted Rates (b)	36.5%	53.8%	49.5%
Terminal Rates (c)	10/30 (33%)	11/27 (41%)	11/26(42%)
Week of First Observation	71	66	45
Life Table Tests (d)	P = 0.148	P = 0.054	P = 0.158
Incidental Tumor Tests (d)	P = 0.206	P = 0.089	P=0.181
Cochran-Armitage Trend Test (d)	P = 0.221		
Fisher Exact Test (d)		P = 0.096	P = 0.249
irenal Gland: Pheochromocytoma			
Overall Rates (a)	13/50 (26%)	12/50 (24%)	23/49(47%)
Adjusted Rates (b)	40.6%	39.6%	75.8%
Terminal Rates (c)	12/31 (39%)	9/27 (33%)	19/26 (73%)
Week of First Observation	103	95	80
Life Table Tests (d)	P = 0.003	P = 0.543	P = 0.004
Incidental Tumor Tests (d)	P = 0.008	P = 0.445N	P = 0.007
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.017	P = 0.500N	P = 0.025
drenal Gland: Malignant Pheochromocyto			
Overall Rates (a)	1/50 (2%)	5/50 (10%)	1/49 (2%)
Adjusted Rates (b)	3.2%	17.0%	3.8%
Terminal Rates (c)	1/31 (3%)	4/27 (15%)	1/26 (4%)
Week of First Observation	104	89	104
Life Table Tests (d)	P = 0.537	P = 0.084	P = 0.723
Incidental Tumor Tests (d)	P = 0.507	P = 0.065	P = 0.723
Cochran-Armitage Trend Test (d)	P = 0.585	D-0 100	D - 0 7 49
Fisher Exact Test (d)		P = 0.102	P = 0.748
irenal Gland: Pheochromocytoma or Mal Overall Rates (a)			99/40 (470)
	13/50 (26%)	16/50 (32%)	23/49 (47%) 75 8%
Adjusted Rates (b) Terminal Rates (c)	40.6%	50.9%	75.8%
	12/31 (39%) 103	12/27 (44%) 89	19/26 (73%) 80
Week of First Observation Life Table Tests (d)	103 P=0.004	P = 0.200	P = 0.004
Incidental Tumor Tests (d)	P = 0.004 P = 0.007	P = 0.200 P = 0.325	P = 0.004 P = 0.007
Cochran-Armitage Trend Test (d)	P = 0.007 P = 0.019	1 -0.040	1 - 0.007
Fisher Exact Test (d)	A - VIVEU	P=0.330	P = 0.025
yroid Gland: C-Cell Adenoma			
Overall Rates (a)	2/50 (4%)	3/48 (6%)	1/46 (2%)
Adjusted Rates (b)	6.5%	8.6%	3.8%
Terminal Rates (c)	2/31 (6%)	1/27 (4%)	1/26 (4%)
Week of First Observation	104	89	104
Life Table Tests (d)	P = 0.428N	P = 0.485	P = 0.562N
		P = 0.340	P = 0.562N
Incidental Tumor Tests (d)	P=0.518N	F-U.04V	I - U.DUZIN
Incidental Tumor Tests (d) Cochran-Armitage Trend Test (d)	P = 0.518N P = 0.432N	r - 0.340	1 = 0.00210

TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	Vehicle Control	750 mg/kg	1,500 mg/kg
hyroid Gland: C-Cell Carcinoma			
Overall Rates (a)	0/50 (0%)	3/48 (6%)	2/46 (4%)
Adjusted Rates (b)	0.0%	11.1%	6.9%
Terminal Rates (c)	0/31 (0%)	3/27(11%)	1/26 (4%)
Week of First Observation	0.01 (0.0)	104	96
Life Table Tests (d)	P = 0.168	P = 0.097	P = 0.220
Incidental Tumor Tests (d)	P = 0.204	P = 0.097	P = 0.328
Cochran-Armitage Trend Test (d)	P = 0.180	1 -0.001	1 - 0.520
Fisher Exact Test (d)	1 - 0.100	P = 0.114	P = 0.227
hyroid Gland: C-Cell Adenoma or Carci	noma		
Overall Rates (a)	2/50 (4%)	6/48 (13%)	3/46 (7%)
Adjusted Rates (b)	6.5%	19.2%	10.6%
Terminal Rates (c)	2/31(6%)	4/27 (15%)	2/26 (8%)
Week of First Observation	104	89	96
Life Table Tests (d)	P = 0.369	P = 0.114	P = 0.436
Incidental Tumor Tests (d)	P = 0.345	P = 0.062	P = 0.528
Cochran-Armitage Trend Test (d)	P = 0.378	1 = 0.002	1 - 0.020
Fisher Exact Test (d)	1 -0.010	P = 0.121	P = 0.460
ancreatic Islets: Islet Cell Adenoma			
Overall Rates (a)	5/47 (11%)	0/45 (0%)	2/49 (4%)
Adjusted Rates (b)	16.1%	0.0%	7.7%
Terminal Rates (c)	5/31 (16%)	0/27 (0%)	2/26 (8%)
Week of First Observation	104	0/21 (0/0/	104
Life Table Tests (d)	P = 0.160N	P = 0.045N	P = 0.289N
Incidental Tumor Tests (d)	P = 0.160N	P = 0.045N	P = 0.289N
Cochran-Armitage Trend Test (d)	P = 0.111N	r -0.04010	r = 0.2651
Fisher Exact Test (d)	P = 0.111 M	P = 0.031 N	P = 0.201 N
ancreatic Islets: Islet Cell Adenoma or	Carcinoma		
Overall Rates (a)	6/47 (13%)	0/45(0%)	3/49 (6%)
Adjusted Rates (b)	19.4%	0.0%	11.5%
Terminal Rates (c)	6/31 (19%)	0/27(0%)	3/26 (12%)
Week of First Observation	104		104
Life Table Tests (d)	P = 0.201 N	P = 0.025 N	P = 0.331 N
Incidental Tumor Tests (d)	P = 0.201 N	P = 0.025N	P = 0.331N
Cochran-Armitage Trend Test (d)	P = 0.136N	1 0.0101011	1 - 0.00111
Fisher Exact Test (d)	1 - 0.10011	P = 0.015 N	P = 0.223 N
estis: Interstitial Cell Tumor			
Overall Rates (a)	32/50 (64%)	30/49 (61%)	31/50 (62%)
Adjusted Rates (b)	94.1%	88.0%	83.4%
Terminal Rates (c)	29/31 (94%)	23/27 (85%)	20/26 (77%)
Week of First Observation	85	76	63
Life Table Tests (d)	P = 0.260	P = 0.442	P = 0.311
Incidental Tumor Tests (d)	P = 0.509N	P = 0.442 P = 0.533N	P = 0.576N
		r - 0.00011	r - 0.01014
Cochran-Armitage Trend Test (d)	P = 0.459 N		

TABLE E1. ANALYSIS OF PRIMARY TUMORS IN MALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

(a) Number of tumor-bearing animals/number of animals examined at the site

(b) Kaplan-Meier estimated tumor incidence at the end of the study after adjusting for intercurrent mortality

(c) Observed tumor incidence at terminal kill

⁽d) Beneath the vehicle control incidence are the P values associated with the trend test. Beneath the dosed group incidence are the P values corresponding to pairwise comparisons between that dosed group and the vehicle controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as nonfatal. The Cochran-Armitage and Fisher exact tests compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

	Vehicle Control	750 mg/kg	1,500 mg/kg
Subcutaneous Tissue: Fibroma			
Overall Rates (a)	3/50 (6%)	1/50 (2%)	3/50 (6%)
Adjusted Rates (b)	9.4%	3.0%	7.7%
Terminal Rates (c)	3/32 (9%)	1/33 (3%)	1/31 (3%)
Week of First Observation	104	104	93
Life Table Tests (d)	P = 0.590	P = 0.293N	P = 0.659
Incidental Tumor Tests (d)	P = 0.557N	P = 0.293N	P = 0.628N
Cochran-Armitage Trend Test (d)	P = 0.594		
Fisher Exact Test (d)	1 - 0.034	P = 0.309 N	P = 0.661
ubcutaneous Tissue: Fibroma or Fibrosa	rcoma		
Overall Rates (a)	3/50 (6%)	1/50 (2%)	4/50 (8%)
Adjusted Rates (b)	9.4%	3.0%	10.3%
Terminal Rates (c)	3/32 (9%)	1/33 (3%)	1/31 (3%)
Week of First Observation	104	104	93
Life Table Tests (d)	P = 0.410	P = 0.293 N	P = 0.498
Incidental Tumor Tests (d)	P = 0.467	P = 0.293N	P = 0.557
Cochran-Armitage Trend Test (d)	P = 0.412		
Fisher Exact Test (d)		P = 0.309 N	P = 0.500
Iematopoietic System: Mononuclear Cell	Leukemia		
Overall Rates (a)	14/50 (28%)	19/50 (38%)	15/50 (30%)
Adjusted Rates (b)	36.1%	50.9%	36.7%
Terminal Rates (c)	8/32 (25%)	15/33 (45%)	7/31 (23%)
Week of First Observation	86	54	74
Life Table Tests (d)	P = 0.443	P = 0.215	P = 0.489
Incidental Tumor Tests (d)	P = 0.531	P = 0.098	P = 0.576
Cochran-Armitage Trend Test (d)	P = 0.457		
Fisher Exact Test (d)		P = 0.198	P = 0.500
Pituitary Gland: Adenoma			
Overall Rates (a)	18/49 (37%)	20/50 (40%)	22/49 (45%)
Adjusted Rates (b)	47.2%	51.8%	59.2%
Terminal Rates (c)	12/31 (39%)	15/33 (45%)	16/31 (52%)
Week of First Observation	74	71	91
Life Table Tests (d)	P = 0.252	P = 0.460	P = 0.282
Incidental Tumor Tests (d)	P = 0.253	P=0.491	P = 0.296
Cochran-Armitage Trend Test (d)	P = 0.236		
Fisher Exact Test (d)		P = 0.449	P = 0.269
ituitary Gland: Carcinoma			
Overall Rates (a)	0/49(0%)	3/50 (6%)	3/49 (6%)
Adjusted Rates (b)	0.0%	8.4%	9.7%
Terminal Rates (c)	0/31 (0%)	1/33 (3%)	3/31 (10%)
Week of First Observation		90	104
Life Table Tests (d)	P = 0.104	P = 0.122	P = 0.120
Incidental Tumor Tests (d)	P = 0.106	P=0.090	P = 0.120
Cochran-Armitage Trend Test (d)	P = 0.100		
Fisher Exact Test (d)		P = 0.125	P = 0.121
ituitary Gland: Adenoma or Carcinoma			
Overall Rates (a)	18/49 (37%)	23/50 (46%)	25/49(51%)
Adjusted Rates (b)	47.2%	56.9%	67.3%
Terminal Rates (c)	12/31 (39%)	16/33 (48%)	19/31 (61%)
Week of First Observation	74	71	91
Life Table Tests (d)	P = 0.113	P = 0.255	P = 0.126
Incidental Tumor Tests (d)	P = 0.103	P = 0.244	P = 0.127
Cochran-Armitage Trend Test (d)	P=0.093		
Oben an-Armitage Hend Test (u/	1 = 0.000		

TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE

Adjusted Rates (b) 3.1% 9 Terminal Rates (c) $1/32(3\%)$ 3 Week of First Observation 104 1 Life Table Tests (d) $P=0.118$ F Incidental Tumor Tests (d) $P=0.114$ F Cochran-Armitage Trend Test (d) $P=0.127$ F Fisher Exact Test (d) $P=0.127$ F Adjusted Rates (a) 3.1% 99 Perminal Rates (a) 3.1% 99 Adjusted Rates (b) 3.1% 99 Terminal Rates (c) $1/32(3\%)$ 33 Week of First Observation 104 11 Life Table Tests (d) $P=0.060$ P Inife Table Tests (d) $P=0.067$ P Cochran-Armitage Trend Test (d) $P=0.394$ P Incidental Tumor Tests (d) $P=0.435$ P Cochran-Armitage Trend Test (d) $P=0.436$ P Incidental Tumor Tests (d) $P=0.436$ P Incidental Tumor Tests (d) $P=0.273$ 3 Week of First Observation 98 11 Life Table Tests (d) $P=0.265$ P Incidental Tumor Tests (d) $P=0.265$ P Incidental Tumor Tests (d) $P=0.265$ P Incidental Tumor Tests (d) $P=0.273$ P Testher Exact Test (d) $P=0.214$ P Incidental Tumor Tests (d)<	750 mg/kg	1,500 mg/kg
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Terminal Rates (c) $1/32 (3\%)$ 33Week of First Observation1041Life Table Tests (d)P=0.118FIncidental Tumor Tests (d)P=0.114FCochran-Armitage Trend Test (d)P=0.127Fisher Exact Test (d)Fderenal Gland: Cortical Adenoma or CarcinomaOverall Rates (a)Overall Rates (a)1/50 (2%)3Adjusted Rates (b)3.1%9Terminal Rates (c)1/32 (3%)3Week of First Observation1041Life Table Tests (d)P=0.060FIncidental Tumor Tests (d)P=0.057FCochran-Armitage Trend Test (d)P=0.067FFisher Exact Test (d)P=0.067Fdrenal Gland: PheochromocytomaOverall Rates (a)3/50 (6%)3Adjusted Rates (b)8.3%9TTerminal Rates (c)1/32 (3%)3Week of First Observation981Life Table Tests (d)P=0.394PPIncidental Tumor Tests (d)P=0.455PCochran-Armitage Trend Test (d)P=0.455PPIncidental Rates (a)3/50 (6%)3Adjusted Rates (b)8.3%9TTIncidental Rates (a)3/50 (6%)3Adjusted Rates (b)8.3%9TTFIncidental Tumor Tests (d)P=0.265PPIncidental Rates (a)3/50 (6%)3Adjusted Rates (b)8.3%9TTTCochran-Armitage T	9.1%	11.9%
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Life Table Tests (d) $P=0.118$ F Incidental Tumor Tests (d) $P=0.114$ F Cochran-Armitage Trend Test (d) $P=0.127$ Fisher Exact Test (d) $P=0.127$ Fisher Exact Test (d) $P=0.127$ drenal Gland: Cortical Adenoma or Carcinoma Overall Rates (a) $1/50 (2\%)$ 3 Adjusted Rates (b) 3.1% 9 Terminal Rates (c) $1/32 (3\%)$ 3 Week of First Observation 104 1 Life Table Tests (d) $P=0.060$ F Incidental Tumor Tests (d) $P=0.067$ Fisher Exact Test (d) $P=0.067$ Fisher Exact Test (d) $P=0.067$ Gotran-Armitage Trend Test (d) $P=0.067$ Fisher Exact Test (d) $P=0.33\%$ 9 Terminal Rates (c) $1/32 (3\%)$ 3 Week of First Observation 98 1 Life Table Tests (d) $P=0.394$ P Incidental Tumor Tests (d) $P=0.394$ P Incidental Tumor Tests (d) $P=0.455$ P Cochran-Armitage Trend Test (d) $P=0.455$ P Cochran-Armitage Trend Test (d) $P=0.410$ F Fisher Exact Test (d) $P=0.410$ F Incidental Tumor Tests (d) $P=0.410$ F Incidental Tumor Tests (d) $P=0.265$ P Cochran-Armitage Trend Test (d) $P=0.265$ P Incidental Tumor Tests (d) $P=0.265$ P Cochran-Armitage Trend Test (d) $P=0.265$ P Incidental Tumor Tests (d) $P=0.265$ P Incidental Tumor Tests (d) $P=0.273$ Fisher Exact Test (d) $P=0.273$ F Incidental Tumor Tests (d) $P=0.214$ P Incidental Tumor Tests (d) $P=0.228$ F Fisher Exact Test (d) $P=0.228$	104	76
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Incidental Tumor Tests (d) $P = 0.331$ P Cochran-Armitage Trend Test (d) $P = 0.273$ Fisher Exact Test (d) P ancreatic Islets: Islet Cell Adenoma or CarcinomaOverall Rates (a) $0/48 (0\%)$ Adjusted Rates (b) 0.0% Terminal Rates (c) $0/32 (0\%)$ Week of First Observation 57 Life Table Tests (d) $P = 0.214$ Incidental Tumor Tests (d) $P = 0.209$ Cochran-Armitage Trend Test (d) $P = 0.228$ Fisher Exact Test (d) $P = 0.228$ Fisher Exact Test (d) P Coverall Rates (a) $16/50 (32\%)$ Adjusted Rates (b) 42.6% Adjusted Rates (b) 42.6% Week of First Observation 27 Adjusted Rates (c) $11/32 (34\%)$ 20 20 Week of First Observation 27	04	
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Fisher Exact Test (d)Pancreatic Islets: Islet Cell Adenoma or Carcinoma $0/48 (0\%)$ Overall Rates (a) $0/48 (0\%)$ Adjusted Rates (b) 0.0% Terminal Rates (c) $0/32 (0\%)$ Week of First Observation 5 Life Table Tests (d) $P = 0.214$ Incidental Tumor Tests (d) $P = 0.209$ Cochran-Armitage Trend Test (d) $P = 0.228$ Fisher Exact Test (d) $P = 0.228$ Overall Rates (a) $16/50 (32\%)$ Overall Rates (b) 42.6% Adjusted Rates (b) 42.6% Terminal Rates (c) $11/32 (34\%)$ Week of First Observation 93	P = 0.550	P = 0.417
ancreatic Islets: Islet Cell Adenoma or CarcinomaOverall Rates (a) $0/48 (0\%)$ 4,Adjusted Rates (b) 0.0% 1Terminal Rates (c) $0/32 (0\%)$ 3,Week of First Observation53Life Table Tests (d) $P = 0.214$ PIncidental Tumor Tests (d) $P = 0.209$ PCochran-Armitage Trend Test (d) $P = 0.228$ Fisher Exact Test (d) $P = 0.228$ Gland: Fibroadenoma $0verall Rates (a)$ $16/50 (32\%)$ Overall Rates (a) 42.6% 66 Terminal Rates (c) $11/32 (34\%)$ 20 Week of First Observation 93 $7'$		
Overall Rates (a) $0/48 (0\%)$ $4.$ Adjusted Rates (b) 0.0% $1.$ Terminal Rates (c) $0/32 (0\%)$ $3.$ Week of First Observation $5.$ Life Table Tests (d) $P = 0.214$ P Incidental Tumor Tests (d) $P = 0.209$ P Cochran-Armitage Trend Test (d) $P = 0.228$ Fisher Exact Test (d) $P = 0.228$ Coverall Rates (a) $16/50 (32\%)$ $2.$ Adjusted Rates (b) 42.6% $66.$ Terminal Rates (c) $11/32 (34\%)$ $2.$ Week of First Observation 93 $7'$	P=0.661	P = 0.346
Adjusted Rates (b) 0.0% 1Terminal Rates (c) $0/32 (0\%)$ $3/3$ Week of First Observation 51 Life Table Tests (d) $P = 0.214$ PIncidental Tumor Tests (d) $P = 0.209$ PCochran-Armitage Trend Test (d) $P = 0.228$ PFisher Exact Test (d) $P = 0.228$ PCommany Gland: Fibroadenoma 0 0 Overall Rates (a) $16/50 (32\%)$ 22 Adjusted Rates (b) 42.6% 66 Terminal Rates (c) $11/32 (34\%)$ 20 Week of First Observation 93 $7'$	110.000	• · · • • · · · · ·
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Week of First Observation53Life Table Tests (d) $P = 0.214$ PIncidental Tumor Tests (d) $P = 0.209$ PCochran-Armitage Trend Test (d) $P = 0.228$ Fisher Exact Test (d) $P = 0.228$ Commary Gland: Fibroadenoma 0 Overall Rates (a) $16/50 (32\%)$ 23 Adjusted Rates (b) 42.6% 64 Terminal Rates (c) $11/32 (34\%)$ 20 Week of First Observation 93 $7'$	1.0%	6.5%
Life Table Tests (d) $P = 0.214$ P Incidental Tumor Tests (d) $P = 0.209$ P Cochran-Armitage Trend Test (d) $P = 0.228$ Fisher Exact Test (d) P Cammary Gland: Fibroadenoma $Overall Rates (a)$ $16/50 (32\%)$ Overall Rates (a) $16/50 (32\%)$ 24 Adjusted Rates (b) 42.6% 64 Terminal Rates (c) $11/32 (34\%)$ 20 Week of First Observation 93 $7'$	/33 (9%)	2/31 (6%)
Incidental Tumor Tests (d) $P = 0.209$ P Cochran-Armitage Trend Test (d) $P = 0.228$ Fisher Exact Test (d) P fammary Gland: Fibroadenoma P Overall Rates (a) $16/50 (32\%)$ 22 Adjusted Rates (b) 42.6% 66 Terminal Rates (c) $11/32 (34\%)$ 20 Week of First Observation 93 $7'$	9	104
Cochran-Armitage Trend Test (d)P=0.228Fisher Exact Test (d)Pammary Gland: FibroadenomaPOverall Rates (a)16/50 (32%)Adjusted Rates (b)42.6%Terminal Rates (c)11/32 (34%)Week of First Observation93	P=0.067	P = 0.231
Fisher Exact Test (d)Panmary Gland: Fibroadenoma16/50 (32%)23Overall Rates (a)16/50 (32%)23Adjusted Rates (b)42.6%66Terminal Rates (c)11/32 (34%)26Week of First Observation937'	°=0.084	P = 0.231
Fisher Exact Test (d)Pammary Gland: Fibroadenoma23Overall Rates (a)16/50 (32%)Adjusted Rates (b)42.6%Terminal Rates (c)11/32 (34%)Week of First Observation93		
Overal Rates (a) 16/50 (32%) 23 Adjusted Rates (b) 42.6% 66 Terminal Rates (c) 11/32 (34%) 26 Week of First Observation 93 7	=0.061	P = 0.253
Overall Rates (a) 16/50 (32%) 23 Adjusted Rates (b) 42.6% 63 Terminal Rates (c) 11/32 (34%) 26 Week of First Observation 93 7'		
Adjusted Rates (b) 42.6% 64 Terminal Rates (c) 11/32 (34%) 20 Week of First Observation 93 7'	5/50 (50%)	19/50 (38%)
Terminal Rates (c) 11/32 (34%) 20 Week of First Observation 93 7'	5.4%	49.5%
Week of First Observation 93 7'	0/33 (61%)	12/31 (39%)
		84
Life Table Tests (d) $P = 0.288$ P	r = 0.063	P = 0.323
	2=0.019	P = 0.402
Cochran-Armitage Trend Test (d) P=0.305 Fisher Exact Test (d) P	= 0.052	P=0.338

TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

TABLE E2. ANALYSIS OF PRIMARY TUMORS IN FEMALE RATS IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	Vehicle Control	750 mg/kg	1,500 mg/kg
Clitoral Gland: Adenoma or Adenocarci	noma		
Overall Rates (a)	1/50 (2%)	0/50 (0%)	3/50 (6%)
Adjusted Rates (b)	2.4%	0.0%	9.1%
Terminal Rates (c)	0/32 (0%)	0/33 (0%)	2/31 (6%)
Week of First Observation	93		102
Life Table Tests (d)	P = 0.177	P = 0.520 N	P = 0.304
Incidental Tumor Tests (d)	P = 0.225	P = 0.662 N	P = 0.351
Cochran-Armitage Trend Test (d)	P = 0.176		
Fisher Exact Test (d)		P = 0.500 N	P = 0.309
Clitoral Gland: Adenoma, Squamous Cel	l Papilloma, Adenocarcino	ma, or Carcinoma	(e)
Overall Rates (a)	2/50 (4%)	1/50 (2%)	3/50 (6%)
Adjusted Rates (b)	5.5%	2.2%	9.1%
Terminal Rates (c)	1/32(3%)	0/33 (0%)	2/31 (6%)
Week of First Observation	93	77	102
Life Table Tests (d)	P = 0.398	P = 0.511N	P = 0.493
Incidental Tumor Tests (d)	P = 0.442	P = 0.528N	P = 0.543
Cochran-Armitage Trend Test (d)	P = 0.399		- 0.010
Fisher Exact Test (d)		P = 0.500 N	P = 0.500
Iterus: Endometrial Stromal Polyp			
Overall Rates (a)	6/50 (12%)	5/50 (10%)	1/49 (2%)
Adjusted Rates (b)	18.0%	14.3%	3.2%
Terminal Rates (c)	5/32 (16%)	4/33 (12%)	1/31 (3%)
Week of First Observation	102	87	104
Life Table Tests (d)	P = 0.052N	P = 0.494N	P = 0.064 N
Incidental Tumor Tests (d)	P = 0.053N	P = 0.520N	P = 0.056N
Cochran-Armitage Trend Test (d)	P = 0.051 N	0.04011	1 -0.00011
Fisher Exact Test (d)	1 - 0.0011	P = 0.500 N	P = 0.059N
terus: Endometrial Stromal Polyp or S	arcoma		
Overall Rates (a)	8/50 (16%)	5/50 (10%)	1/49 (2%)
Adjusted Rates (b)	21.4%	14.3%	1/49(2%) 3.2%
Terminal Rates (c)	5/32 (16%)	4/33 (12%)	3.2% 1/31(3%)
Week of First Observation	51	4/33 (1 <i>2%)</i> 87	1/31 (3%)
Life Table Tests (d)	P = 0.015N	P = 0.283N	P = 0.022N
Incidental Tumor Tests (d)	P = 0.019N P = 0.019N	P = 0.283 N P = 0.251 N	P = 0.022N P = 0.039N
Cochran-Armitage Trend Test (d)	P = 0.019 N P = 0.014 N	F - 0.2011	r - 0.039N
Fisher Exact Test (d)	F -+ 0.01411	P = 0.277 N	P = 0.017 N
I ISHCI WAALLIESU(U)		r = 0.2771	P = 0.017 N

(a) Number of tumor-bearing animals/number of animals examined at the site

(b) Kaplan-Meier estimated tumor incidence at the end of the study after adjusting for intercurrent mortality

(c) Observed tumor incidence at terminal kill

(d) Beneath the vehicle control incidence are the P values associated with the trend test. Beneath the dosed group incidence are the P values corresponding to pairwise comparisons between that dosed group and the vehicle controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as nonfatal. The Cochran-Armitage and Fisher exact tests compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

(e) Includes preputial gland tumors

	Vehicle Control	1,500 mg/kg	3,000 mg/kg
Subcutaneous Tissue: Fibrosarcoma		·····	······································
Overall Rates (a)	2/50 (4%)	7/49 (14%)	5/49 (10%)
Adjusted Rates (b)	6.3%	23.5%	18.1%
Terminal Rates (c)	2/32 (6%)	2/21 (10%)	2/20 (10%)
Week of First Observation	104	81	69
			P = 0.111
Life Table Tests (d)	P = 0.092	P = 0.041	
Incidental Tumor Tests (d)	P = 0.226	P = 0.106	P = 0.210
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.186	P = 0.075	P = 0.210
Subcutaneous Tissue; Fibroma or Fibrosa	Ircoma		
Overall Rates (a)	3/50 (6%)	7/49 (14%)	5/49 (10%)
Adjusted Rates (b)	8.9%	23.5%	18.1%
			2/20 (10%)
Terminal Rates (c)	2/32 (6%)	2/21 (10%)	
Week of First Observation	87	81	69
Life Table Tests (d)	P = 0.163	P = 0.091	P = 0.209
Incidental Tumor Tests (d)	P = 0.373	P = 0.209	P = 0.385
Cochran-Armitage Trend Test (d)	P=0.297		
Fisher Exact Test (d)		P = 0.151	P = 0.346
Subcutaneous Tissue: Sarcoma or Fibrosa			
Overall Rates (a)	2/50(4%)	8/49 (16%)	5/49 (10%)
Adjusted Rates (b)	6.3%	25.5%	18.1%
Terminal Rates (c)	2/32 (6%)	2/21 (10%)	2/20 (10%)
Week of First Observation	104	77	69
Life Table Tests (d)	P = 0.097	P = 0.024	P = 0.111
Incidental Tumor Tests (d)	P = 0.254	P = 0.064	P = 0.210
		1 = 0.004	1 = 0.210
Cochran-Armitage Trend Test (d) Fisher Exact Test (d)	P = 0.193	P = 0.043	P=0.210
Subcutaneous Tissue: Fibroma, Sarcoma,	or Fibrosarcoma		
Overall Rates (a)	3/50 (6%)	8/49 (16%)	5/49 (10%)
Adjusted Rates (b)	8.9%	25.5%	18.1%
Terminal Rates (c)	2/32 (6%)	2/21 (10%)	2/20 (10%)
Week of First Observation	87	77	69
Life Table Tests (d)	P = 0.167	P = 0.057	P = 0.209
Incidental Tumor Tests (d)	P = 0.402	P = 0.132	P = 0.385
Cochran-Armitage Trend Test (d)	P = 0.301		
Fisher Exact Test (d)		P = 0.094	P = 0.346
ung: Alveolar/Bronchiolar Adenoma			
Overall Rates (a)	1/50 (2%)	3/49 (6%)	1/47(2%)
Adjusted Rates (b)	3.1%	11.4%	5.0%
Terminal Rates (c)	1/32(3%)	1/21 (5%)	1/20 (5%)
Week of First Observation	104	96	104
Life Table Tests (d)	P = 0.466	P = 0.213	P = 0.654
Incidental Tumor Tests (d)	P = 0.552	P = 0.439	P = 0.654
Cochran-Armitage Trend Test (d)	P = 0.588	A = 0.300	1 01004
Fisher Exact Test (d)	r - 0.000	P = 0.301	P=0.737
ung: Alveolar/Bronchiolar Carcinoma			
Overall Rates (a)	5/50(10%)	3/49 (6%)	2/47 (4%)
Adjusted Rates (b)	15.6%	12.4%	10.0%
Terminal Rates (c)	5/32 (16%)	2/21 (10%)	2/20 (10%)
Week of First Observation	104	94	104
Life Table Tests (d)	P = 0.351 N	P = 0.575N	P = 0.437N
Incidental Tumor Tests (d)	P = 0.321 N	P = 0.482N	P = 0.437 N
Cochran-Armitage Trend Test (d)	P = 0.178N		
Fisher Exact Test (d)	$\Gamma \rightarrow 0.17014$	P=0.369N	P = 0.244 N

TABLE E3. ANALYSIS OF PRIMARY TUMORS IN MALE MICE IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE

	Vehicle Control	1,500 mg/kg	3,000 mg/kg
Lung: Alveolar/Bronchiolar Adenoma or	Carcinoma		
Overall Rates (a)	6/50 (12%)	6/49 (12%)	3/47 (6%)
Adjusted Rates (b)	18.8%	22.7%	15.0%
Terminal Rates (c)	6/32 (19%)	3/21 (14%)	3/20 (15%)
Week of First Observation	104	94	104
Life Table Tests (d)	P = 0.461 N	P = 0.370	P = 0.511N
Incidental Tumor Tests (d)	P = 0.383N	P = 0.611	P = 0.511N
Cochran-Armitage Trend Test (d)	P = 0.232N		
Fisher Exact Test (d)		P = 0.606	P = 0.275N
Iematopoietic System: Malignant Lymph	oma, Lymphocytic Type		
Overall Rates (a)	3/50 (6%)	2/49 (4%)	2/49 (4%)
Adjusted Rates (b)	9.4%	9.5%	8.4%
Terminal Rates (c)	3/32 (9%)	2/21 (10%)	1/20 (5%)
Week of First Observation	104	104	97
Life Table Tests (d)	P = 0.583	P = 0.676	P = 0.677
Incidental Tumor Tests (d)	P = 0.557N	P = 0.676	P = 0.598N
Cochran-Armitage Trend Test (d)	P = 0.415N	D 0	
Fisher Exact Test (d)		P = 0.510N	P = 0.510N
Iematopoietic System: Lymphoma, All M	lalignant		
Overall Rates (a)	4/50 (8%)	2/49 (4%)	5/49 (10%)
Adjusted Rates (b)	12.5%	9.5%	19.2%
Terminal Rates (c)	4/32 (13%)	2/21 (10%)	2/20 (10%)
Week of First Observation	104	104	83
Life Table Tests (d)	P = 0.223	P = 0.543N	P = 0.279
Incidental Tumor Tests (d)	P = 0.309	P = 0.543N	P = 0.452
Cochran-Armitage Trend Test (d)	P = 0.413	1 - 0.04011	1 - 0.402
Fisher Exact Test (d)	1 -0.415	P = 0.349N	P = 0.487
	.•		
Circulatory System: Hemangioma or Hen		1 (10 (0 %))	0(10(00))
Overall Rates (a)	3/50 (6%)	1/49 (2%)	0/49 (0%)
Adjusted Rates (b)	9.4%	4.8%	0.0%
Terminal Rates (c)	3/32 (9%)	1/21 (5%)	0/20 (0%)
Week of First Observation	104	104	
Life Table Tests (d)	P = 0.128N	P = 0.464N	P = 0.214N
Incidental Tumor Tests (d)	P = 0.128N	P = 0.464N	P = 0.214N
Cochran-Armitage Trend Test (d)	P = 0.063 N		
Fisher Exact Test (d)	1 0.00010	P = 0.316N	P = 0.125 N
iver: Hepatocellular Adenoma			
Overall Rates (a)	3/50 (6%)	2/48 (4%)	3/46 (7%)
Adjusted Rates (b)		2/48 (4%) 9.5%	
Terminal Rates (c)	9.4%		15.0% 2/20 (15%)
	3/32 (9%)	2/21 (10%)	3/20 (15%)
Week of First Observation	104	104	104
Life Table Tests (d)	P = 0.357	P = 0.676	P = 0.433
Incidental Tumor Tests (d)	P = 0.357	P = 0.676	P = 0.433
Cochran-Armitage Trend Test (d)	P=0.549		
Fisher Exact Test (d)		P = 0.520 N	P = 0.621
iver: Hepatocellular Carcinoma			
Overall Rates (a)	6/50 (12%)	2/48 (4%)	4/46 (9%)
Adjusted Rates (b)	16.2%	8.7%	16.1%
Terminal Rates (c)	2/32 (6%)	$\frac{3.7\%}{1/21}(5\%)$	2/20 (10%)
Week of First Observation			
	84 D-0.475N	101 D-0.999N	87 D-0 565N
Life Table Tests (d)	P = 0.475N	P = 0.233N	P = 0.565N
Incidental Tumor Tests (d)	P = 0.270N	P = 0.057 N	P = 0.307 N
Cochran-Armitage Trend Test (d)	P = 0.333N	P = 0.148N	P = 0.425N
Fisher Exact Test (d)			

TABLE E3. ANALYSIS OF PRIMARY TUMORS IN MALE MICE IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

TABLE E3. ANALYSIS OF PRIMARY TUMORS IN MALE MICE IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

	Vehicle Control	1,500 mg/kg	3,000 mg/kg
Liver: Hepatocellular Adenoma or Carcin	ioma		
Overall Rates (a)	9/50 (18%)	4/48 (8%)	7/46 (15%)
Adjusted Rates (b)	24.6%	17.9%	30.1%
Terminal Rates (c)	5/32 (16%)	3/21 (14%)	5/20 (25%)
Week of First Observation	84	101	87
Life Table Tests (d)	P = 0.484	P = 0.279N	P = 0.512
Incidental Tumor Tests (d)	P = 0.474N	P = 0.111N	P = 0.503 N
Cochran-Armitage Trend Test (d)	P = 0.390 N		
Fisher Exact Test (d)		P = 0.133N	P = 0.465 N
Adrenal Gland: Pheochromocytoma			
Overall Rates (a)	3/48 (6%)	1/48(2%)	0/45 (0%)
Adjusted Rates (b)	8.7%	4.8%	0.0%
Terminal Rates (c)	2/32 (6%)	1/21 (5%)	0/20 (0%)
Week of First Observation	84	104	
Life Table Tests (d)	P = 0.117N	P = 0.431 N	P = 0.197 N
Incidental Tumor Tests (d)	P = 0.090 N	P = 0.394 N	P = 0.142N
Cochran-Armitage Trend Test (d)	P = 0.066N		
Fisher Exact Test (d)		P = 0.308N	P = 0.133N
Thyroid Gland: Follicular Cell Adenoma			
Overall Rates (a)	3/42 (7%)	1/44(2%)	1/39(3%)
Adjusted Rates (b)	10.0%	4.8%	5.3%
Terminal Rates (c)	3/30 (10%)	1/21(5%)	1/19 (5%)
Week of First Observation	104	104	104
Life Table Tests (d)	P = 0.344N	P = 0.439 N	P = 0.478N
Incidental Tumor Tests (d)	P = 0.344N	P = 0.439 N	P = 0.478N
Cochran-Armitage Trend Test (d)	P = 0.217N		
Fisher Exact Test (d)		P = 0.291 N	P = 0.336N

(a) Number of tumor-bearing animals/number of animals examined at the site

(b) Kaplan-Meier estimated tumor incidence at the end of the study after adjusting for intercurrent mortality

(c) Observed tumor incidence at terminal kill

(d) Beneath the vehicle control incidence are the P values associated with the trend test. Beneath the dosed group incidence are the P values corresponding to pairwise comparisons between that dosed group and the vehicle controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as nonfatal. The Cochran-Armitage and Fisher exact tests compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

TABLE E4. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE IN THE TWO-YEAR GAVAGE STUDYOF AMPICILLIN TRIHYDRATE

	Vehicle Control	1,500 mg/kg	3,000 mg/kg
Lung: Alveolar/Bronchiolar Adenoma			<u>_</u>
Overall Rates (a)	1/50 (2%)	0/50 (0%)	4/50 (8%)
Adjusted Rates (b)	2.9%	0.0%	13.0%
Terminal Rates (c)	1/34 (3%)	0/28 (0%)	3/28 (11%)
Week of First Observation	104	0/28 (0 %)	77
Life Table Tests (d)	P = 0.060	P = 0.539N	P = 0.129
Incidental Tumor Tests (d)	P = 0.049	P = 0.539N	P = 0.104
Cochran-Armitage Trend Test (d)	P = 0.082	D 0 50001	D 0101
Fisher Exact Test (d)		P = 0.500N	P=0.181
ing: Alveolar/Bronchiolar Carcinoma			
Overall Rates (a)	1/50 (2%)	3/50 (6%)	0/50(0%)
Adjusted Rates (b)	2.9%	9.4%	0.0%
Terminal Rates (c)	1/34 (3%)	2/28 (7%)	0/28(0%)
Week of First Observation	104	87	
Life Table Tests (d)	P = 0.439N	P = 0.252	P = 0.539N
Incidental Tumor Tests (d)	P = 0.409N	P = 0.351	P = 0.539N
Cochran-Armitage Trend Test (d)	P = 0.378N		
Fisher Exact Test (d)	1 = 0.01011	P = 0.309	P = 0.500N
FISHER LARGE LESS (U/		F - 0.009	F - 0.00014
ung: Alveolar/Bronchiolar Adenoma or Ca		a	
Overall Rates (a)	2/50 (4%)	3/50 (6%)	4/50 (8%)
Adjusted Rates (b)	5.9%	9.4%	13.0%
Terminal Rates (c)	2/34 (6%)	2/28 (7%)	3/28 (11%)
Week of First Observation	104	87	77
Life Table Tests (d)	P = 0.194	P = 0.425	P = 0.254
Incidental Tumor Tests (d)	P = 0.181	P = 0.535	P = 0.220
Cochran-Armitage Trend Test (d)	P = 0.181 P = 0.264	1 -0.000	1 - 0.220
Fisher Exact Test (d)	r - V.204	P = 0.500	P=0.339
		• - • • • • •	. 0.000
ematopoietic System: Malignant Lymphon Overall Rates (a)		9/50 (10%)	11/60 (000)
	14/50 (28%)	8/50 (16%)	11/50 (22%)
Adjusted Rates (b)	41.2%	25.1%	37.9%
Terminal Rates (c)	14/34 (41%)	5/28 (18%)	10/28 (36%)
Week of First Observation	104	9 5	9 7
Life Table Tests (d)	P = 0.478N	P = 0.235N	P = 0.545N
Incidental Tumor Tests (d)	P = 0.480N	P = 0.214N	P = 0.547 N
Cochran-Armitage Trend Test (d)	P = 0.273N		
Fisher Exact Test (d)		P = 0.114N	P = 0.323N
(amotonolotic System: Malignant I amoton	no Minod Trans		
Iematopoietic System: Malignant Lymphon		DIED (COL)	0/EQ (40)
Overall Rates (a)	1/50 (2%)	3/50 (6%)	2/50 (4%)
Adjusted Rates (b)	2.9%	10.7%	6.3%
Terminal Rates (c)	1/34 (3%)	3/28 (11%)	1/28 (4%)
Week of First Observation	104	104	89
Life Table Tests (d)	P = 0.326	P = 0.237	P = 0.435
Incidental Tumor Tests (d)	P = 0.342	P = 0.237	P = 0.488
Cochran-Armitage Trend Test (d)	P=0.399		
Fisher Exact Test (d)		P = 0.309	P = 0.500
ematopoietic System: Lymphoma, All Mali	ignant		
Overall Rates (a)	19/50 (38%)	12/50 (24%)	14/50 (28%)
Adjusted Rates (b)	52.3%	36.5%	46.3%
Terminal Rates (c)	17/34 (50%)	8/28 (29%)	12/28(43%)
	82		
		92	89
Week of First Observation			
Week of First Observation Life Table Tests (d)	P = 0.375 N	P = 0.240N	P = 0.430N
Week of First Observation Life Table Tests (d) Incidental Tumor Tests (d)	P=0.375N P=0.343N		
Week of First Observation Life Table Tests (d)	P = 0.375 N	P = 0.240N	P = 0.430N

	Vehicle Control	1,500 mg/kg	3,000 mg/kg
Hematopoietic System: Lymphoma or Le	eukemia		
Overall Rates (a)	20/50 (40%)	12/50 (24%)	15/50 (30%)
Adjusted Rates (b)	53.4%	36.5%	48.1%
Terminal Rates (c)	17/34 (50%)	8/28 (29%)	12/28 (43%)
Week of First Observation	82	92	89
Life Table Tests (d)	P = 0.391 N	P = 0.186N	P = 0.453N
Incidental Tumor Tests (d)	P = 0.348N	P = 0.079N	P = 0.395N
Cochran-Armitage Trend Test (d)	P = 0.166N		
Fisher Exact Test (d)		P = 0.067 N	P = 0.201 N
Pituitary Gland: Adenoma			
Overall Rates (a)	7/44 (16%)	2/40 (5%)	5/36(14%)
Adjusted Rates (b)	24.1%	8.7%	25.0%
Terminal Rates (c)	7/29 (24%)	2/23 (9%)	5/20 (25%)
Week of First Observation	104	104	104
Life Table Tests (d)	P = 0.536N	P = 0.140N	P = 0.605
Incidental Tumor Tests (d)	P = 0.536N	P = 0.140N	P = 0.605
Cochran-Armitage Trend Test (d)	P = 0.422N		
Fisher Exact Test (d)		P = 0.102N	P = 0.528N
Pituitary Gland: Adenoma or Carcinoma	L		
Overall Rates (a)	8/44 (18%)	3/40 (7%)	6/36(17%)
Adjusted Rates (b)	27.6%	13.0%	30.0%
Terminal Rates (c)	8/29 (28%)	3/23 (13%)	6/20 (30%)
Week of First Observation	104	104	104
Life Table Tests (d)	P = 0.550	P = 0.178N	P = 0.554
Incidental Tumor Tests (d)	P = 0.550	P = 0.178N	P = 0.554
Cochran-Armitage Trend Test (d)	P = 0.453N		
Fisher Exact Test (d)		P = 0.130N	P = 0.549 N

TABLE E4. ANALYSIS OF PRIMARY TUMORS IN FEMALE MICE IN THE TWO-YEAR GAVAGE STUDY OF AMPICILLIN TRIHYDRATE (Continued)

(a) Number of tumor-bearing animals/number of animals examined at the site

(b) Kaplan-Meier estimated tumor incidence at the end of the study after adjusting for intercurrent mortality

(c) Observed tumor incidence at terminal kill

(d) Beneath the vehicle control incidence are the P values associated with the trend test. Beneath the dosed group incidence are the P values corresponding to pairwise comparisons between that dosed group and the vehicle controls. The life table analysis regards tumors in animals dying prior to terminal kill as being (directly or indirectly) the cause of death. The incidental tumor test regards these lesions as nonfatal. The Cochran-Armitage and Fisher exact tests compare directly the overall incidence rates. A negative trend or lower incidence in a dosed group is indicated by (N).

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APPENDIX F

HISTORICAL INCIDENCES OF TUMORS IN F344/N RATS AND B6C3F1 MICE ADMINISTERED CORN OIL BY GAVAGE

TABLE F1. HISTORICAL INCIDENCE OF HEMATOPOIETIC SYSTEM TUMORS IN MALE F344/N RATS ADMINISTERED CORN OIL BY GAVAGE (a)

	Incidence in Vehicle Controls					
	Leukemia Lymphoma Leukemia Lympho					
No 2-year studies by Sp	ringborn Institute for Bioresearch, Ir	nc., are included in the historic	al data base.			
Overall Historical In	cidence					
TOTAL	152/1,100 (13.8%)	10/1,100 (0.91%)	162/1,100 (14.7%)			
TOTAL SD (b)		10/1,100 (0.91%) 1.72%	162/1,100 (14.7%) 8.25%			
	152/1,100 (13.8%)	,	, .			
SD (b)	152/1,100 (13.8%)	,	, .			

(a) Data as of August 3, 1984, for studies of at least 104 weeks. The reported range is the same for both leukemia and lymphoma or leukemia (combined).

(b) Standard deviation

(c) Range and SD are presented for groups of 35 or more animals.

TABLE F2. HISTORICAL INCIDENCE OF ADRENAL GLAND TUMORS IN MALE F344/N RATS ADMINISTERED CORN OIL BY GAVAGE (a)

		Incidence in Vehicle Controls					
	Pheochromocytoma	Malignant Pheochromocytoma	Pheochromocytoma or Malignant Pheochromocytoma				
No 2-year studies by Springborn Institute for Bioresearch, Inc., are included in the historical data base.							
Overall Historical In	ncidence						
TOTAL SD (b)	243/1,092 (22.3%) 9.18%	6/1,092 (0.5%) 0.93%	247/1,092 (22.6%) 9.05%				
Range (c)							
High	20/49	1/45	20/49				
Low	2/50	0/50	2/50				

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

(c) Range and SD are presented for groups of 35 or more animals.

TABLE F3. HISTORICAL INCIDENCE OF MAMMARY GLAND TUMORS IN FEMALE F344/N RATS ADMINISTERED CORN OIL BY GAVAGE (a)

	Incidence in Vehicle Controls					
	Fibroadenoma Adenocarcinoma Fibroadenoma or Adenocarcinoma					
o 2-year studies by	Springborn Institute for Bioresear	ch, Inc., are included in the l	nistorical data base.			
•		, ,				
•						
•		(c) 17/1,100 (1.5%) 1.50%	(b,c) 288/1,100 (26.2%) 8.21%			
Overall Historical	(b) 280/1,100 (25.5%)	(c) 17/1,100 (1.5%)	(b,c) 288/1,100 (26.2%)			

(a) Data as of August 3, 1984, for studies of at least 104 weeks
(b) Includes seven adenomas, NOS, one papillary adenoma, four papillary cystadenomas, and one papillary cystadenoma

(c) Includes one papillary cystadenocarcinoma

(d) Standard deviation

(e) Range and SD are presented for groups of 35 or more animals.

TABLE F4. HISTORICAL INCIDENCE OF INTEGUMENTARY SYSTEM TUMORS IN MALE $\rm B6C3F_1$ MICE ADMINISTERED CORN OIL BY GAVAGE (a)

		Incidence in Vehicle Controls						
	Fibroma	Fibrosarcoma	Fibroma or Fibrosarcoma					
No 2-year studies by Sprin	o 2-year studies by Springborn Institute for Bioresearch, Inc., are included in the historical data base.							
Overall Historical Inci	dence							
TOTAL SD(b)	19/1,097 (1.7%) 2.42%	(d) 57/1,097 (5.2%) 4.49%	(d) 76/1,097 (6.9%) 6.06%					
Range (c) High	4/50	7/50	11/50					

(a) Data as of August 3, 1984, for studies of at least 104 weeks

(b) Standard deviation

(c) Range and SD are presented for groups of 35 or more animals.

(d) Includes 6 neurofibrosarcomas and 19 sarcomas, NOS

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APPENDIX G

GENETIC TOXICOLOGY OF

AMPICILLIN TRIHYDRATE

		Revertants/plate (a,b)				
Strain	Dose (µg/plate)	S9		+ \$9 (rat)		+ S9 (hamster)
TA100	0	165 ±	11.8	138 ±	9.5	130 ± 6.1
	10	149 ±	7.7	148 ±	12.2	141 ± 4.9
	33	135 ±	3.2	133 ±	2.6	140 ± 2.0
	100	125 ±	4.6	153 ±	4.5	126 ± 3.8
	333	129 ±	3.5	139 ±	8.2	137 ± 4.6
	1,000	(c) 97 ±	6.2	(c) $123 \pm$	3.2	113 ± 4.3
TA1535	0	24 ±	3.3	19 ±	0. 9	15 ± 0.9
	0.03	24 ±	0.9	12 ±	2.4	11 ± 1.2
	0.10	27 ±	2.9	16 ±	1.8	12 ± 0.9
	0.30	26 ±	5.2	12 ±	2.1	12 ± 0.6
	1.00	25 ±	2.1	14 ±	3.3	10 ± 3.0
	2.00			6 ±	2.4	$(c)7 \pm 1.5$
	3.30	(c) 10 \pm	3.9			
TA1537	0	6 ±	1.5	8 ±	0.7	10 ± 1.2
	0.03	6 ±	0. 9	8 ±	0.9	4 ± 0.9
	0.10	6 ± 7 ± 6 ± 7 ±	2.2	8 ±	2.1	7 ± 1.5
	0.30	6 ±	0.9	6 ±	1.2	8 ± 2.0
	1.00	7 ±	1.3	6 ±	1.5	5 ± 0.6
	2.00			1 ±	0.3	$(c) 3 \pm 1.2$
	3.30	(c) 1 ±	0.0			
ГА98	0	18 ±	3.2	27 ±	0.7	24 ± 2.7
	10	16 ±	1.5	21 ±	0.3	27 ± 3.8
	33	16 ±	2.6	24 ±	4.4	24 ± 0.9
	100	13 ±	2.7	$23 \pm$	4.5	27 ± 3.8
	333	15 ±	0.9	30 ±	1.3	25 ± 1.9
	1,000	(c) 9 ±	0.6	(c) $17 \pm$	2.1	(c) 19 ± 0.7

TABLE G1. MUTAGENICITY OF AMPICILLIN TRIHYDRATE IN SALMONELLA TYPHIMURIUM

(a) The S9 fractions were prepared from the liver of Aroclor 1254-induced male Sprague-Dawley rats and male Syrian hamsters. Cells and study compound or solvent (DMSO) were incubated for 20 minutes at 37° C in the presence of either S9 or buffer. After the addition of soft agar, the contents of each tube were poured onto minimal medium, and the plates were incubated at 37° C for 48 hours (Haworth et al., 1983). The experiment was performed twice, each in triplicate; because the results were similar, data from only one experiment are shown.

(b) Mean ± standard error

(c) Slight toxicity

Compound	Dose (µg/ml)	Total Mutant Clones	Cloning Efficiency (percent)	Relative Total Growth (percent)	Mutation Frequency (mutants/10 ⁶ clonable cells)
DMSO	1%		111.7	100	50
		123	88.3	100	46
		161	101.2	100	53
		187	89.0	100	70
Ethylmethane	250	1,104	92.8	63.8	396
sulfonate		977	107.0	69.5	304
Ampicillin	313	154	98.5	104.7	52
trihydrate		130	107.8	115.6	40
-		143	88.7	80.6	54
	625	133	98.7	108.2	45
		120	105.2	125.5	38
		172	92.7	106.2	62
	1,250	165	105.7	118.7	52
		210	98.7	91.6	71
		163	93.3	100.5	58
	2,500	180	94.3	97.9	64
		184	112.0	128.2	55
		206	94.0	97.6	73
	5,000	147	95.7	99.1	51
		166	93.8	91.3	59
		131	99.3	124.7	44

TABLE G2. MUTAGENICITY OF AMPICILLIN TRIHYDRATE IN L5178Y MOUSE LYMPHOMA CELLSIN THE ABSENCE OF S9 (a)

(a) Experiments were performed twice, all doses were tested in duplicate, except the solvent control (DMSO), which was tested in triplicate. Because the results were similar, data from only one experiment are shown. The protocol was basically that of Clive et al. (1979). Cells (6×10^{5} /ml) were treated for 4 hours at 37° C in medium, washed, resuspended in medium, and incubated for 48 hours at 37° C. After expression, 3×10^{6} cells were plated in medium supplemented with trifluorothymidine for selection of cells that were mutant at the thymidine kinase (TK) locus, and 600 cells were plated in nonselective medium to determine the percentage of viable cells.

Compound	Dose (µg/ml)	Total Mutant Clones	Cloning Efficiency (percent)	Relative Total Growth (percent)	Mutation Frequency (mutants/10 ⁶ clonable cells)
DMSO	1%	67	92.3	100	24
		47	89.0	100	18
		65	91.5	100	24
		95	115.0	100	28
3-Methylchol-	2.5	636	107.5	74.3	197
anthrene		624	88.8	50.7	234
		658	87.2	57.8	252
Ampicillin	500	59	64.0	76.7	31
trihydrate		59	90.5	99.3	22
		60	94.2	107.4	21
	1,000	94	91.7	91.0	34
	-,	81	95.2	103.1	28
		39	102.5	110.1	13
	2,000	92	104.0	117.1	29
	2,000	66	93.2	108.7	24
	3,000	58	107.8	95.5	18
	-,	89	85.8	102.4	35
	5,000	78	80.2	83.8	32
	0,000	70	81.7	99.3	29
		42	102.7	114.3	14

TABLE G3. MUTAGENICITY OF AMPICILLIN TRIHYDRATE IN L5178Y MOUSE LYMPHOMA CELLSIN THE PRESENCE OF S9 (a)

(a) Experiments were performed twice, all doses were tested in duplicate, except the solvent control (DMSO), which was tested in triplicate. Because the results were similar, data from only one experiment are shown. The protocol was basically that of Clive et al. (1979). Cells (6×10^5 /ml) were treated for 4 hours at 37° C in medium, washed, resuspended in medium, and incubated for 48 hours at 37° C. After expression, 3×10^6 cells were plated in medium supplemented with trifluorothymidine for selection of cells that were mutant at the thymidine kinase (TK) locus, and 600 cells were plated in nonselective medium to determine the percentage of viable cells. S9 was prepared from the liver of Aroclor 1254-induced male F344 rats.

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TABLE G4. INDUCTION OF SISTER-CHROMATID EXCHANGES IN CHINESE HAMSTER OVARY CELLSBY AMPICILLIN TRIHYDRATE (a)

S9	(b)	+	S9 (c)
Dose (µg/ml)	SCE/Cell (d)	Dose (µg/ml)	SCE/Cell (d)
DMSO		DMSO	
10 µl	8.2	10 µl	8.1
Ampicillin trihydrate		Ampicillin trihydrate	
50	8.9	50	7.8
160	9.3	160	7.9
500	9.5	500	8.8
1,500	8.0	1,500	9.0
Mitomycin C		Cyclophosphamide	
0.001	24.0	0.30	12.7
0.010	72.9	2.00	41.5

(a) SCE, sister-chromatid exchange

(b) In the absence of S9, Chinese hamster ovary cells were incubated with study compound or solvent for 2 hours at 37° C. Then 10 μ M BrdU was added, and incubation was continued for 22-24 hours. Cells were washed, fresh medium containing BrdU (10 μ M) and colcemid (0.1 μ g/ml) was added, and incubation was continued for 2-3 hours (Galloway et al., 1985).

(c) In the presence of S9, cells were incubated with study compound or solvent for 2 hours at 37° C. Then cells were washed, and medium containing 10 μ M BrdU was added. Cells were incubated for a further 26 hours, with colcemid (0.1 μ g/ml) present for the final 2-3 hours. S9 was from the liver of Aroclor 1254-induced male Sprague-Dawley rats (Galloway et al., 1985).

(d) Cells were then collected by mitotic shake-off, treated for 3 minutes with potassium chloride (75 mM), washed twice with fixative, and dropped onto slides and air-dried (Galloway et al., 1985).

-5	39 (b)	+ S	9 (c)
Dose (µg/ml)	Abs/100 Cells (percent cells with abs)	Dose (µg/ml)	Abs/100 Cells (percent cells with abs)
DMSO		DMSO	
10 µl	0(0)	10 µl	1(1)
Ampicillin trihydrate		Ampicillin trihydrate	
250	1(1)	250	0(0)
500	1(1)	500	3 (3)
1,000	1(1)	1,000	0(0)
1,500	1(1)	1,500	2(2)
Mitomycin C		Cyclophosphamide	
0.25	18(16)	15	32 (24)
1.00	50 (40)	50	52 (38)

TABLE G5. INDUCTION OF CHROMOSOMAL ABERRATIONS IN CHINESE HAMSTER OVARY CELLS BY AMPICILLIN TRIHYDRATE (a)

(a) Abs, aberrations

(b) In the absence of S9, Chinese hamster ovary cells were incubated with study compound or solvent for 8-10 hours at 37° C. Cells were then washed, and fresh medium containing colcemid (0.1 μ g/ml) was added. After a further 2-3 hours of incubation, cells were harvested by mitotic shake-off, fixed, and stained in 6% Giemsa (Galloway et al., 1985).

(c) In the presence of S9, cells were incubated with study compound or solvent for 2 hours at 37° C. Cells were then washed, medium was added, and incubation was continued for 8-10 hours. Colcemid (0.1 µg/ml) was added for the last 2-3 hours of incubation; then cells were harvested and fixed as above. S9 was from the liver of Aroclor 1254-induced male Sprague-Dawley rats (Galloway et al., 1985).

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APPENDIX H

CHEMICAL CHARACTERIZATION OF

AMPICILLIN TRIHYDRATE

I.	Identity and Purity Determinations of Ampicillin Trihydrate Performed by the
	Analytical Chemistry Laboratory

A. Lot	tno	o. 61849K	<u>Determined</u>	<u>Literature Values</u>
1.	Pł	ysical properties		
	a.	Melting point:	197°-202° C (visual capillary, Büchi 510) (decomposes)	No literature value found
	b.	Appearance:	Colorless powder	White, crystalline powder (USP, 1975)
	c.	Specific rotation:	[a] ²⁶ : 251.2° (water) D	[a] ²³ : 287.9° (water) D
				(Merck Index, 1976) for anhydrous ampicillin and equivalent to 249.4° for the trihydrate
2.	Sp	ectral data		
	a.	Infrared		
		Instrument;	Beckman IR-12	
		Phase:	1% potassium bromide	
		Results:	See Figure 5	Identical to a supplied spectrum of USP standard ampicillin trihydrate
	b.	Ultraviolet/visible		
		Instrument:	Cary 118	
		Solvent:	0.1 N hydrochloric acid	
		Results:	4	USP Standard Ampicillin Trihydrate
			$\lambda_{\max}(nm) \epsilon \times 10^{-2}$	$\lambda_{\max}(nm) = \epsilon \times 10^{-2}$
			$\begin{array}{cccc} 268 & 2.29 \pm 0.02(8) \\ 262 & 3.14 \pm 0.02(8) \\ 257 & 3.30 \pm 0.02(8) \end{array}$	$\begin{array}{ccc} 268 & 2.18 \pm 0.03(\delta) \\ 262 & 3.06 \pm 0.04(\delta) \\ 257 & 3.30 \pm 0.04(\delta) \end{array}$



FIGURE 5. INFRARED ABSORPTION SPECTRUM OF AMPICILLIN TRIHYDRATE (LOT NO. 61849K)

APPENDIX H. CHEMICAL CHARACTERIZATION

c. Nuclear magnetic resonance	<u>Determined</u>	<u>Literature Values</u>
Instrument:	Varian EM-360A	
Solvent		
System a:	DMSO d ₆ with tetra- methyl silane internal standard	
System b:	DMSO d ₆ plus D ₂ O with tetramethyl silane internal standard	
Assignments:	See Figures 6 and 7	
Chemical shift (8):	System a a s, 1.30 ppm b s, 142 ppm c s, 3.96 ppm d s, 4.77 ppm e m, 5.18-5.41 ppm f m, 7.14-7.43 ppm g HDO and exchangeable protons 4.08-4.50 ppm h DMSO, 2.36-2.60 ppm i impurity, 1.2 ppm j impurity, 2.08 ppm k impurity, 2.08 ppm k impurity, 4.6-4.75 ppm System b a a s, 134 ppm b s, 1.42 ppm c s, 3.88-4.05 ppm d s, 4.96 ppm e dd, 5.20-5.48 ppm J _{ce} = 7H _Z f s, 7.42 ppm g HDO and exchangeable protons, g.88-4.05 ppm h DMSO, 2.36- g.62 ppm i i impurity, 1.2 j impurity, 2.1	Consistent with a literature spectrum (Wilson, 1974)

FIGURE 6. NUCLEAR MAGNETIC RESONANCE SPECTRUM OF AMPICILLIN TRIHYDRATE (LOT NO. 61849K)



FIGURE 7. NUCLEAR MAGNETIC RESONANCE SPECTRUM OF AMPICILLIN TRIHYDRATE WITH DEUTERATED WATER (LOT NO. 61849K)



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END OF SWEEP

Integration ratios:	•	em a
	a b }	5.55
	c d e f	1.15 1.35 2.17 4.77
	Syst	em b
	${f Syst}_{b}^{a}$	em b 6.34
	a }	

3. Water analysis (Karl Fischer): $14.3\% \pm 0.3$ (δ)% (theoretical for trihydrate 13.40%)

4. Elemental analysis

Element	С	Н	N	S	0	
Theory percent (T)	47.63	6.25	10.41	7.95	27.76	
Determined percent (D)	47.40 47.52	6.32 6.17	10.25 10.18	7.72 7.79	27.65 27.58	
Percent D/T	99.6	100.0	98.1	97.5	99.5	

5. Titration

a. Iodometric

Procedure: As outlined for potency in §436.204 of the Code of Federal Regulations (CFR, 1977)

Results: A potency of 856.2 \pm 4.4 $\mu\text{g/mg}$ relative to a USP sample of ampicillin trihydrate

b. Carboxylic acid function

Procedure: The compound was dissolved in dimethyl sulfoxide:methanol (2:3) and titrated potentiometrically with 0.1 N sodium methoxide in methanol.

Results: $100.4\% \pm 0.2(\delta)\%$

c. Amine function

Procedure: The compound was dissolved in glacial acetic acid and titrated potentiometrically with 0.1 N perchloric acid in glacial acetic acid.

Results: 96.7% \pm 0.2 (δ)%

6. Chromatographic analysis

a. Thin-layer chromatography

3.57 (trace)

Plates: Silica Gel 60 F-254, 0.25 mm Amount spotted: 1, 10, and 30 µl of a 2 mg/ml solution (methanol:water, 8:2), 2 µg of the reference standard, and 20 µg of USP standard ampicillin trihydrate Reference standard: L-cysteine hydrochloride Visualization: Short- and long-wave ultraviolet and chloroplatinic acid spray reagent (Pokorny et al., 1973)

System 1: n-Butanol:water:glacial acetic acid (60:25:15), equilibrated

	Sample	<u>USP Standard</u>
Rr	0.44 (major)	0.43 (major)
	0.26 (minor)	0.26 (minor)
	0.50 (trace)	0.14 (reference standard)
	0.14 (reference standard)	
<u>Rst</u> :	3.14 (major)	3.07 (major)
	1.86 (minor)	1.86 (minor)

System 2: Ethyl acetate:water:glacial acetic acid:methanol (70:10:10:10), equilibrated

	Sample	USP Standard
<u>R</u> f:	0.18 (major) 0.28 (minor)	0.18 (major) 0.28 (minor)
	0.03 (trace) 0.07 (reference standard)	0.03 (trace) 0.07 (reference standard)
<u>R</u> st:	2.6 (major) 4.0 (minor) 0.43 (trace)	2.6 (major) 4.0 (minor) 0.43 (trace)

b. High-performance liquid chromatography

Instrumental sys Pump: Waters Programmer: Detector: Wat Injector: Wat Detection: Ultrav	s 6000A Waters 660 ters 440 ers U6K
	bak C ₁₈ , 300 $ imes$ 3.9 mm ID, with a CO:PELL ODS 72 $ imes$ 2.3 mm ID
guard column	
Solvent system:	A: Water containing 5 mM heptanesulfonic acid, sodium salt, 1% acetic acid
	B: Methanol containing 5 mM heptanesulfonic acid, sodium salt, 1% acetic acid
Flow rate: 1 ml/m	in
Sample injected	
System 1: 15 µ	l of a 2.0 mg/ml pH 7.4 phosphate buffer solution of the compound
	l of a 1.8 mg/ml pH 7.4 phosphate buffer solution of the compound l pH 7.4 phosphate buffer solution of a USP standard
Ų	• • •
• •	l of a 2.0 mg/ml pH 7.4 phosphate buffer solution of the compound
•	stem 1: 30% B, isocratic
Sy	vstem 2: 50% B, isocratic
•	stem 3: 60% B, isocratic
25	

Results

System 1: A major peak preceded by one impurity with a relative area of 0.11% was detected.

<u>Peak No.</u>	Retention <u>Volume (ml)</u>	Retention Volume Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	4.0	0.15	0.11
2	27.1	1.00	100.0

System 2: For the sample, a major peak, preceded by two peaks, the first (single component) with a relative area of 0.12% and the second (multicomponent) with a relative area of 0.43%, and followed by two impurities with relative areas of 0.26% and 0.24% was detected. For the USP standard, a major peak, preceded by a multicomponent peak with a relative area of 0.25% and followed by two impurities with relative areas of 0.86% and 0.44% was detected.

APPENDIX H. CHEMICAL CHARACTERIZATION

<u>Peak No.</u>	Retention <u>Volume (ml)</u>	Retention Volume Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
Sample			
1	3.7	0.65	0.12
2 (multicomponent) ~ 4.6	~ 0.81	0.43
3	5.7	1.00	100.0
4	8.0	1.40	0.26
5	10.7	1.88	0.24
USP Standard			
1 (multicomponent) 4.6	0.81	0.25
2	5.7	1.00	100.0
3	9.5	1.67	0.86
4	11.4	2.00	0.44

System 3: A major peak, followed by one impurity with a relative area of 0.24%

<u>Peak No.</u>	Retention <u>Volume (ml)</u>	Retention Volume Relative to <u>Major Peak</u>	Area (percent of <u>major peak)</u>
1	4.1	1.00	100.0
2	6.7	1.63	0.24

Summary: Peak number 1 in system 1 probably corresponds to peak 1 in system 2. No other correspondence was indicated between the systems. Therefore, two minor peaks, one being multicomponent, with a total relative area of 0.55% were detected preceding the major peak in the compound. A possible total of three impurities, representing up to 0.74% relative area, were detected following the major peak. Comparison of the compound with a USP standard in one system indicated the two to be of approximately equivalent purity.

7. Conclusions: The results of elemental analysis for carbon, hydrogen, and oxygen were in agreement with theoretical values; those for nitrogen and sulfur were slightly low. The water content by Karl Fischer titrimetry was $14.3\% \pm 0.3(\delta)\%$ (theoretical is 13.4%). A potency of $856.2 \pm 4.4 \,\mu\text{g/mg}$, relative to a USP standard, was indicated by iodometric titration. Nonaqueous, potentiometric titrations of the carboxylic acid and amine functional groups indicated purities of $100.4\% \pm 0.2(\delta)\%$ and $96.7\% \pm 0.2(\delta)\%$, respectively. Thin-layer chromatography indicated a minor and a trace impurity by two solvent systems. A USP standard material chromatographed simultaneously indicated a minor impurity by one system and a minor and a trace impurity by the other. Reverse-phase high-performance liquid chromatography (HPLC) detected two minor peaks, one being nonhomogenous, preceding the major peak and a total of three impurities following the major peak. The total relative area of all impurities was approximately 1.4%. A USP standard material chromatographed in one of the three HPLC systems was similar in composition and relative area of the impurities. The infrared spectrum was identical to a spectrum of USP standard material. The ultraviolet spectrum was identical in appearance and similar with respect to ε_{max} values to a spectrum of the USP material. The nuclear magnetic resonance spectrum was consistent with a literature spectrum. Specific rotation was in agreement with a literature value.

APPENDIX H. CHEMICAL CHARACTERIZATION

B.	Lo	t No	o. 33564-550	Determined	L	<u>Literature</u>	Value
1. Physical properties							
		а.	Appearance:	White, micro powder	ocrystalline		
		b.	Specific rotation	$[\alpha]_{D}^{25}$: +247.9	$\pm 4.8^{\circ}(\delta)$ (water)	[a] ²³ : 287.9	° (water)
				-		For anhydr picillin and to 249.4° for hydrate (Mo 1976)	equivalent the tri-
	2.	Sp	ectral data				
		a.	Infrared				
			Instrument: Phase:	Perkin-Elme 1.5% in potas bromide			
			Results:	See Figure 8		Consistent literature r (Florey, 197	eference
		b.	Ultraviolet/visible				
			Instrument: Solvent:	Cary 219 0.1 N hydroc	hloric acid	pH 5.3 phos buffer	phate
			Results:	No absorband observed from 350 nm at a c tration of 0.1	n 800 to oncen-		
				$\lambda_{max}(nm)$	$\epsilon \times 10^{-2}$	$\lambda_{\max}(nm)$	$\epsilon \times 10^{-2}$
				316 (shoulder) 289 (shoulder) 267 261 256 250 (shoulder)	$\begin{array}{c} 0.218 \pm 0.005(8) \\ 0.268 \pm 0.008(8) \\ 2.00 \pm 0.01(8) \\ 2.90 \pm 0.01(8) \\ 3.22 \pm 0.01(8) \\ 3.49 \pm 0.01(8) \end{array}$	268 262 257 (Florey, 1973)	2.26 3.15 3.51
				USP Referen		(), ,	
				316 (shoulder) 289 (shoulder) 267 261 256 250 (shoulder) Note: Shoulders	$\begin{array}{l} 0.272 \pm 0.004(8) \\ 0.279 \pm 0.004(8) \\ 2.04 \pm 0.02(8) \\ 2.95 \pm 0.02(8) \\ 3.28 \pm 0.02(8) \\ 3.56 \pm 0.04(8) \end{array}$ were observed 251 nm for lot no.		



FIGURE 8. INFRARED ABSORPTION SPECTRUM OF AMPICILLIN TRIHYDRATE (LOT NO. 33564-550)

c.	Nuclear magnetic resonance	Determined	<u>Literature Values</u>	
	Instrument:	Varian EM-360A		
	Solvent:	Deuterated dimethyl sulfoxide with tetra- methylsilane internal standard. Sample was exchanged with one drop of deuterium oxide.	Spectrum consistent with literature reference (Wilson, 1974)	
	Assignments:	See Figure 9		
	Chemical shift (ð):	a s, 1.36 ppm b s, 1.47 ppm c s, 3.99 ppm d s, 4.96 ppm e m, 5.22-5.58 ppm f m, 7.13-7.67 ppm g unresolved m, 9.11 ppm h s, 4.56 ppm HDO		
	Integration ratios:	a b c 0.94 d 0.96 e 2.06 f 5.08 g 0.71 h HDO		

- 3. Water analysis (Karl Fischer): $13.24\% \pm 0.01(\delta)\%$ (theoretical percent water for trihydrate: 13.4%)
- 4. Elemental analysis

Element	С	Н	N	S
Theory percent (T)	47.63	6.24	10.42	7.95
Determined percent (D)	47.64 47.57	6.28 6.32	10.37 10.35	7.96 7.82
Percent D/T	99.95	101.0	99.42	99.24



FIGURE 9. NUCLEAR MAGNETIC RESONANCE SPECTRUM OF AMPICILLIN TRIHYDRATE (LOT NO. 33564-550)

5. Titration

a. Iodometric

Procedure: As outlined in §436.204 of the Code of Federal Regulations

Results: A potency of 817 \pm 2(δ) µg/mg

b. Carboxylic acid function

Procedure: Samples were dissolved in dimethyl sulfoxide:methanol (2:3) and titrated with 0.1 N sodium methoxide in methanol. Titrations were monitored potentiometrically with a combination pH/mV electrode filled with saturated methanolic potassium chloride.

Results: $100.9\% \pm 0.5(\delta)\%$

c. Amine titration

Procedure: Samples were dissolved in glacial acetic acid and titrated with 0.1 N perchloric acid in glacial acetic acid. Titrations were monitored potentiometrically with a combination pH/mV electrode filled with 4 M aqueous potassium chloride.

Results: 97.8% \pm 0.4(δ)%

6. Chromatographic analysis

a. Thin-layer chromatography

Plates: Silica Gel 60 F-254, 0.25 mm layer
Amount spotted: 2, 20, 60 μg (1, 10, 30 μl of a 2 μg/μl solution in methanol:water [8:2])
Reference standard: L(+)-Cysteine hydrochloride, 2 μg (1 μl of a 2 μg/μl solution in methanol:water [8:2])
Visualization: Ultraviolet light (254 and 366 nm) and spray of iodoplatinate reagent (Pokorny et al., 1973)

Note: Tanks and solvent systems were allowed to equilibrate overnight.

System 1: n-Butanol:water:glacial acetic acid (60:25:15)

Spot <u>Intensity</u>	$\underline{\mathbf{R}}_{\mathbf{f}}$	$\underline{\mathbf{R}}_{st}$
Minor	0.47	4.7
Major	0.29	2.9
Reference	0.10	

Spot <u>Intensity</u>	R _f	<u>R</u> st
Minor	0.35	5.8
Major	0.21	3.5
Minor	0.02	0.33
Reference	0.06	

System 2: Ethyl acetate:water:glacial acetic acid:methanol (70:10:10:10)

b. High-performance liquid chromatography

Impurity profile Instrumental system Pump: Waters M6000A **Programmer:** Waters 660 **Detector:** Waters 440 Injector: Waters U6K Detection: Ultraviolet, 254 nm Column: Waters μ Bondapak C₁₈, 300 \times 3.9 mm ID Guard column: Whatman CO:PELL ODS, 72×2.3 mm ID Solvent system A: Water containing 5 mM heptanesulfonic acid, sodium salt, and 1% (v/v) glacial acetic acid B: Methanol containing 5 mM heptanesulfonic acid, sodium salt, and 1% (v/v) glacial acetic acid Solvent ratio: A:B, 55:45 Flow rate: 1.0 ml/min Sample injected: Solution containing 2.038 mg/ml ampicillin trihydrate in aqueous pH 7.4 buffer (Fischer pH 7.4 Dry Buffer Salts, monobasic potassium phosphate and disodium phosphate), filtered into amber septum vials and kept on ice in the dark Volume injected: 15 µl

Results: A major peak and five impurities were observed. The major peak eluted at 6.8 minutes. Two impurities eluted before, and three eluted after, the major peak. All of the impurities had areas of less than 1.0% relative to the major peak area. The area percentages of peaks 1 and 2 were obtained by subtracting the area of the solvent blank, which contained small peaks at early retention times, from the impurity profile.

APPENDIX H. CHEMICAL CHARACTERIZATION

<u>Peak No.</u>	Retention <u>Time (min)</u>	Retention Time Relative to <u>Major Peak</u>	Area (percent of <u>major peak) (a)</u>
1	3.8	0.55	0.8
2	5.0	0.74	0.6
3	6.8	1.00	100
4	9.4	1.38	0.10
5	10.8	1.59	0.45
6	16.6	2.44	0.31

(a) Detector response is very dependent upon the absorbance of a substance at the detection wavelength used. The values reported are absolute areas expressed as percentages of the area of the major peak and do not take into account the different ε values of the compound and its impurities. Therefore, the areas reported do not necessarily reflect the actual weight percentages of the impurities in the sample.

When injections of an ampicillin trihydrate solution of similar concentration were made at 100%, 90%, 70%, 50%, 40%, and 30% B on the HPLC system described above, no additional impurities with areas greater than 1% relative to the major peak were seen.

Impurity profile comparison of lot no. 61849K and lot no. 33564-550: Injections of a solution of lot no. 61849K of similar concentration gave an impurity profile comparable to the impurity profile of lot no. 33564-550, although two differences were noted. The peak in lot no. 33564-550 at 3.8 minutes was seen in lot no. 61849K but at approximately one-ninth the size. In lot no. 61849K, an impurity peak (0.46%) was seen at 4.4 minutes and a trace impurity (<0.1%) at 5.0 minutes. The peak at 5.0 minutes in lot no. 33564-550 was broader and more diffuse and is not thought to be identical to that in lot no. 61849K.

Major peak lot comparison: Solutions of lot no. 61849K, lot no. 33564-550, and the USP standard, containing an internal standard (acetanilide), were analyzed by HPLC. The major peak areas were compared with internal standard peak areas, and the ampicillin content of lot no. 61849K and lot no. 33564-550, relative to the USP reference standard, was calculated. The instrument parameters listed in Section I.B.6.b.were used to analyze samples as follows:

Sample injected: Accurately weighed solutions containing approximately 1.4 mg/ml ampicillin trihydrate and 0.02 mg/ml acetanilide in aqueous pH 7.4 buffer, filtered and kept on ice in amber septum vials

Retention time:	Acetanilide (internal standard): 5.0 min
	Ampicillin trihydrate: 6.7 min

Results

<u>Sample</u>	Percent Ampicillin Trihydrate <u>Compared with USP Reference (a)</u>
USP Reference	$100.0 \pm 3.0(\delta)$
Lot No. 61849K	$102.2 \pm 2.4(\delta)$
Lot No. 33564-550	$101.0 \pm 2.4(\delta)$

(a) Pooled standard deviation: \pm 2.6%

c. High-resolution gas chromatography

Capillary column gas chromatography was performed to determine the presence of N,N-dimethylaniline, a potential contaminant from the synthesis of ampicillin trihydrate. Aqueous solutions (0.8% w/v) of both study lots were extracted with methylene chloride. The extract was concentrated and analyzed by gas chromatography with a flame ionization detector (250° C). A fused silica DB-5 capillary column (15 m \times 0.25 mm, 0.25 µm) was temperature programmed from 50° C to 250° C at 10° C/minute. Solutions of both lots spiked with 1 ppm (w/w relative to ampicillin trihydrate) N,N-dimethylaniline were concomitantly prepared and analyzed with the samples, as was a standard solution of N,N-dimethylaniline.

N,N-dimethylaniline was not detected in either lot of ampicillin trihydrate at a concentration of 1 ppm (w/w) or greater.

7. Conclusions: The results of the elemental analysis for carbon, hydrogen, nitrogen, and sulfur were in agreement with the theoretical values. Karl Fischer analysis indicated a water content of $13.24\% \pm 0.01(\delta)\%$. Iodometric titration indicated a potency of 817 $\pm 2(\delta) \mu g/mg$. Nonaqueous titrations of the carboxylic acid and amine functional groups indicated purities of $100.9\% \pm 0.5(\delta)\%$ and $97.8\% \pm 0.4(\delta)\%$, respectively. Thin-layer chromatography by one system indicated a major spot and one minor impurity. A second thin-layer chromatographic system indicated a major spot and two minor impurities. High-performance liquid chromatography indicated a major peak and five impurities, two eluting before and three eluting after the major peak. The total area of the impurities was 2.22\% relative to the major peak. The concomitant HPLC analysis of lot nos. 61849K and 33564-550 indicated similar impurity profiles, and the results of the previous and current analysis of lot no. 61849K were consistent. Infrared, ultraviolet/visible, and nuclear magnetic resonance spectra were consistent with the structure of ampicillin trihydrate.

II. Chemical Stability Study of Ampicillin Trihydrate Lot No. 61849K Performed by the Analytical Chemistry Laboratory

- A. Sample storage: Samples of the bulk compound were stored in the dark in glass vials with Teflon®-lined caps for 2 weeks at temperatures of -20° , 5° , 25° , or 60° C.
- **B.** Analytical method: Duplicate samples from each storage temperature were prepared by dissolving approximately 150 mg of the compound in 50 ml of pH 7.4 phosphate buffer containing sufficient propriophenone, the internal standard, to yield a final concentration of 0.045 mg/ml. These samples were analyzed by the high-performance liquid chromatographic system described in I.A.6.b. with a 50% B isocratic program and a flow rate of 2 ml/minute.

C. Results

Storage <u>Temperature</u>	Percent Compound (normalized to <u>– 20° C sample)</u>
– 20° C	$100.0 \pm 0.8(\delta)$
5° C	$99.9 \pm 0.8(\delta)$
25° C	$99.7 \pm 0.8(\delta)$
60° C	$99.4 \pm 0.8(\delta)$

D. Conclusions: Ampicillin trihydrate is stable as the bulk chemical when stored in the dark for 2 weeks at temperatures of up to 60° C within the stated limits of error of the analysis. However, the decreasing purity from - 20° C to 60° C could indicate a real decomposition because the compound has been reported to decompose from 6.8% to 12.5% when stored at 55° C for 1 month (Tsuji and Robertson, 1975).

III. Chemical Stability Study of Ampicillin Trihydrate Performed by the Study Laboratory

A. Storage conditions

Bulk: Approximately 4° C **Reference:** -20° C

B. Analytical methods

1. Infrared spectroscopy

Lot no. 61849K analyzed on 6/13/80 and 8/18/80, lot no. 33564-550 analyzed on 11/05/81 Instrument: Perkin-Elmer 267 Phase: Potassium bromide pellet

2. Titration

a. Study chemical

About 125 mg of the compound was accurately weighed into a 100-ml flask and diluted to the mark with distilled water. Two milliliters of this solution was pipetted into a 50-ml glass-stoppered Erlenmeyer flask. Two milliliters of 1.0 N aqueous sodium hydroxide was added, stoppered, and allowed to stand for 15 minutes. Two milliliters of 1.2 N aqueous hydrochloric acid was added. From a buret, 10.0 ml of a 0.01 N iodine solution was added, the flask was stoppered, and the solution was allowed to stand for 15 minutes. The excess iodine was titrated with 0.01 N sodium thiosulfate (2.48 g of Na₂S₂O₃ and 125 mg Na₂CO₃ per liter). Toward the end of the titration (i.e., when the solution was straw colored), one drop of starch iodide paste was added. The titration was finished by taking the disappearance of the blue color as the endpoint.

b. Blanks

Two milliliters of the compound solution was pipetted into a 50-ml glass-stoppered Erlenmeyer flask, and 10.0 ml of a 0.01 N iodine solution was added. The solution was titrated immediately as directed above for the study chemical.

c. Calculations

The potency of the study material was calculated as follows:

 $Potency = \frac{(volume of Na_2S_2O_3 \ blank \ - \ volume of Na_2S_2O_3 \ study \ material) \ milliliters \times F}{weight of study \ material \ in \ milligrams}$

Where $F = \frac{\text{weight of reference material in milligrams} \times 856.2}{(volume of blank - volume of Na_2S_2O_3 reference material)}$

3. High-performance liquid chromatography

A solution of propiophenone, the internal standard, was prepared by weighing approximately 100 mg, quantitatively transferring to a 100-ml volumetric flask, and diluting to the mark with methanol. Approximately 300 mg of the compound was weighed and transferred quantitatively to a 100-ml volumetric flask.

With a volumetric pipette, 5 ml of the internal standard solution was placed in the flask containing the compound. The flask was filled to the mark with aqueous pH 7.4 phosphate buffer and shaken well to mix. A blank solution was prepared by pipetting 5 ml of the internal standard solution into a 100-ml flask and diluting to the mark with aqueous pH 7.4 phosphate buffer. Samples were analyzed on the following HPLC system:

Instrument: Waters 440 or 204 Column: Waters µBondpak C₁₈, 4 mm × 30 cm Detection: Ultraviolet 254 nm Column guard: Waters Bondapak C₁₈/Corasil, 4 mm × 4.5 cm Mobile phase: 50% (Water--5 mM heptanesulfonic acid; sodium salt, 1% acetic acid), 50% (methanol--5 mM heptanesulfonic acid, sodium salt, 1% acetic acid) Flow rate: 1 ml/min Compound solvent: Fisher pH 7.41 buffer

C. Results

1. Infrared spectroscopy: All bulk and reference spectra were comparable to the spectrum supplied by the analytical chemistry laboratory.

2. Titration

Date of <u>Analysis</u>	Lot No.	Potenc <u>Bulk</u>	y (µg/mg) (a) <u>Reference</u>	Percent Purity <u>Bulk</u>
12/16/80	61849K	856.3		
04/15/81		857.8		
08/14/81		901.0	897.0	100.4
11/05/81	33564-550	886.4		
12/11/81		860.1	865.8	99.3
04/13/82		884.0	898.8	98.4
09/09/82		836.8	841.4	99.5

(a) Results of duplicate analysis

3. High-performance liquid chromatography

Date of		Percer	nt Purity
<u>Analysis</u>	<u>Lot No.</u>	Bulk	Reference
06/13/80	61849K	~100	~100
08/18/80		~100	~100
12/16/80		~100	~100
04/15/81		~100	~100
08/13/81		~100	~100
11/05/81	33564-550	~100	
12/11/81		~100	~100
04/13/82		~100	~100
09/09/82		~ 99.4	~ 99.5

D. Conclusions: No notable degradation occurred throughout the studies.

APPENDIX I

PREPARATION AND CHARACTERIZATION

OF DOSE MIXTURES

I. Stability Study of Ampicillin Trihydrate Corn Oil Gavage Formulations Conducted at the Analytical Chemistry Laboratory

A. Study parameters

Concentration: 100 mg/ml Vehicle: Corn oil Duration: 14 days Temperature: Room temperature or 5° C Analysis times: 25° C storage--0, 0+3 hours, 1, 2, 7, 13, or 14 days 5° C storage--0, 2, 7, or 14 days

B. Sample preparation and storage: A suspension of 10.00 ± 0.01 g of ampicillin trihydrate in 84.0 g of corn oil (91.7 ml) was prepared by adding the chemical in small increments to the oil while the oil was stirred vigorously on a magnetic stirrer.

Aliquots of the suspension (32, approximately 1.5 g each) were transferred to tared 60-ml screw-cap vials and weighed to the nearest 0.1 mg. Three of the vials were randomly chosen and set aside for analysis after 3-hour exposure open to air and light. Five of the vials were randomly chosen for the zero-time analyses and to confirm homogeneity of the suspension.

The remaining 24 vials were randomly subdivided into 8 groups of 3 vials each for storage in the dark at 5° C and 25° C. From this latter group, triplicate vials were analyzed after 1, 2, 7, 13, or 14 days' storage at 25° C and after 2, 7, or 14 days' storage at 5° C. The target concentration of ampicillin trihydrate in the suspension was 100.0 mg/ml (106.4 mg/g).

C. Analysis procedure

1. Special reagents

Extracting solvent: 800 ml of reagent-grade methanol was diluted to 1 liter with 0.01 M sodium dihydrogen phosphate (1.38 g of NaH₂PO₄•H₂O per liter of water).

Internal standard solution: 73.04 mg of acetanilide was dissolved in 250 ml of methanol; then 125 ml was diluted to 500 ml with 0.01 M aqueous sodium dihydrogen phosphate.

2. Procedure: On each analysis day, samples were extracted with 40 ml of the extracting solvent by being shaken vigorously for 1 minute and sonicated for 8 minutes. After the sample was clarified by centrifugation, a 5-ml aliquot from each upper layer was mixed with 5 ml of internal standard solution and diluted to 25 ml with aqueous 0.01 M sodium dihydrogen phosphate.

A few milliliters of each diluted sample solution was filtered through a 0.5-µ Millipore filter and sealed in a 5-ml septum vial. The concentration of ampicillin trihydrate in the solutions was determined by the high-performance liquid chromatographic system described below:

Instrument: Waters Associates Model 202 Liquid Chromatograph Column: μBondapak C₁₈, 300 mm × 4 mm ID Guard column: Whatman CO:PELL; 70 mm × 4 mm ID Detector: Ultraviolet, 254 mm Mobile phase: 65% aqueous 0.01 M sodium dihydrogen phosphate 35% methanol Flow rate: 1 ml/min Injection volume: 20 μl Retention times: Study chemical, 5.3 min Reference standard, 7.3 min

D. Quality control protocols: Analysis was performed by making single injections in a randomized order of sample solutions prepared in triplicate on each study day. All determinations were related to an internal standard incorporated into the sample solutions. Results were calculated from relative response factors (RRF) computed from peak height measurements of the calibration standards by the following equations:

 $RRF = \frac{milligram \text{ per milliliter study chemical} \times \text{ peak height of internal standard}}{\text{peak height of study chemical} \times milligrams per milliliter of internal standard}$

then the milligrams per gram of chemical in the vehicle was calculated as

$\frac{\text{RRF} \times \text{sample peak height} \times \text{milligrams per milliliter internal standard} \times \text{DF}}{\text{peak height internal standard} \times \text{grams of sample}}$

where DF = dilution factor.

The linearity of the high-performance liquid chromatographic system was determined with standard solutions of ampicillin trihydrate at concentrations of 0.48, 0.80, and 0.96 mg/ml. The correlation coefficient was 0.99993. Homogeneity of the suspension determined on five weighings similar in size to that used for the samples showed a 0.4% maximum deviation from the mean concentration of 106.4 mg/g.

Storage Time (days)	Storage <u>Temperature</u>	Milligrams Ampicillin Trihydrate/ <u>Gram Corn Oil (a)</u>	Percent Recovery (b,c)
0		106.4	100.0 ± 0.4
$0\pm3\mathrm{h}$	Room temperature (open to air and lig		99.9 ± 0.9
1	Room temperature	e 105.6	99.3 ± 0.5
2	Room temperature	e 107.1	100.6 ± 0.8
2	5° C	107.0	100.8 ± 0.2
7	Room temperature	e 107.1	100.7 ± 0.6
7	5° C	106.7	100.3 ± 0.5
13	Room temperature	e 107.7	101.2 ± 0.2
14	Room temperature	e 107.9	101.4 ± 0.9
14	5° C	107.4	101.0 ± 1.2

E. Results: Fourteen-day stability study

(a) Target concentration of ampicillin trihydrate in corn oil suspension was 106.4 mg/g.

(b) Zero-time recovery yield, $99.0\% \pm 0.4\%$

(c) The error values in this table are maximum deviations from the mean.

F. Conclusions: Ampicillin trihydrate in a 100 mg/ml corn oil suspension showed no instability after 14 days' storage in the dark at 5° C or 25° C. Samples exposed 3 hours to air or light at room temperature also showed no loss within the limits of the study errors (\pm 0.9%).

II. Homogeneity Study of Ampicillin Trihydrate in Feed Conducted at the Analytical Chemistry Laboratory

- A. Premix preparation: Ampicillin trihydrate $(14.97 \pm 0.01 \text{ g})$ was transferred to a tared 600-ml beaker and mixed by spatula with approximately 15 g of feed. An additional 30 g and 60 g of feed were added and blended in the same manner; then a final portion of feed was incorporated to bring the total weight of the premix to 200 g.
- **B.** Bulk mixing and sampling: A 600-g quantity of feed was layered evenly in the blender; then the 200-g premix was added in roughly equal amounts to both sides of the blender. The fine material adhering to the beaker walls was taken up by briefly stirring 100 g of feed in the beaker and then adding it to the blender. After an additional 600 g of feed was layered over the premix, the blender ports were sealed, and the contents were blended for 15 minutes, with the intensifier bar turned on for the first 5 minutes. During the mixing operation, the blender shells were periodically tapped with a block of wood to knock loose any feed that may have become packed in the corners of the blender.

At the end of the 15-minute mixing period, approximately 40 g of the feed was sampled from the upper left and right shells and from the bottom discharge port. Triplicate 10.0-g portions of each sample were transferred to 200-ml centrifuge bottles for analysis. The target concentration of ampicillin trihydrate in the blend was 9,980 ppm.

C. Analysis

Special reagents: Extracting solution--200 ml of reagent-grade methanol was diluted to 1,000 ml with 0.01 M sodium dihydrogen phosphate (1.38 g of NaH₂PO₄•H₂O/liter in water).

Internal standard solution--reagent-grade acetanilide was dissolved in the extracting solution and diluted to a concentration of approximately 22 µg/ml.

Procedure: Samples (10 g) were extracted with 100 ml of extracting solution by shaking for 30 minutes on a Burrell Wrist-Action[®] shaker. The extracts were clarified by centrifugation. Five-milliliter aliquots were mixed with 5 ml of internal standard solution (D.2). A few milliliters of each mixture was filtered through a 0.5- μ Millipore filter and sealed in a 5-ml septum vial. The ampicillin trihydrate concentration of the solution was determined by the high-performance liquid chromatographic system described below.

Instrument: Waters Associates Model ALC-202 liquid chromatograph Column: Waters Associates µBondapak C₁₈ 300 mm × 4 mm, ID Guard Column: Whatman CO:PELL, 70 mm × 4 mm ID Detector: UV at 254 nm Attenuation: 0.02 AU/Full scale Mobile phase: Methanol (110 ml) diluted to 1,000 ml with aqueous 0.01 M sodium dihydrogen phosphate (D.1) Flow rate: 1 ml/min Injection volume: 15 µl Retention times: Study chemical--12.2 min Internal standard--14.9 min **D.** Quality assurance measures: Analyses were performed in a random order on single injections of sample extracts prepared in triplicate. Results were not corrected because the mean recovery yield of eight zero-time analyses was $100.3\% \pm 1\%$ of the target value. Results were calculated with two independently prepared external standard solutions injected four times throughout the chromatographic analysis. The linearity of the high-performance liquid chromatographic system was evaluated with standard solutions of ampicillin trihydrate in extracting solution at varying concentrations.

E. Feed homogeneity study results

Sampling Location	Ampicillin Trihydrate <u>in Feed (ppm) (a)</u>	<u>Percent Recovery (b)</u>
Right (c)	9,800	98
	<u>10,300</u>	<u>103</u>
	$Av = \overline{10,100}$	$Av = \overline{101} \pm 2$
Left	9,700	97
	10,200	102
	<u>9,800</u>	<u>98</u>
	$Av = \overline{9,900}$	$Av = \overline{99} \pm 2$
Bottom	9,200	92
	10,500	105
	10,500	<u>105</u>
	$Av = \overline{10,100}$	$Av = \overline{101} \pm 6$

(a) Target concentration of ampicillin trihydrate in feed was 9,980 ppm.

(b) Error values are average deviations from the mean and are the sum of the analytical method error plus feed blend variations.

(c) One sample was lost.

F. Conclusions: Ampicillin trihydrate was blended into rodent feed at 10,000 ppm and was sampled at three locations in the blender. The mean of triplicate analysis of the formulated diet from each sampling location varied by approximately 1% from the target concentration.

III. Stability Study of Ampicillin Trihydrate in Feed

A. Sample preparation and storage, analysis, and quality assurance: Four 12-oz size screw-cap jars were filled with approximately 250 g of formulated diet prepared as described in Section II. The jars were tightly sealed and stored in the dark at - 20°, 5°, 25°, or 45° C for the 2-week stability study.

The analysis and quality assurance measures were the same as those described in Section II.

B. Results

	Ampicillin Trihydrate	
Storage Temperature	in Feed (ppm) (a)	Percent Recovery (b)
– 20° C	9,600	96
	9,400	94
	<u>9,600</u>	<u>96</u>
	Av = 9,500	$Av = 95 \pm 1$
5° C	9,400	94
	9,000	90
	<u>9,000</u>	90 91 ± 3
	Av = 9,100	91 ± 3
25° C	8,600	86
	9,100	91
	<u>8,800</u>	<u>88</u>
	$Av = \overline{8,800}$	$Av = \overline{88} \pm 3$
45° C	6,100	61
	6,000	60
	<u>5,900</u>	<u>59</u>
	$Av = \overline{6,000}$	$Av = \overline{60} \pm 1$

(a) Target concentration of ampicillin trihydrate in feed was 10,000 ppm.

(b) Error values are maximum deviations from the mean and represent the sum of the analytical method error plus feed blend variations.

C. Conclusions: Ampicillin trihydrate was blended into rodent feed at 10,000 ppm and was unstable during storage. Recovery of the chemical after storage for 2 weeks in the dark was 88% at 25° C.

APPENDIX J

METHODS OF ANALYSIS OF DOSE MIXTURES

I. Study Laboratory

Duplicate 2-g samples of the dosing solutions were diluted to 100 or 200 ml with extraction solvent (200 ml of 0.01 M sodium dihydrogen phosphate diluted to 1,000 ml with spectrograde methanol). The density of each was also determined.

All samples were shaken and then sonicated for 15 minutes. Approximately 10 ml of each was centrifuged at 12,000 rpm for 15 minutes, and 3 ml of each was diluted to a final volume of 25 ml. The absorption of each was determined at 263 nm against extraction solvent, and the concentration was determined from a standard curve of ampicillin trihydrate dissolved in extraction solvent.

II. Analytical Chemistry Laboratory

- A. Preparation of spiked corn oil standards: Two standard solutions of ampicillin trihydrate in 0.1 N hydrochloric acid were prepared independently. These solutions were diluted with 0.1 N hydrochloric acid to make four additional standards. Aliquots (40 ml) of the six standard solutions were pipetted into individual 60-ml septum vials containing 2 g of undosed corn oil to make spiked corn oil standards bracketing the specified concentration range of the referee sample. Two grams of undosed corn oil in a 60-ml septum vial was treated with 40 ml of 0.1 N hydrochloric acid for use as a blank. After the vials were sealed, the spiked corn oil samples and the corn oil blank were used in the analysis procedure described below.
- **B.** Preparation of referee sample: Three portions (approximately 2 g each) of the referee corn oil suspension were transferred to individually tared 60-ml septum vials and were weighed to the nearest 0.001 g. A 40-ml volume of 0.1 N hydrochloric acid was pipetted into each vial; then the referee samples were sealed and analyzed immediately by the procedure below.
- C. Analysis: Vials containing the samples, standards, and the blank were agitated on a vortex mixer for 30 seconds and then shaken at maximum stroke on a Burrell Model 75 Wrist-Action® Shaker for 25 minutes. After being centrifuged for 3-5 minutes, the upper corn oil layer was aspirated off, and a 5-ml aliquot of the lower acid layer was diluted to 100 or 200 ml with 0.1 N hydrochloric acid. The solutions were thoroughly mixed, and the absorbance of each solution was measured versus 0.1 N hydrochloric acid in 1-cm quartz cells at 256 or 257 nm on a Cary 118 or Cary 219 spectrophotometer.

The total amount of ampicillin trihydrate in the referee corn oil samples was determined from a linear regression equation obtained from the standard data, relating the absorbance of each spiked corn oil sample and corn oil blank to the amount of chemical in the respective spiked corn oil standard.

D. Quality assurance measures: The referee corn oil suspension was analyzed in triplicate, and the corn oil blank sample was analyzed once. Individually spiked portions of undosed corn oil (six levels bracketing the specified concentration range of the sample) were prepared from two independently weighed standards and treated like the referee sample to obtain standard data.

APPENDIX K

RESULTS OF ANALYSIS OF DOSE MIXTURES

Ampicillin Trihydrate, NTP TR 318

TABLE K1. RESULTS OF ANALYSIS OF DOSE MIXTURES IN THE THIRTEEN-WEEKGAVAGE STUDIES OF AMPICILLIN TRIHYDRATE

		Ampicillin Trihydrate percent, w/v) (a)	Determined as a Percent of Target
Date Mixed	Target	Determined	
01/26/80	30	32.0	107
	20	21.2	106
	15	13.68	91
	(b) 10	9.46	95
	7.5	6.73	90
	5.0	4.79	96
	3.75	3.62	97
	2.5	2,56	102

(a) Results of duplicate analysis unless otherwise specified

(b) Result of a single analysis

TABLE K2. RESULTS OF ANALYSIS OF DOSE MIXTURES IN THE TWO-YEAR GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE

	Concentration of Ampicillin Trihydrate in Corn Oil for Target Concentration (percent, w/y) (a)		
Date Mixed	15	30	
08/22/80	15.3	28.9	
08/26/80	(b,c) 12.3	(b,c) 26.6	
09/17/80	(b) 14.7	(b) 28.0	
12/19/80	(c) 17.9	32.1	
02/13/81	15.6	28.9	
04/07/81	15.7	28.3	
06/05/81	14.6	27.9	
07/31/81	15.3	29.5	
09/23/81	15.1	29.5	
11/18/81	14.4	30.0	
01/14/82	14.9	30.4	
03/10/82	14.9	29.8	
05/05/82	15.0	30.7	
06/30/82	14.5	29.4	
08/11/82	14.3	29.6	
Mean (percent, w/v)	15.0	29.3	
Range (percent, w/v)	12.3-17.9	26.6-32.1	
Standard deviation	1.14	1.31	
Coefficient of variation (percent)	7.6	4.5	
Number of samples	15	15	

(a) Results of duplicate analysis unless otherwise specified

(b) Result of a single analysis(c) Out of specifications
TABLE K3. RESULTS OF REFEREE ANALYSIS OF DOSE MIXTURES IN THE TWO-YEAR GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE

	Lot	Target Concentration	Determined Concentration	
Date Mixed	Number	(percent, w/v)	Study Laboratory (a)	Referee Laboratory (b)
09/17/80	61849K	30	28.0	30.65
02/13/81		15	15.6	14.14
07/31/81		30	29.5	31.2
01/14/82	33564-550	15	14.9	15.2
08/11/82		30	29.6	33.1

(a) Results of duplicate analysis(b) Results of triplicate analysis

APPENDIX L

SENTINEL ANIMAL PROGRAM

I. Methods

Rodents used in the Carcinogenesis Program of the National Toxicology Program are produced in optimally clean facilities to eliminate potential pathogens that may affect study results. The Sentinel Animal Program is part of the periodic monitoring of animal health that occurs during the toxicologic evaluation of chemical compounds. Under this program, the disease state of the rodents is monitored via viral serology on sera from extra (sentinel) animals in the study rooms. These animals are untreated, and these animals and the study animals are both subject to identical environmental conditions. The sentinel animals come from the same production source and weanling groups as the animals used for the studies of chemical compounds.

Fifteen $B6C3F_1$ mice and 15 F344/N rats of each sex are selected at the time of randomization and allocation of the animals to the various study groups. Five animals of each designated sentinel group are killed at 6, 12, and 18 months on study. The blood from each animal is collected and clotted, and the serum is separated. The serum is cooled on ice and shipped to Microbiological Associates' Comprehensive Animal Diagnostic Service for determination of the viral antibody titers. The following tests are performed:

	Hemagglutination <u>Inhibition</u>	Complement <u>Fixation</u>	ELISA
Mice	PVM (pneumonia virus of mice) Reo 3 (reovirus type 3) GDVII (Theiler's encephalomyelitis virus) Poly (polyoma virus) MVM (minute virus of mice) Ectro (infectious ectromelia) Sendai	M.Ad. (mouse adenovirus) LCM (lymphocytic choriomeningitis virus) MHV (mouse hepatitis virus) (6 mo)	MHV (mouse hepatitis virus) (12, 18 mo)
Rats	PVM KRV (Kilham rat virus) H-1 (Toolan's H-1 virus) Sendai (6, 12, 18 mo)	RCV (rat coronavirus)	
II. Re	sults		

TABLE L1. MURINE VIRUS ANTIBODY DETERMINATIONS FOR RATS AND MICE IN THE TWO-
YEAR GAVAGE STUDIES OF AMPICILLIN TRIHYDRATE (a)

	Interval (months)	Number of Animals	Positive Serologic Reaction for
Rats	5		None positive
	14	10/10	PVM
	18	10/10	PVM
Mice	5		None positive
	14	6/9	PVM
		1/9	MHV
	18	2/6	PVM

(a) Blood samples were taken from sentinel animals at 5, 14, and 18 months after the start of dosing; samples were sent to Microbiological Associates, Inc. (Bethesda, MD) for the Animal Disease Screening Program.

APPENDIX M

INGREDIENTS, NUTRIENT COMPOSITION, AND MEASURED CONTAMINANT LEVELS IN NIH 07 RAT AND MOUSE RATION

Pelleted Diet: June 1980 to July 1982

(Manufactured by Zeigler Bros., Inc., Gardners, PA)

Ingredients (b)	Percent by Weight		
Ground #2 yellow shelled corn	24.50		
Ground hard winter wheat	23.00		
Soybean meal (49% protein)	12.00		
Fish meal (60% protein)	10.00		
Wheat middlings	10.00		
Dried skim milk	5.00		
Alfalfa meal (dehydrated, 17% protein)	4.00		
Corn gluten meal (60% protein)	3.00		
Soy oil	2.50		
Brewer's dried yeast	2.00		
Dry molasses	1.50		
Dicalcium phosphate	1.25		
Ground limestone	0.50		
Salt	0.50		
Premixes (vitamin and mineral)	0.25		

TABLE M1. INGREDIENTS OF NIH 07 RAT AND MOUSE RATION (a)

(a) NIH, 1978; NCI, 1976
(b) Ingredients ground to pass through a U.S. Standard Screen No. 16 before being mixed

	Amount	Source	
Vitamins		na na manana manana kai atau ana dalaman perta any manang penantanya terdapat kanana dapat kanya terdak terdap	
A	5,500,000 IU	Stabilized vitamin A palmitate or acetate	
D_3	4,600,000 IU	D-activated animal sterol	
K ₃	2.8 g	Menadione activity	
d-a-Tocopheryl acet	ate 20,000 IU		
Choline	560.0 g	Choline chloride	
Folic acid	2.2 g		
Niacin	30.0 g		
d-Pantothenic acid	18.0 g	d-Calcium pantothenate	
Riboflavin	3.4 g	•	
Thiamine	10.0 g	Thiamine mononitrate	
B ₁₂	4,000 µg		
Pyridoxine	1.7 g	Pyridoxine hydrochloride	
Biotin	140.0 mg	d-Biotin	
Minerals			
Iron	120.0 g	Iron sulfate	
Manganese	60.0 g	Manganous oxide	
Zinc	16.0 g	Zincoxide	
Copper	4.0 g	Copper sulfate	
Iodine	1.4 g	Calcium iodate	
Cobalt	0.4 g	Cobalt carbonate	

TABLE M2. VITAMINS AND MINERALS IN NIH 07 RAT AND MOUSE RATION (a)

(a) Per ton (2,000 lb) of finished product

Nutrient	Mean ± Standard Deviation	Range	Number of Samples
Crude protein (percent by weight)	24.04 ± 0.75	22.7-25.1	24
Crude fat (percent by weight)	4.84 ± 0.80	4.1-5.7	24
Crude fiber (percent by weight)	3.40 ± 0.29	2.9-4.3	24
Ash (percent by weight)	6.56 ± 0.50	5.7-7.43	24
ssential Amino Acids (percent of	total diet)		
Arginine	1.260	1.21-1.31	2
Cystine	0.395	0.39-0.40	2
Glycine	1.175	1.15-1.20	$\overline{2}$
Histidine	0.553	0.530-0.576	2
Isoleucine			2
	0.908	0.881-0.934	
Leucine	1.905	1.85-1.96	2
Lysine	1.250	1.20-1.30	2
Methionine	0.310	0.306-0.314	2
Phenylalanine	0.967	0.960-0.974	2
Threonine	0.834	0.827-0.840	2
Tryptophan	0.175	0.171-0.178	2
Tyrosine	0.587	0.566-0.607	$\overline{2}$
Valine	1.085	1.05-1.12	$\frac{1}{2}$
ssential Fatty Acids (percent of to	tal diet)		
Linoleic	2.37	,	1
Linolenic	0.308		1
Arachidonic	0.008		ī
litamins			
Vitamin A (IU/kg)	$11,146 \pm 2,291$	7,200-17,000	24
Vitamin D (IU/kg)	6,300	1,200 21,000	1
a-Tocopherol (ppm)	37.6	31.1-44.0	2
Thiamine (ppm)	17.6 ± 3.3	7.4-27.0	(b) 23
Riboflavin (ppm)	6.9	6.1-7.4	2
Niacin (ppm)	75	65-85	2
Pantothenic acid (ppm)	30.2	29.8-30.5	2
Pyridoxine (ppm)	7.2	5.6-8.8	2
Folic acid (ppm)	2.1	1.8-2.4	2
Biotin (ppm)	0.24	0.21-0.27	2
Vitamin B ₁₂ (ppb)	12.8	10.6-15.0	2
Choline (ppm)	3,315	3,200-3,430	$\frac{1}{2}$
linerals			
Calcium (percent)	1.29 ± 0.21	0.81-1.69	24
Phosphorus (percent)	1.00 ± 0.07	0.86-1.10	24
Potassium (percent)	0.809	0.772-0.846	2
Chloride (percent)	0.557	0.479-0.635	$\tilde{2}$
Sodium (percent)	0.304	0.258-0.349	2
Magnesium (percent)	0.172		$\frac{2}{2}$
		0.166-0.177	2 2
Sulfur (percent)	0.278	0.270-0.285	
Iron (ppm)	418	409-426	2
Manganese (ppm)	90.8	86.0-95.5	2
Zinc (ppm)	55.1	54.2-56.0	2
Copper (ppm)	12.68	9.65-15.70	2
Iodine (ppm)	2.58	1.52-3.64	2
Iodine (ppm) Chromium (ppm)	2.58 1.86	1.52-3.64 1.79-1.93	$\frac{2}{2}$

TABLE M3. NUTRIENT COMPOSITION OF NIH 07 RAT AND MOUSE RATION (a)

(a) One or two batches of feed analyzed for nutrients reported in this table were manufactured in January and/or April 1983. (b) One batch (July 22, 1981) was not analyzed for thiamine.

Contaminant	Mean ± Standard Deviation	Range	Number of Samples
Arsenic (ppm)	0.42 ± 0.21	<0.05-1.06	24
Cadmium (ppm)	0.09 ± 0.02	< 0.05-0.10	24
Lead (ppm)	0.99 ± 0.72	0.42-3.37	24
Mercury (ppm) (a)	< 0.05		24
Selenium (ppm)	0.31 ± 0.08	0.14-0.52	24
Aflatoxins(ppb)(a,b)	<10	<5.0-<10.0	24
Nitrate nitrogen (ppm) (c)	8.15 ± 3.65	2.1-17.0	24
Nitrite nitrogen (ppm) (c)	2.23 ± 1.59	0.4-6.9	24
BHA (ppm) (d,e)	4.55 ± 3.59	<0.4-13.0	24
3HT (ppm) (d)	2.55 ± 1.40	0.8-5.9	24
Aerobic plate count (CFU/g)	$40,592 \pm 32,056$	4,900-120,000	24
Coliform (MPN/g) (f)	30.3 ± 53.2	<3-240	23
Coliform (MPN/g) (g)	74.8 ± 224.5	<3-1,100	24
E. coli (MPN/g)	<3	,	24
Total nitrosamines (ppb) (h,i)	7.20 ± 7.04	0.8-24.5	21
Total nitrosamines (ppb) (i, j)	29.40 ± 64.76	0.8-273.2	24
V-Nitrosodimethylamine (ppb) (h,i)	5.67 ± 6.49	0.8-20.0	21
V-Nitrosodimethylamine (ppb) (i, j)	27.67 ± 64.38	0.8-272	24
V-Nitrosopyrrolidine (ppb)	1.35 ± 0.92	0-3.5	24
Pesticides (ppm)			
a-BHC (a,k)	< 0.01		24
β -BHC (a)	< 0.02		24
γ-BHC-Lindane (a)	< 0.01		24
δ -BHC (a)	< 0.01		24
Heptachlor (a)	< 0.01		24
Aldrin (a)	< 0.01		24
Heptachlor epoxide (a)	< 0.01		24
DDE (a)	< 0.01		24
DDD(a)	< 0.01		24
DDT (a)	< 0.01		24
HCB (a)	< 0.01		24
Mirex (a)	< 0.01		24
Methoxychlor (l)	< 0.05	0.09 (8/26/81)	24
Dieldrin (a)	< 0.01		24
Endrin (a)	< 0.01		24
Telodrin (a)	< 0.01		24
Chlordane (a)	< 0.05		24
Toxaphene (a)	< 0.1		24
Estimated PCBs (a)	< 0.2		24
Ronnel (a)	< 0.01		24
Ethion (a)	< 0.02		24
Trithion (a)	< 0.05		24
Diazinon (l)	< 0.1	0.2(4/27/81)	24
Methyl parathion (a)	< 0.02		24
Ethyl parathion (a)	< 0.02		24
Malathion (m)	0.09 ± 0.06	< 0.05-0.27	24
Endosulfan I (a)	< 0.01		24
Endosulfan II (a)	< 0.01		24
Endosulfan sulfate (a)	< 0.03		24

TABLE M4. CONTAMINANT LEVELS IN NIH 07 RAT AND MOUSE RATION

TABLE M4. CONTAMINANT LEVELS IN NIH 07 RAT AND MOUSE RATION (Continued)

(a) All values were less than the detection limit, which is given in the table as the mean.

(b) Detection limit was reduced from 10 ppb to 5 ppb after 7/81.

(c) Source of contamination: Alfalfa, grains, and fish meal

(d) Source of contamination: Soy oil and fish meal

(e) Two batches contained less than 0.5 ppm.

(f) Mean, standard deviation, and range exclude one very high value of 1,100 obtained for the batch produced on 12/16/80. MPN = most probable number.

(g) Mean, standard deviation, and range include the high value listed in footnote (f).

(h) Mean, standard deviation, and range exclude three very high values in the range of 115-273.2 ppb obtained for batches produced on 1/26/81, 2/23/81, and 4/27/81.

(i) All values were corrected for percent recovery.

(j) Mean, standard deviation, and range include the extreme values given in footnote h.

(k) BHC = hexachlorocyclohexane or benzene hexachloride

(1) One observation was above the detection limit. The value and the date it was obtained are listed under the range. (m) Eleven batches contained more than 0.05 ppm.

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APPENDIX N

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DATA AUDIT SUMMARY

Ampicillin Trihydrate, NTP TR 318

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The experimental data and tables of the draft NTP Technical Report on the toxicology and carcinogenesis studies of ampicillin trihydrate in F344/N rats and B6C3F₁ mice were examined for completeness, consistency, and accuracy and for procedures consistent with Good Laboratory Practice requirements. The audit was conducted at the NTP Archives from April to November 1985 by ImmuQuest Laboratories, Inc. (L. Brennecke, D.V.M., ACVP; S. Corson, HT, ASCP; P. Errico, M.A.; C. Reese; K. Witkin, Ph.D.), Pathco, Inc. (J. Seely, D.V.M., ACVP), and Dynamac Corporation (E. Zurek; L. Plankenhorn). The 2-year studies in rats and mice were conducted from September 1980 to September 1982 at Springborn Institute for Bioresearch, Inc., Spencerville, Ohio.

The full report of the audit is on file at the NTP, NIEHS. The audit included, but was not limited to, a review of the records of the inlife portion of the studies for 10% of the animals (body weight, clinical observations, palpation, dosing records); all records containing environmental data, mortality data, dose preparation data, chemical inventory and analyses, and corn oil analyses; a slide/block match for 100% of the high dose and vehicle control animals; all Individual Animal Data Records containing necropsy and histopathologic findings; and a 100% wet tissue review for animal/carcass identification. An audit was performed on inlife data (including dosing records, clinical observations, and body weights) for animals for which there were questions about identification.

Animal/carcass identification discrepancies were noted in rats and mice. Animals were identified by a combination of ear punches and toe clips to provide a unique cage-sequential animal number for each sex and species. In rats, the most common problem was that the animal identity was legible but did not agree with the bag number. Many of these problems were due to failure to clip the animal toes correctly. In mice, the most common problem was that the animal identity was illegible due to an opened ear hole. In most cases for which there was an identification problem, there was no indication that the animals had been interchanged. For example, one animal in a cage of five might be correctly labeled for cage number but not for animal number. A total of 36 male rats (15 vehicle control, 10 low dose, and 11 high dose); 29 female rats (4 vehicle control, 15 low dose, and 10 high dose); 36 male mice (14 vehicle control, 10 low dose, and 12 high dose); and 11 female mice (4 vehicle control, 2 low dose, and 5 high dose) had potential identification problems. The inlife data for these animals were reviewed, and there was no indication that animals had been interchanged between groups.

Observations during the inlife phase of the studies indicated that animals were occasionally misdosed, primarily due to miscalculations of body weight. Two mice were noted as being in the wrong cage but were replaced in the correct cage.

Not all chemical records and standard operation procedures were documented in the raw data, but referee analyses performed throughout the studies indicated that the doses were accurately prepared. Pathology findings were consistent with results reported in the Technical Report. There were a few miscellaneous lesions in nontarget organs that were not examined.

In conclusion, the data examined during this audit are considered adequate to support the contents of the Technical Report.

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