

**TDMS No.** 20107 - 03  
**Test Type:** CHRONIC  
**Route:** GAVAGE  
**Species/Strain:** RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine  
**CAS Number:** 99-97-8

**Date Report Requested:** 01/24/2011  
**Time Report Requested:** 10:59:00  
**First Dose M/F:** 10/20/04 / 10/21/04  
**Lab:** BAT

F1\_R2

**C Number:** C20107  
**Lock Date:** 02/20/2008  
**Cage Range:** ALL  
**Date Range:** ALL  
**Reasons For Removal:** ALL  
**Removal Date Range:** ALL  
**Treatment Groups:** Include ALL  
**Study Gender:** Both  
**TDMSE Version:** 2.3.0  
**PWG Approval Date:** NONE

Note: Animals arranged according to days on test.

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

ALIMENTARY SYSTEM

Esophagus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Liver	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Mesentery		+				+									+								
Pancreas	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Salivary Glands Sarcoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Tooth										+													

CARDIOVASCULAR SYSTEM

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

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

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N,N-Dimethyl-p-toluidine  
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First Dose M/F: 10/20/04 / 10/21/04  
Lab: BAT

FISCHER 344 RATS MALE 0 MG/KG	DAY ON TEST																									ANIMAL ID	males (cont...)
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
	3	6	6	6	6	6	6	6	6	6	6	6	7	7	7	7	7	7	7	7	7	7	7	7			
	3	0	1	1	1	4	6	6	8	8	8	9	1	2	2	2	2	2	2	2	2	2	2	2			
	7	9	0	0	2	5	4	5	0	0	8	9	0	7	7	7	7	7	7	7	7	7	7	7			
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
	2	2	1	2	4	0	4	4	0	4	1	3	1	0	0	0	1	1	1	1	1	1	2	2			
	6	5	3	0	2	9	9	4	6	7	2	8	8	2	7	8	0	1	5	6	7	9	1	3			
Blood Vessel	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+			
Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+			
Carcinoma, Metastatic, Uncertain Primary Site																								X			
<b>ENDOCRINE SYSTEM</b>																											
Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+			
Adenoma																											
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+			
Pheochromocytoma Benign																		X									
Pheochromocytoma Complex																						X		X			
Pheochromocytoma Malignant											X																
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+			
Adenoma																											
Carcinoma																								X			
Parathyroid Gland	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+			
Pituitary Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+			
Pars Distalis, Adenoma				X	X		X			X			X		X		X			X		X		X			
Pars Distalis, Carcinoma																											
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+			
Sarcoma, Metastatic, Salivary Glands											X																
Bilateral, C-cell, Adenoma																											
C-cell, Adenoma					X				X			X									X	X					
Follicular Cell, Adenoma																											

GENERAL BODY SYSTEM

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

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

NONE

GENITAL SYSTEM

Coagulating Gland

+

Epididymis

+ +

Preputial Gland

+ +

Prostate

+ +

Seminal Vesicle

+ +

Testes

+ +

Hemangioma

Bilateral, Interstitial Cell, Adenoma

Interstitial Cell, Adenoma

X X

HEMATOPOIETIC SYSTEM

Bone Marrow

+ +

Lymph Node

+ + + + + + + +

Lymph Node, Mandibular

M M

Lymph Node, Mesenteric

+ +

Spleen

+ +

Thymus

+ +

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Lab: BAT

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

**INTEGUMENTARY SYSTEM**

|                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Skin                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Basal Cell Adenoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibroma                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X | X |   |   |   |
| Fibroma, Multiple        |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Keratoacanthoma          |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |
| Sebaceous Gland, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**MUSCULOSKELETAL SYSTEM**

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

**NERVOUS SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Carcinoma, Metastatic, Pituitary Gland |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**RESPIRATORY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pheochromocytoma Malignant, Metastatic, Adrenal Medulla |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Nose  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Trachea   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

**SPECIAL SENSES SYSTEM**

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

| FISCHER 344 RATS MALE<br>0 MG/KG | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID | males<br>(cont...) |  |
|----------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|--------------------|--|
|                                  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |           |                    |  |
|                                  | 3           | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 0         |                    |  |
|                                  | 3           | 0 | 1 | 1 | 1 | 4 | 6 | 6 | 8 | 8 | 8 | 9 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 0         |                    |  |
|                                  | 7           | 9 | 0 | 0 | 2 | 5 | 4 | 5 | 0 | 0 | 8 | 9 | 0 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 0         |                    |  |
|                                  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         |                    |  |
|                                  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         |                    |  |
|                                  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         |                    |  |
|                                  | 2           | 2 | 1 | 2 | 4 | 0 | 4 | 4 | 0 | 4 | 1 | 3 | 1 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 0         |                    |  |
|                                  | 6           | 5 | 3 | 0 | 2 | 9 | 9 | 4 | 6 | 7 | 2 | 8 | 8 | 2 | 7 | 8 | 0 | 1 | 5 | 6 | 7 | 9 | 1 | 3 | 0         |                    |  |
| Eye                              | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         |                    |  |
| Harderian Gland                  | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         |                    |  |
| Zymbal's Gland                   | M           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         |                    |  |
| <b>URINARY SYSTEM</b>            |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |  |
| Kidney                           | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         |                    |  |
| Renal Tubule, Adenoma            |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |  |
| Urinary Bladder                  | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         |                    |  |
| <b>SYSTEMIC LESIONS</b>          |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |  |
| Multiple Organ                   | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         |                    |  |
| Leukemia Mononuclear             | X           | X |   |   | X | X |   | X | X |   | X | X | X |   |   |   | X |   |   |   |   |   |   |   |           |                    |  |
| Mesothelioma Malignant           |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |  |

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Lab: BAT

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

**ALIMENTARY SYSTEM**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Mesentery                 |   |   |   |   |   |   |   | + |   |   |   |   | + |   | + |   |   |   |   |   |   | + | 7  |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Sarcoma                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Tooth                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

**CARDIOVASCULAR SYSTEM**

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE<br>0 MG/KG   | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS                |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-------------------------|
|  | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      |                         |
| ANIMAL ID  | 0<br>0<br>0<br>3<br>1 | 0<br>0<br>0<br>3<br>3 | 0<br>0<br>0<br>5<br>0 | 0<br>0<br>0<br>0<br>1 | 0<br>0<br>0<br>0<br>4 | 0<br>0<br>0<br>0<br>5 | 0<br>0<br>0<br>1<br>4 | 0<br>0<br>0<br>2<br>4 | 0<br>0<br>0<br>2<br>4 | 0<br>0<br>0<br>2<br>7 | 0<br>0<br>0<br>3<br>0 | 0<br>0<br>0<br>3<br>4 | 0<br>0<br>0<br>3<br>7 | 0<br>0<br>0<br>3<br>9 | 0<br>0<br>0<br>4<br>3 | 0<br>0<br>0<br>4<br>5 | 0<br>0<br>0<br>4<br>6 | 0<br>0<br>0<br>0<br>3 | 0<br>0<br>0<br>2<br>2 | 0<br>0<br>0<br>2<br>8 | 0<br>0<br>0<br>3<br>2 | 0<br>0<br>0<br>3<br>5 | 0<br>0<br>0<br>3<br>6   |
| Blood Vessel   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                      |
| Heart<br>Carcinoma, Metastatic, Uncertain Primary Site   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50<br>1                 |
| <b>ENDOCRINE SYSTEM</b>  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                         |
| Adrenal Cortex<br>Adenoma  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50<br>1                 |
| Adrenal Medulla<br>Pheochromocytoma Benign<br>Pheochromocytoma Complex<br>Pheochromocytoma Malignant                               | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50<br>6<br>1<br>1       |
| Islets, Pancreatic<br>Adenoma<br>Carcinoma   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50<br>2<br>1            |
| Parathyroid Gland  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                      |
| Pituitary Gland<br>Pars Distalis, Adenoma<br>Pars Distalis, Carcinoma  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50<br>23<br>1           |
| Thyroid Gland<br>Sarcoma, Metastatic, Salivary Glands<br>Bilateral, C-cell, Adenoma<br>C-cell, Adenoma<br>Follicular Cell, Adenoma | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50<br>1<br>1<br>10<br>1 |

GENERAL BODY SYSTEM

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

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



TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

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

NONE

GENITAL SYSTEM

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Coagulating Gland                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |    |
| Epididymis                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Preputial Gland                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Prostate                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Seminal Vesicle                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Testes                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Hemangioma                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | 1 |   |   |    |    |
| Bilateral, Interstitial Cell, Adenoma | X | X | X | X | X |   | X | X |   | X | X | X |   |   |   | X |   | X |   |   |   |   |   | X | 29 |    |
| Interstitial Cell, Adenoma            |   |   |   |   |   |   |   |   | X |   |   |   |   | X | X |   | X | X | X | X |   |   |   |   | 11 |    |

HEMATOPOIETIC SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4 |    |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 0  |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Thymus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

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

**INTEGUMENTARY SYSTEM**

|                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Skin                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Basal Cell Adenoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   | 1  |
| Fibroma                  |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   | X |   |   |   |   | 5  |
| Fibroma, Multiple        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Keratoacanthoma          |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   |   |   |   |   | 3  |
| Sebaceous Gland, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | 1  |

**MUSCULOSKELETAL SYSTEM**

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Osteosarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | 1  |

**NERVOUS SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Carcinoma, Metastatic, Pituitary Gland |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   | 1  |

**RESPIRATORY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Pheochromocytoma Malignant, Metastatic, Adrenal Medulla |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Nose  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Trachea   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**SPECIAL SENSES SYSTEM**

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine  
 CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
 Time Report Requested: 10:59:00  
 First Dose M/F: 10/20/04 / 10/21/04  
 Lab: BAT

| FISCHER 344 RATS MALE<br>0 MG/KG | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |                       |  |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|
|                                  | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                |                       |                       |  |
| ANIMAL ID                        | 0<br>0<br>0<br>3<br>1 | 0<br>0<br>0<br>3<br>3 | 0<br>0<br>0<br>5<br>0 | 0<br>0<br>0<br>0<br>1 | 0<br>0<br>0<br>0<br>4 | 0<br>0<br>0<br>0<br>5 | 0<br>0<br>0<br>1<br>4 | 0<br>0<br>0<br>2<br>4 | 0<br>0<br>0<br>2<br>4 | 0<br>0<br>0<br>3<br>7 | 0<br>0<br>0<br>3<br>0 | 0<br>0<br>0<br>3<br>4 | 0<br>0<br>0<br>3<br>7 | 0<br>0<br>0<br>4<br>9 | 0<br>0<br>0<br>4<br>3 | 0<br>0<br>0<br>4<br>5 | 0<br>0<br>0<br>4<br>6 | 0<br>0<br>0<br>0<br>3 | 0<br>0<br>0<br>2<br>2 | 0<br>0<br>0<br>2<br>8 | 0<br>0<br>0<br>3<br>2 | 0<br>0<br>0<br>3<br>5 | 0<br>0<br>0<br>3<br>6 | 0<br>0<br>0<br>4<br>0 | 0<br>0<br>0<br>4<br>1 | 0<br>0<br>0<br>4<br>8 |  |
| Eye                              | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |  |
| Harderian Gland                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |  |
| Zymbal's Gland                   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                    |  |
| <b>URINARY SYSTEM</b>            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |
| Kidney                           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |  |
| Renal Tubule, Adenoma            |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |  |
| Urinary Bladder                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |  |
| <b>SYSTEMIC LESIONS</b>          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |
| Multiple Organ                   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |  |
| Leukemia Mononuclear             |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       | X                     |                       |                       | 14                    |  |
| Mesothelioma Malignant           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |  |

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine  
 CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
 Time Report Requested: 10:59:00  
 First Dose M/F: 10/20/04 / 10/21/04  
 Lab: BAT

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

ALIMENTARY SYSTEM

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum<br>Carcinoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Mesentery                            |   |   |   |   |   |   | + |   | + |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |
| Pancreas                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Salivary Glands                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Glandular                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Tongue<br>Squamous Cell Papilloma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| DAY ON TEST                    | FISCHER 344 RATS MALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID                | males<br>(cont...)      |   |  |
|--------------------------------|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------------|-------------------------|---|--|
|                                | 0                     | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                          |                         |   |  |
| 6                              | 2                     | 2 | 1 | 3 | 8 | 0 | 2 | 7 | 9 | 9 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 000000000000000000000000 | 84510767223276          |   |  |
| 2                              | 4                     | 2 | 0 | 8 | 1 | 4 | 4 | 5 | 5 | 3 | 1 | 1 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 000000000000000000000000 | 88789559778566666777889 |   |  |
| Tooth                          |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | + +   |  |
| <b>CARDIOVASCULAR SYSTEM</b>   |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         |   |  |
| Blood Vessel                   |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | +       |  |
| Heart                          |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | +       |  |
| <b>ENDOCRINE SYSTEM</b>        |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         |   |  |
| Adrenal Cortex                 |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | +       |  |
| Osteosarcoma, Metastatic, Bone |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | + X     |  |
| Adrenal Medulla                |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | +       |  |
| Pheochromocytoma Benign        |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | +       |  |
| Pheochromocytoma Complex       |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | + X     |  |
| Islets, Pancreatic             |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | +       |  |
| Adenoma                        |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | + X X X |  |
| Parathyroid Gland              |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | M +     |  |
| Pituitary Gland                |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | +       |  |
| Pars Distalis, Adenoma         |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | + X X X |  |
| Pars Distalis, Carcinoma       |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | + X     |  |
| Thyroid Gland                  |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | + + + A +   |  |
| C-cell, Adenoma                |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | + X X X |  |
| C-cell, Carcinoma              |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | + X X X |  |
| Follicular Cell, Carcinoma     |                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                          |                         | + X X X |  |

**GENERAL BODY SYSTEM**

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

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

TDMS No. 20107 - 03  
Test Type: CHRONIC  
Route: GAVAGE  
Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine  
CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
Time Report Requested: 10:59:00  
First Dose M/F: 10/20/04 / 10/21/04  
Lab: BAT

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

NONE

GENITAL SYSTEM

Coagulating Gland

+ +

Epididymis

+ +

Preputial Gland  
Adenoma

+ +

Prostate

+ +

Seminal Vesicle

+ +

Testes  
Bilateral, Interstitial Cell, Adenoma  
Interstitial Cell, Adenoma

+  
X X X X X X X X X X X X X X  
X X X X X X X X

HEMATOPOIETIC SYSTEM

Bone Marrow

+ +

Lymph Node

+ +

Lymph Node, Mandibular

M M

Lymph Node, Mesenteric

+ +

Spleen  
Hemangiosarcoma

+  
X

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

M .. Missing tissue  
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TDMS No. 20107 - 03  
 Test Type: CHRONIC  
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P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine  
 CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
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 Lab: BAT

| FISCHER 344 RATS MALE<br>6 MG/KG       | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | ANIMAL ID             | males<br>(cont...) |  |
|--|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|-----------------------|--------------------|--|
|  | 0<br>0<br>6<br>2 | 0<br>3<br>2<br>4 | 0<br>5<br>1<br>2 | 0<br>5<br>3<br>0 | 0<br>5<br>8<br>8 | 0<br>6<br>0<br>1 | 0<br>6<br>2<br>4 | 0<br>6<br>7<br>4 | 0<br>6<br>9<br>5 | 0<br>6<br>9<br>5 | 0<br>7<br>1<br>3 | 0<br>7<br>2<br>1 | 0<br>7<br>2<br>1 | 0<br>7<br>2<br>2 | 0<br>7<br>2<br>2 | 0<br>7<br>2<br>2 | 0<br>7<br>2<br>2 | 0<br>7<br>2<br>2 | 0<br>7<br>2<br>2 | 0<br>7<br>2<br>2 | 0<br>7<br>2<br>2 | 0<br>7<br>2<br>2 | 0<br>7<br>2<br>2 |   |                       |                    |  |
| Thymus                                 | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| <b>INTEGUMENTARY SYSTEM</b>            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                       |                    |  |
| Mammary Gland<br>Carcinoma             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| Skin                                   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| Basal Cell Carcinoma                   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| Fibroma                                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| Fibroma, Multiple                      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| Keratoacanthoma                        |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| Lipoma                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| Sarcoma                                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| <b>MUSCULOSKELETAL SYSTEM</b>          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                       |                    |  |
| Bone                                   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| Osteosarcoma                           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| <b>NERVOUS SYSTEM</b>                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                       |                    |  |
| Brain                                  | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| Carcinoma, Metastatic, Pituitary Gland |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| Spinal Cord                            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| Osteosarcoma, Metastatic, Bone         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| <b>RESPIRATORY SYSTEM</b>              |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |                       |                    |  |
| Lung                                   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |
| Alveolar/Bronchiolar Adenoma           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 0<br>0<br>0<br>8<br>4 | males<br>(cont...) |  |

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

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

Osteosarcoma, Metastatic, Bone

X

Nose  
 Transitional Epithelium, Adenoma

+ + + A + + + + + + + + + + + + + + + + + X

Trachea

+ +

SPECIAL SENSES SYSTEM

Eye

+ +

Harderian Gland

+ +

Zymbal's Gland

+ +

URINARY SYSTEM

Kidney  
 Oncocytoma Benign

+ +

Urinary Bladder

+ +

SYSTEMIC LESIONS

Multiple Organ  
 Leukemia Mononuclear  
 Mesothelioma Malignant

+  
 X

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

M .. Missing tissue  
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 BLANK .. Not examined microscopically





TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

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

Tooth 2

CARDIOVASCULAR SYSTEM

Blood Vessel 50

Heart 50

ENDOCRINE SYSTEM

Adrenal Cortex 50  
 Osteosarcoma, Metastatic, Bone 1

Adrenal Medulla 50  
 Pheochromocytoma Benign 2  
 Pheochromocytoma Complex 1

Islets, Pancreatic 50  
 Adenoma 6

Parathyroid Gland 49

Pituitary Gland 50  
 Pars Distalis, Adenoma 27  
 Pars Distalis, Carcinoma 1

Thyroid Gland 49  
 C-cell, Adenoma 7  
 C-cell, Carcinoma 1  
 Follicular Cell, Carcinoma 2

GENERAL BODY SYSTEM

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

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

| DAY ON TEST | FISCHER 344 RATS MALE |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |
|-------------|-----------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
|             | 07                    | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   | 07   |          |
| 6 MG/KG     | ANIMAL ID             | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 0089 | 23       |

NONE

**GENITAL SYSTEM**

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|
| Coagulating Gland                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2       |
| Epididymis                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Preputial Gland Adenoma               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X | + | 50<br>1 |
| Prostate                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Seminal Vesicle                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Testes                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Bilateral, Interstitial Cell, Adenoma |   | X |   | X |   | X |   |   |   |   |   |   | X | X | X | X | X | X |   |   | X | X | X | 23      |
| Interstitial Cell, Adenoma            |   |   | X |   |   | X | X | X | X | X | X |   |   |   |   |   |   | X |   |   |   | X |   | 13      |

**HEMATOPOIETIC SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 0  |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Hemangiosarcoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE<br>6 MG/KG                | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | * TOTALS         |                  |                  |                  |                  |                  |         |
|---|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---------|
|   | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 |                  | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 |         |
| ANIMAL ID                                       | 0<br>0<br>8<br>9 | 0<br>0<br>0<br>9 | 0<br>0<br>0<br>9 | 0<br>0<br>0<br>5 | 0<br>0<br>0<br>5 | 0<br>0<br>0<br>6 | 0<br>0<br>0<br>6 | 0<br>0<br>0<br>7 | 0<br>0<br>0<br>7 | 0<br>0<br>0<br>7 | 0<br>0<br>0<br>8 | 0<br>0<br>0<br>8 | 0<br>0<br>0<br>8 | 0<br>0<br>0<br>9 | 0<br>0<br>0<br>9 | 0<br>0<br>0<br>9 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>1 | 0<br>0<br>0<br>5 | 0<br>0<br>0<br>5 | 0<br>0<br>0<br>5 | 0<br>0<br>0<br>5 | 0<br>0<br>0<br>6 | 0<br>0<br>0<br>6 | 0<br>0<br>0<br>9 | 0<br>0<br>0<br>9 |         |
| Thymus  | +                | +                | +                | +                | +                | +                | +                | +                | +                | M                | +                | +                | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 48      |
| <b>INTEGUMENTARY SYSTEM</b>                     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |         |
| Mammary Gland<br>Carcinoma                      | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50<br>1 |
| Skin  | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50      |
| Basal Cell Carcinoma                            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1       |
| Fibroma   |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  | 3       |
| Fibroma, Multiple                               |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  | 1       |
| Keratoacanthoma                                 |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  | 3       |
| Lipoma  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1       |
| Sarcoma   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1       |
| <b>MUSCULOSKELETAL SYSTEM</b>                   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |         |
| Bone<br>Osteosarcoma                            | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50<br>1 |
| <b>NERVOUS SYSTEM</b>                           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |         |
| Brain<br>Carcinoma, Metastatic, Pituitary Gland | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50<br>1 |
| Spinal Cord<br>Osteosarcoma, Metastatic, Bone   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1<br>1  |
| <b>RESPIRATORY SYSTEM</b>                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |         |
| Lung<br>Alveolar/Bronchiolar Adenoma            | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50<br>1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
 + .. Tissue examined microscopically  
 X .. Lesion present  
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| FISCHER 344 RATS MALE<br>6 MG/KG         | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |
|--|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|
|  | 07          | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     | 07     |          |
| ANIMAL ID                                | 000896      | 000999 | 000556 | 000556 | 000666 | 000666 | 000777 | 000777 | 000777 | 000888 | 000888 | 000999 | 000999 | 000999 | 001000 | 001000 | 001000 | 001000 | 001000 | 001000 | 001000 | 001000 | 001000 | 001000 |          |
| Osteosarcoma, Metastatic, Bone           |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1      |          |
| Nose<br>Transitional Epithelium, Adenoma | +           | +      |        | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 49     |          |
|  |             |        |        | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 3      |          |
| Trachea                                  | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50     |          |
| <b>SPECIAL SENSES SYSTEM</b>             |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Eye                                      | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50     |          |
| Harderian Gland                          | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50     |          |
| Zymbal's Gland                           | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50     |          |
| <b>URINARY SYSTEM</b>                    |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Kidney<br>Oncocytoma Benign              | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      |        | +      | +      | +      | 50     |          |
|  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | X      |        |        | 1      |          |
| Urinary Bladder                          | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50     |          |
| <b>SYSTEMIC LESIONS</b>                  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Multiple Organ<br>Leukemia Mononuclear   | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50     |          |
|  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1      |          |
| Mesothelioma Malignant                   |             |        |        |        |        |        |        |        |        |        |        |        |        | X      |        |        |        |        |        | X      |        |        |        | 2      |          |

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | ANIMAL ID | males<br>(cont...) |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------|--------------------|
|                       | 0<br>1<br>2<br>9      | 0<br>1<br>4<br>7      | 0<br>2<br>3<br>3      | 0<br>2<br>3<br>7      | 0<br>5<br>1<br>9      | 0<br>5<br>3<br>8      | 0<br>5<br>8<br>1      | 0<br>6<br>1<br>2      | 0<br>6<br>1<br>6      | 0<br>6<br>2<br>6      | 0<br>6<br>4<br>3      | 0<br>6<br>4<br>5      | 0<br>6<br>6<br>4      | 0<br>6<br>6<br>1      | 0<br>6<br>8<br>0      | 0<br>6<br>8<br>6      | 0<br>7<br>0<br>7      | 0<br>7<br>1<br>2      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      |                       |           |                    |
| 20 MG/KG              | 0<br>0<br>1<br>4<br>1 | 0<br>0<br>1<br>3<br>8 | 0<br>0<br>1<br>4<br>4 | 0<br>0<br>1<br>3<br>6 | 0<br>0<br>1<br>0<br>3 | 0<br>0<br>1<br>0<br>5 | 0<br>0<br>1<br>2<br>3 | 0<br>0<br>1<br>1<br>4 | 0<br>0<br>1<br>1<br>5 | 0<br>0<br>1<br>2<br>2 | 0<br>0<br>1<br>4<br>0 | 0<br>0<br>1<br>2<br>9 | 0<br>0<br>1<br>1<br>9 | 0<br>0<br>1<br>1<br>3 | 0<br>0<br>1<br>3<br>4 | 0<br>0<br>1<br>3<br>9 | 0<br>0<br>1<br>4<br>8 | 0<br>0<br>1<br>3<br>3 | 0<br>0<br>1<br>0<br>4 | 0<br>0<br>1<br>0<br>6 | 0<br>0<br>1<br>0<br>8 | 0<br>0<br>1<br>0<br>1 | 0<br>0<br>1<br>1<br>7 | 0<br>0<br>1<br>1<br>1 |           |                    |

ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hepatocellular Adenoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatocellular Carcinoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mesentery                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Tooth                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

CARDIOVASCULAR SYSTEM

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE<br>20 MG/KG     | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | males<br>(cont...) |                  |                  |                  |                  |                  |
|---------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|--------------------|------------------|------------------|------------------|------------------|------------------|
|                                       | 0<br>1<br>2<br>9 | 0<br>1<br>4<br>7 | 0<br>2<br>3<br>3 | 0<br>2<br>3<br>7 | 0<br>5<br>1<br>9 | 0<br>5<br>3<br>8 | 0<br>5<br>8<br>1 | 0<br>6<br>1<br>2 | 0<br>6<br>1<br>6 | 0<br>6<br>2<br>6 | 0<br>6<br>4<br>3 | 0<br>6<br>4<br>5 | 0<br>6<br>6<br>4 | 0<br>6<br>6<br>1 | 0<br>6<br>8<br>0 | 0<br>6<br>8<br>6 | 0<br>7<br>0<br>7 | 0<br>7<br>1<br>2 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 |           |                    | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 |
| Blood Vessel                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | +                | +                | +                | +                |
| Heart                                 | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | +                | +                | +                | +                |
| <b>ENDOCRINE SYSTEM</b>               |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Adrenal Cortex                        | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | +                | +                | +                | +                |
| Adrenal Medulla                       | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | +                | +                | +                | +                |
| Pheochromocytoma Benign               |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Pheochromocytoma Malignant            |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  | X                |
| Islets, Pancreatic                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | +                | +                | +                | +                |
| Adenoma                               |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  | X                |
| Parathyroid Gland                     | +                | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | +                | +                | +                | +                |
| Pituitary Gland                       | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | +                | +                | +                | +                |
| Pars Distalis, Adenoma                |                  |                  |                  |                  |                  |                  |                  | X                |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Thyroid Gland                         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                  | +                | +                | +                | +                | +                |
| Bilateral, C-cell, Adenoma            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| C-cell, Adenoma                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Follicular Cell, Adenoma              |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Follicular Cell, Carcinoma            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| <b>GENERAL BODY SYSTEM</b>            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |
| Tissue NOS                            | +                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  | +                |
| Carcinoma, Metastatic, Zymbal'S Gland |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  | X                |
| <b>GENITAL SYSTEM</b>                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |                  |                  |                  |                  |                  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
 + .. Tissue examined microscopically  
 X .. Lesion present  
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M .. Missing tissue  
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TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE<br>20 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | males<br>(cont...) |                       |                       |
|-----------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|--------------------|-----------------------|-----------------------|
|                                   | 0<br>1<br>2<br>9 | 0<br>1<br>4<br>7 | 0<br>2<br>3<br>3 | 0<br>2<br>3<br>7 | 0<br>5<br>1<br>9 | 0<br>5<br>3<br>8 | 0<br>5<br>8<br>1 | 0<br>6<br>2<br>6 | 0<br>6<br>1<br>6 | 0<br>6<br>2<br>6 | 0<br>6<br>4<br>3 | 0<br>6<br>4<br>5 | 0<br>6<br>4<br>6 | 0<br>6<br>5<br>1 | 0<br>6<br>6<br>0 | 0<br>6<br>8<br>6 | 0<br>6<br>8<br>8 | 0<br>7<br>0<br>2 | 0<br>7<br>1<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 |           |                    | 0<br>7<br>2<br>7      |                       |
|                                   | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0         | 0                  | 0<br>0<br>1<br>4<br>1 | 0<br>0<br>1<br>3<br>8 |

|                                       |   |  |  |  |  |   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |   |   |   |
|---------------------------------------|---|--|--|--|--|---|--|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|--|---|---|---|
| Coagulating Gland                     | + |  |  |  |  |   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |   |   |   |
| Epididymis                            | + |  |  |  |  |   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |   |   |   |
| Preputial Gland<br>Adenoma            | + |  |  |  |  |   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |   |   |   |
| Prostate<br>Adenoma                   | + |  |  |  |  |   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |   |   |   |
| Seminal Vesicle                       | + |  |  |  |  |   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |   |   |   |
| Testes                                | + |  |  |  |  |   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |   |   |   |
| Bilateral, Interstitial Cell, Adenoma |   |  |  |  |  | X |  | X | X | X |   | X | X | X |   |   |   | X | X | X |  |  |  | X | X | X |
| Interstitial Cell, Adenoma            |   |  |  |  |  | X |  |   |   |   | X |   |   |   | X | X | X |   |   |   |  |  |  | X |   |   |

HEMATOPOIETIC SYSTEM

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

INTEGUMENTARY SYSTEM

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

M .. Missing tissue  
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TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE<br>20 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID             | males<br>(cont...) |
|-----------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------------------|--------------------|
|                                   | 0<br>1<br>2<br>9 | 0<br>1<br>4<br>7 | 0<br>2<br>3<br>3 | 0<br>2<br>3<br>7 | 0<br>5<br>1<br>9 | 0<br>5<br>3<br>8 | 0<br>5<br>8<br>1 | 0<br>6<br>1<br>2 | 0<br>6<br>1<br>6 | 0<br>6<br>2<br>6 | 0<br>6<br>4<br>3 | 0<br>6<br>4<br>5 | 0<br>6<br>5<br>4 | 0<br>6<br>6<br>1 | 0<br>6<br>8<br>0 | 0<br>6<br>8<br>6 | 0<br>6<br>8<br>8 | 0<br>7<br>0<br>7 | 0<br>7<br>1<br>2 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 |                       |                    |
|                                   | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0<br>0<br>1<br>4<br>1 |                    |

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Mammary Gland             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Skin                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Basal Cell Adenoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Basal Cell Carcinoma      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |  |
| Fibroma                   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Keratoacanthoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |  |
| Keratoacanthoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lipoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Liposarcoma               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |  |
| Sarcoma                   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Sebaceous Gland, Adenoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |  |

MUSCULOSKELETAL SYSTEM

|           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bone      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Chondroma |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

NERVOUS SYSTEM

|                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Brain                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Astrocytoma Malignant         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Granular Cell Tumor Malignant |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

RESPIRATORY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Alveolar/Bronchiolar Adenoma                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Carcinoma, Metastatic, Tissue Nos                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Pheochromocytoma Malignant, Metastatic, Adrenal Medulla |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |  |

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Nose | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE<br>20 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | males<br>(cont...) |
|-----------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|--------------------|
|                                   | 0<br>1<br>2<br>9 | 0<br>1<br>4<br>7 | 0<br>2<br>3<br>3 | 0<br>2<br>3<br>7 | 0<br>5<br>1<br>9 | 0<br>5<br>3<br>8 | 0<br>5<br>8<br>1 | 0<br>6<br>2<br>6 | 0<br>6<br>1<br>6 | 0<br>6<br>2<br>6 | 0<br>6<br>4<br>3 | 0<br>6<br>4<br>5 | 0<br>6<br>4<br>4 | 0<br>6<br>5<br>6 | 0<br>6<br>6<br>1 | 0<br>6<br>8<br>0 | 0<br>6<br>8<br>8 | 0<br>6<br>8<br>7 | 0<br>7<br>1<br>2 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 |           |                    |
| Transitional Epithelium, Adenoma  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           | X                  |
| Trachea                           | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                    |
| <b>SPECIAL SENSES SYSTEM</b>      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |
| Eye                               | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                    |
| Harderian Gland                   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                    |
| Zymbal's Gland<br>Carcinoma       | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                    |
| <b>URINARY SYSTEM</b>             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |
| Kidney                            | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                    |
| Urinary Bladder                   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                    |
| <b>SYSTEMIC LESIONS</b>           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |
| Multiple Organ                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                    |
| Leukemia Mononuclear              |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |
| Mesothelioma Malignant            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                    |

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE | DAY ON TEST |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | * TOTALS |
|-----------------------|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|
|                       | 07          | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 |          |
| 20 MG/KG              | 07          | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 50       |
|                       | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 50       |
|                       | 01          | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 50       |
|                       | 02          | 02 | 03 | 03 | 04 | 04 | 04 | 04 | 05 | 00 | 00 | 00 | 00 | 01 | 01 | 01 | 02 | 02 | 03 | 04 | 04 | 01 | 02 | 03 | 50       |
|                       | 05          | 06 | 01 | 02 | 03 | 05 | 06 | 09 | 00 | 01 | 02 | 07 | 09 | 00 | 02 | 06 | 07 | 08 | 07 | 02 | 07 | 08 | 00 | 04 | 50       |

ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Hepatocellular Adenoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Hepatocellular Carcinoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   | 1  |
| Mesentery                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Tooth                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + | 2  |

CARDIOVASCULAR SYSTEM

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE<br>20 MG/KG     | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |
|---------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|                                       | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      |                       |
| ANIMAL ID                             | 0<br>0<br>1<br>2<br>5 | 0<br>0<br>1<br>2<br>6 | 0<br>0<br>1<br>3<br>1 | 0<br>0<br>1<br>3<br>2 | 0<br>0<br>1<br>4<br>3 | 0<br>0<br>1<br>4<br>5 | 0<br>0<br>1<br>4<br>6 | 0<br>0<br>1<br>4<br>9 | 0<br>0<br>1<br>4<br>0 | 0<br>0<br>1<br>5<br>1 | 0<br>0<br>1<br>0<br>2 | 0<br>0<br>1<br>0<br>7 | 0<br>0<br>1<br>0<br>9 | 0<br>0<br>1<br>0<br>0 | 0<br>0<br>1<br>1<br>2 | 0<br>0<br>1<br>1<br>6 | 0<br>0<br>1<br>2<br>7 | 0<br>0<br>1<br>2<br>8 | 0<br>0<br>1<br>2<br>8 | 0<br>0<br>1<br>2<br>8 | 0<br>0<br>1<br>2<br>8 |
| Blood Vessel                          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Heart                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| <b>ENDOCRINE SYSTEM</b>               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| Adrenal Cortex                        | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Adrenal Medulla                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Pheochromocytoma Benign               |                       |                       |                       |                       |                       |                       | X                     |                       | X                     |                       |                       |                       | X                     | X                     |                       |                       | X                     |                       |                       | X                     | 8                     |
| Pheochromocytoma Malignant            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       | 3                     |
| Islets, Pancreatic                    | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Adenoma                               |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     | 4                     |
| Parathyroid Gland                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | 45                    |
| Pituitary Gland                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Pars Distalis, Adenoma                |                       |                       | X                     | X                     | X                     |                       |                       | X                     |                       | X                     | X                     |                       |                       | X                     | X                     |                       |                       | X                     |                       |                       | 18                    |
| Thyroid Gland                         | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Bilateral, C-cell, Adenoma            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| C-cell, Adenoma                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       | X                     |                       |                       | X                     | X                     |                       | 7                     |
| Follicular Cell, Adenoma              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Follicular Cell, Carcinoma            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       | 1                     |
| <b>GENERAL BODY SYSTEM</b>            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| Tissue NOS                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |
| Carcinoma, Metastatic, Zymbal'S Gland |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| <b>GENITAL SYSTEM</b>                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
 + .. Tissue examined microscopically  
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TDMS No. 20107 - 03  
 Test Type: CHRONIC  
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**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE<br>20 MG/KG               | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |                       |                       |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|   | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      |                       | 0<br>7<br>2<br>7      |                       |
| ANIMAL ID                                       | 0<br>0<br>1<br>2<br>5 | 0<br>0<br>1<br>2<br>6 | 0<br>0<br>1<br>3<br>1 | 0<br>0<br>1<br>3<br>2 | 0<br>0<br>1<br>4<br>3 | 0<br>0<br>1<br>4<br>5 | 0<br>0<br>1<br>4<br>6 | 0<br>0<br>1<br>4<br>9 | 0<br>0<br>1<br>4<br>0 | 0<br>0<br>1<br>5<br>1 | 0<br>0<br>1<br>0<br>2 | 0<br>0<br>1<br>0<br>7 | 0<br>0<br>1<br>0<br>9 | 0<br>0<br>1<br>0<br>0 | 0<br>0<br>1<br>1<br>2 | 0<br>0<br>1<br>1<br>6 | 0<br>0<br>1<br>2<br>7 | 0<br>0<br>1<br>2<br>8 | 0<br>0<br>1<br>3<br>7 | 0<br>0<br>1<br>4<br>2 | 0<br>0<br>1<br>4<br>7 | 0<br>0<br>1<br>1<br>8 | 0<br>0<br>1<br>2<br>0 |
| Coagulating Gland                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Epididymis                                      | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Preputial Gland<br>Adenoma                      | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50<br>1               |
| Prostate<br>Adenoma                             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50<br>1               |
| Seminal Vesicle                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Testes<br>Bilateral, Interstitial Cell, Adenoma | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Interstitial Cell, Adenoma                      | X                     | X                     | X                     |                       |                       | X                     | X                     |                       |                       | X                     | X                     | X                     | X                     | X                     |                       | X                     | X                     | X                     | X                     | X                     | X                     | X                     | 33                    |
|   |                       |                       |                       | X                     | X                     |                       |                       | X                     | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 10                    |
| <b>HEMATOPOIETIC SYSTEM</b>                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| Bone Marrow                                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Lymph Node                                      |                       |                       |                       |                       | +                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |
| Lymph Node, Mandibular                          | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | M                     | 0                     |
| Lymph Node, Mesenteric                          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Spleen  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |
| Thymus  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 48                    |
| <b>INTEGUMENTARY SYSTEM</b>                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE<br>20 MG/KG                       | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |                       |                       |    |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----|
|   | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      |                       | 0<br>7<br>2<br>7      |                       |    |
| ANIMAL ID   | 0<br>0<br>1<br>2<br>5 | 0<br>0<br>1<br>2<br>6 | 0<br>0<br>1<br>3<br>1 | 0<br>0<br>1<br>3<br>2 | 0<br>0<br>1<br>4<br>3 | 0<br>0<br>1<br>4<br>5 | 0<br>0<br>1<br>4<br>6 | 0<br>0<br>1<br>4<br>9 | 0<br>0<br>1<br>5<br>0 | 0<br>0<br>1<br>0<br>1 | 0<br>0<br>1<br>0<br>2 | 0<br>0<br>1<br>0<br>7 | 0<br>0<br>1<br>0<br>9 | 0<br>0<br>1<br>1<br>0 | 0<br>0<br>1<br>1<br>2 | 0<br>0<br>1<br>1<br>6 | 0<br>0<br>1<br>2<br>7 | 0<br>0<br>1<br>2<br>8 | 0<br>0<br>1<br>3<br>7 | 0<br>0<br>1<br>4<br>2 | 0<br>0<br>1<br>4<br>7 | 0<br>0<br>1<br>1<br>8 | 0<br>0<br>2<br>2<br>0 |    |
| Mammary Gland   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | 49 |
| Skin  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |
| Basal Cell Adenoma                                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Basal Cell Carcinoma                                    |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       | X                     |                       |                       |                       | 3  |
| Fibroma   |                       |                       |                       | X                     |                       |                       | X                     |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       | 5  |
| Keratoacanthoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Keratoacanthoma, Multiple                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       | 1  |
| Lipoma  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       | 1  |
| Liposarcoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Sarcoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Sebaceous Gland, Adenoma                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       | 2  |
| <b>MUSCULOSKELETAL SYSTEM</b>                           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Bone  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |
| Chondroma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| <b>NERVOUS SYSTEM</b>                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Brain   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |
| Astrocytoma Malignant                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Granular Cell Tumor Malignant                           |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| <b>RESPIRATORY SYSTEM</b>                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Lung  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |
| Alveolar/Bronchiolar Adenoma                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Carcinoma, Metastatic, Tissue Nos                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Pheochromocytoma Malignant, Metastatic, Adrenal Medulla |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       | 1  |
| Nose  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |

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

M .. Missing tissue  
 A .. Autolysis precludes evaluation  
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TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
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**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

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First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE<br>20 MG/KG | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |         | * TOTALS |
|-----------------------------------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|---------|----------|
|                                   | 0<br>7      | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 |         |          |
| ANIMAL ID                         | 0<br>0      | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0  |          |
|                                   | 1           | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1      | 1       |          |
|                                   | 2           | 2      | 3      | 3      | 4      | 4      | 4      | 4      | 5      | 0      | 0      | 0      | 0      | 1      | 1      | 1      | 2      | 2      | 3      | 4      | 4      | 1      | 2      | 2      | 3       |          |
|                                   | 5           | 6      | 1      | 2      | 3      | 5      | 6      | 9      | 0      | 1      | 2      | 7      | 9      | 0      | 2      | 6      | 7      | 8      | 7      | 2      | 7      | 8      | 4      | 0      |         |          |
| Transitional Epithelium, Adenoma  | X           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2      |         |          |
| Trachea                           | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50      |          |
| <b>SPECIAL SENSES SYSTEM</b>      |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |         |          |
| Eye                               | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50      |          |
| Harderian Gland                   | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50      |          |
| Zymbal's Gland<br>Carcinoma       | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50<br>2 |          |
| <b>URINARY SYSTEM</b>             |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |         |          |
| Kidney                            | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50      |          |
| Urinary Bladder                   | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50      |          |
| <b>SYSTEMIC LESIONS</b>           |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |         |          |
| Multiple Organ                    | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50      |          |
| Leukemia Mononuclear              |             |        |        |        | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2      |         |          |
| Mesothelioma Malignant            |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 3      |         |          |

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

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

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N,N-Dimethyl-p-toluidine

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First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE<br>60 MG/KG | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID | males<br>(cont...) |
|-----------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|--------------------|
|                                   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |           |                    |
|                                   | 1           | 3 | 3 | 4 | 4 | 4 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 0         |                    |
|                                   | 9           | 4 | 8 | 1 | 3 | 9 | 7 | 8 | 0 | 1 | 1 | 1 | 2 | 2 | 4 | 4 | 5 | 5 | 6 | 6 | 6 | 7 | 0         |                    |
|                                   | 2           | 8 | 4 | 2 | 1 | 6 | 6 | 2 | 1 | 2 | 4 | 6 | 2 | 6 | 5 | 5 | 3 | 6 | 1 | 1 | 8 | 9 | 0         |                    |
|                                   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         |                    |
|                                   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         |                    |
|                                   | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 0         |                    |
|                                   | 8           | 8 | 6 | 6 | 8 | 7 | 7 | 5 | 8 | 9 | 6 | 7 | 9 | 5 | 6 | 7 | 9 | 5 | 6 | 7 | 0 | 6 | 0         |                    |
|                                   | 3           | 6 | 1 | 4 | 1 | 1 | 0 | 1 | 8 | 3 | 9 | 3 | 5 | 2 | 0 | 8 | 7 | 7 | 8 | 5 | 0 | 3 | 0         |                    |

**ALIMENTARY SYSTEM**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hepatocellular Adenoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Hepatocellular Carcinoma  |   |   |   |   |   |   |   |   |   | X | X |   |   | X |   |   |   |   |   |   |   | X |
| Mesentery                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Tongue                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Squamous Cell Carcinoma   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

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

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









TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS MALE<br>60 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID             | males<br>(cont...) |
|-----------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------------------|--------------------|
|                                   | 0<br>1<br>9<br>2 | 0<br>3<br>4<br>8 | 0<br>3<br>8<br>4 | 0<br>4<br>1<br>2 | 0<br>4<br>3<br>1 | 0<br>4<br>9<br>6 | 0<br>5<br>7<br>2 | 0<br>5<br>8<br>6 | 0<br>6<br>0<br>1 | 0<br>6<br>1<br>2 | 0<br>6<br>1<br>4 | 0<br>6<br>1<br>6 | 0<br>6<br>2<br>2 | 0<br>6<br>2<br>4 | 0<br>6<br>4<br>5 | 0<br>6<br>4<br>5 | 0<br>6<br>5<br>3 | 0<br>6<br>5<br>6 | 0<br>6<br>6<br>1 | 0<br>6<br>6<br>1 | 0<br>6<br>6<br>8 | 0<br>6<br>6<br>9 | 0<br>6<br>7<br>1 | 0<br>6<br>9<br>5 |                       |                    |
|                                   | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0<br>0<br>1<br>8<br>3 | males<br>(cont...) |

SPECIAL SENSES SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Eye                                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Harderian Gland                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Zymbal's Gland<br>Adenoma<br>Carcinoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

X

URINARY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Ureter  |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Urinary Bladder<br>Transitional Epithelium, Papilloma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

SYSTEMIC LESIONS

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Multiple Organ<br>Mesothelioma Malignant | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

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

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







TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine  
 CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
 Time Report Requested: 10:59:00  
 First Dose M/F: 10/20/04 / 10/21/04  
 Lab: BAT

| FISCHER 344 RATS MALE<br>60 MG/KG                       | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |
|---|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|
|   | 0723        | 0724  | 0724  | 0724  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  |          |
| ANIMAL ID   | 00176       | 00177 | 00178 | 00179 | 00180 | 00181 | 00182 | 00183 | 00184 | 00185 | 00186 | 00187 | 00188 | 00189 | 00190 | 00191 | 00192 | 00193 | 00194 | 00195 | 00196 | 00197 |          |
| Skin  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |
| Basal Cell Adenoma                                      |             |       |       |       |       |       |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       | 1        |
| Fibroma   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | X     |       |       |       | 3        |
| Keratoacanthoma   |             |       |       |       |       |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       | 2        |
| Squamous Cell Papilloma                                 |             |       |       |       |       |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       | 1        |
| Trichoepithelioma                                       |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
| Sebaceous Gland, Adenoma                                |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | X     |       | 1        |
| <b>MUSCULOSKELETAL SYSTEM</b>                           |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |
| Bone  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |
| <b>NERVOUS SYSTEM</b>                                   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |
| Brain   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |
| Carcinoma, Metastatic, Pituitary Gland                  |             |       |       |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
| <b>RESPIRATORY SYSTEM</b>                               |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |
| Lung  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |
| Alveolar/Bronchiolar Adenoma                            |             |       |       |       |       |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       | 1        |
| Hepatocellular Carcinoma, Metastatic, Liver             |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 2        |
| Pheochromocytoma Malignant, Metastatic, Adrenal Medulla |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
| Nose  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 49       |
| Glands, Olfactory Epithelium, Adenoma                   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | X     |       |       | 1        |
| Transitional Epithelium, Adenoma                        |             |       |       |       |       |       |       |       | X     | X     |       |       |       | X     | X     |       |       | X     | X     |       | X     |       | 11       |
| Transitional Epithelium, Carcinoma                      |             |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 2        |
| Trachea   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |

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

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



TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine  
 CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
 Time Report Requested: 10:59:00  
 First Dose M/F: 10/20/04 / 10/21/04  
 Lab: BAT

| FISCHER 344 RATS MALE<br>60 MG/KG | DAY ON TEST |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     | * TOTALS |
|-----------------------------------|-------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----------|
|                                   | 073         | 074 | 074 | 074 | 077 | 077 | 077 | 077 | 077 | 077 | 077 | 077 | 077 | 077 | 077 | 077 | 077 | 077 | 077 | 077 | 077 | 077 | 077 | 077 |          |
| ANIMAL ID                         | 006         | 004 | 004 | 005 | 003 | 005 | 009 | 000 | 001 | 002 | 008 | 002 | 005 | 006 | 006 | 007 | 002 | 009 | 000 | 002 | 007 | 006 | 008 | 009 |          |

**SPECIAL SENSES SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Zymbal's Gland  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenoma         |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Carcinoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

**URINARY SYSTEM**

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Ureter                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Urinary Bladder                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Transitional Epithelium, Papilloma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   | 1  |

**SYSTEMIC LESIONS**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Mesothelioma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   | 1  |

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

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

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

**ALIMENTARY SYSTEM**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Leiomyosarcoma            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Mesentery                 |   |   |   | + |   |   |   |   |   |   |   | + |   |   |   |   | + |   |   |   | + |   |   |   | + |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Tongue                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Squamous Cell Papilloma   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |

**CARDIOVASCULAR SYSTEM**

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine  
 CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
 Time Report Requested: 10:59:00  
 First Dose M/F: 10/20/04 / 10/21/04  
 Lab: BAT

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

Blood Vessel

Heart

ENDOCRINE SYSTEM

Adrenal Cortex  
Adenoma

Adrenal Medulla  
Pheochromocytoma Benign

Islets, Pancreatic

Parathyroid Gland

Pituitary Gland  
Pars Distalis, Adenoma

Thyroid Gland  
C-cell, Adenoma  
Follicular Cell, Adenoma

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

Clitoral Gland  
Adenoma

Ovary

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

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

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

Bilateral, Fibrosarcoma

Uterus Polyp Stromal + X

Vagina Schwannoma Malignant + X

**HEMATOPOIETIC SYSTEM**

Bone Marrow +

Lymph Node +

Lymph Node, Mandibular M

Lymph Node, Mesenteric +

Spleen +

Thymus +

**INTEGUMENTARY SYSTEM**

Mammary Gland Carcinoma, Multiple + X  
 Fibroadenoma X X X X X X X X X X X X X X X X  
 Fibroadenoma, Multiple X X X X X X X X X X X X X X X X

Skin Basal Cell Carcinoma + + + + + + + + + + + + + + X + + + + + + + + + + + +  
 Fibroma  
 Fibrosarcoma

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine  
 CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
 Time Report Requested: 10:59:00  
 First Dose M/F: 10/20/04 / 10/21/04  
 Lab: BAT

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

Fibrosarcoma, Multiple  
 Keratoacanthoma  
 Liposarcoma

MUSCULOSKELETAL SYSTEM

Bone +

NERVOUS SYSTEM

Brain +

RESPIRATORY SYSTEM

Lung +  
 Alveolar/Bronchiolar Adenoma  
 Fibrosarcoma, Metastatic, Skin X

Nose +

Trachea +

SPECIAL SENSES SYSTEM

Ear +  
 Neural Crest Tumor X

Eye +  
 Melanoma Benign

Harderian Gland +

URINARY SYSTEM

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS FEMALE<br>0 MG/KG                    | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | females<br>(cont...) |
|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------------------|
|   | 0547        | 0556 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 | 0666 |                      |
| ANIMAL ID   | 0000        | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000                 |
| Kidney  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                    |
| Urinary Bladder<br>Transitional Epithelium, Papilloma | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | X                    |
| <b>SYSTEMIC LESIONS</b>                               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |
| Multiple Organ<br>Leukemia Mononuclear                | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                    |
|   | X           |      |      |      |      |      | X    |      | X    |      | X    | X    |      |      | X    |      | X    |      |      |      |      |      |      | X    | X                    |

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

M .. Missing tissue  
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TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS FEMALE<br>0 MG/KG | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |
|------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
|                                    | 0729        | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 |          |
| ANIMAL ID                          | 0007        | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007     |
|                                    | 0729        | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729     |

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Heart        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**ENDOCRINE SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |              |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------|
| Adrenal Cortex<br>Adenoma                                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>3      |
| Adrenal Medulla<br>Pheochromocytoma Benign                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>2      |
| Islets, Pancreatic   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |
| Parathyroid Gland  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |
| Pituitary Gland<br>Pars Distalis, Adenoma                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>31     |
| Thyroid Gland<br>C-cell, Adenoma<br>Follicular Cell, Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49<br>9<br>1 |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|
| Clitoral Gland<br>Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>5 |
| Ovary                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |

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



TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS FEMALE<br>0 MG/KG | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |
|------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
|                                    | 0729        | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 |          |
| ANIMAL ID                          | 0007        | 0005 | 0007 | 0009 | 0003 | 0007 | 0009 | 0000 | 0006 | 0001 | 0008 | 0000 | 0006 | 0002 | 0004 | 0006 | 0000 | 0004 | 0006 | 0001 | 0002 | 0007 | 0000 | 0004 |          |
| Bilateral, Fibrosarcoma            |             | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1    |          |
| Uterus                             | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50   |          |
| Polyp Stromal                      |             |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      | 3    |          |
| Vagina                             |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1    |          |
| Schwannoma Malignant               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1    |          |

HEMATOPOIETIC SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 0  |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Thymus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | M | + | + | + | M | + | + | + | 47 |

INTEGUMENTARY SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Carcinoma, Multiple    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Fibroadenoma           |   |   |   |   |   |   |   | X |   | X |   |   |   |   | X |   |   | X |   |   |   | X |   | 17 |
| Fibroadenoma, Multiple |   |   |   | X | X | X |   | X | X |   |   |   | X |   |   | X |   | X |   |   | X | X |   | 12 |
| Skin                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Basal Cell Carcinoma   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Fibroma                |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Fibrosarcoma           |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | 2  |

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine  
 CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
 Time Report Requested: 10:59:00  
 First Dose M/F: 10/20/04 / 10/21/04  
 Lab: BAT

| FISCHER 344 RATS FEMALE<br>0 MG/KG | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |  |
|------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|--|
|                                    | 0729        | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 |          |  |
| ANIMAL ID                          | 0007        | 0005 | 0007 | 0009 | 0003 | 0007 | 0009 | 0000 | 0006 | 0001 | 0008 | 0000 | 0006 | 0002 | 0004 | 0006 | 0000 | 0004 | 0006 | 0001 | 0002 | 0007 | 0000 | 0004 | 0006 |          |  |
| Fibrosarcoma, Multiple             |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      | 1    |          |  |
| Keratoacanthoma                    |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      | 1        |  |
| Liposarcoma                        |             |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |
| <b>MUSCULOSKELETAL SYSTEM</b>      |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |
| Bone                               | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| <b>NERVOUS SYSTEM</b>              |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |
| Brain                              | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| <b>RESPIRATORY SYSTEM</b>          |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |
| Lung                               | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| Alveolar/Bronchiolar Adenoma       |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |
| Fibrosarcoma, Metastatic, Skin     |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |      | 1        |  |
| Nose                               | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| Trachea                            | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| <b>SPECIAL SENSES SYSTEM</b>       |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |
| Ear                                |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |
| Neural Crest Tumor                 |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |
| Eye                                | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| Melanoma Benign                    |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      | 1        |  |
| Harderian Gland                    | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| <b>URINARY SYSTEM</b>              |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine  
 CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
 Time Report Requested: 10:59:00  
 First Dose M/F: 10/20/04 / 10/21/04  
 Lab: BAT

| DAY ON TEST   | FISCHER 344 RATS FEMALE |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |      |  |
|---|-------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|--|
|   | 0729                    | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 |          | 0729 |  |
| ANIMAL ID   | 0007                    | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007 | 0007     |      |  |
| Kidney  | +                       | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |      |  |
| Urinary Bladder<br>Transitional Epithelium, Papilloma | +                       | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50<br>1  |      |  |
| <b>SYSTEMIC LESIONS</b>                               |                         |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |  |
| Multiple Organ<br>Leukemia Mononuclear                | +                       | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50<br>15 |      |  |

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine  
 CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
 Time Report Requested: 10:59:00  
 First Dose M/F: 10/20/04 / 10/21/04  
 Lab: BAT

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

**ALIMENTARY SYSTEM**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hepatocellular Adenoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Mesentery                 |   |   |   |   | + |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   | + | + |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Tooth                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**CARDIOVASCULAR SYSTEM**

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine  
 CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
 Time Report Requested: 10:59:00  
 First Dose M/F: 10/20/04 / 10/21/04  
 Lab: BAT

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

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

ENDOCRINE SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adrenal Cortex<br>Adenoma                                    | + | + | + | + | + | + | + | + | + | X | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adrenal Medulla<br>Pheochromocytoma Benign                   | + | + | + | + | + | + | + | + | + | X | + | + | + | + | + | + | + | + | + | + | X | + | + | + |
| Islets, Pancreatic   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Parathyroid Gland  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pituitary Gland<br>Pars Distalis, Adenoma                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X | X | X | + |
| Thyroid Gland<br>C-cell, Adenoma<br>Follicular Cell, Adenoma | + | A | + | + | A | + | + | A | + | + | + | + | + | X | + | + | + | + | + | + | + | + | + | + |

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Clitoral Gland<br>Adenoma<br>Carcinoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|  |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS FEMALE<br>6 MG/KG | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | females<br>(cont...) |
|------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------------------|
|                                    | 0037        | 0056  | 0056  | 0061  | 0066  | 0066  | 0077  | 0077  | 0077  | 0077  | 0077  | 0077  | 0077  | 0077  | 0077  | 0077  | 0077  | 0077  | 0077  | 0077  | 0077  | 0077  | 0077  |       |                      |
| ANIMAL ID                          | 00084       | 00030 | 00009 | 00088 | 00098 | 00085 | 00091 | 00059 | 00062 | 00067 | 00078 | 00081 | 00085 | 00091 | 00092 | 00093 | 00094 | 00097 | 00098 | 00101 | 00104 | 00108 | 00110 | 00112 |                      |

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Ovary                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Granulosa Cell Tumor Benign    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |
| Granulosa Cell Tumor Malignant |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |
| Uterus                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenocarcinoma                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Polyp Stromal                  |   |   |   |   |   |   |   |   |   |   |   | X | X | X | X |   | X |   | X |   |   |   |   |
| Vagina                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Polyp                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

HEMATOPOIETIC SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymph Node             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M |
| Lymph Node, Mesenteric | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Thymus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

INTEGUMENTARY SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Carcinoma              |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibroadenoma           |   |   |   |   |   |   |   | X |   |   |   |   |   | X |   | X |   | X |   |   | X |   |   |
| Fibroadenoma, Multiple |   |   |   |   | X |   |   |   |   |   | X |   |   |   | X |   | X | X |   |   |   |   |   |
| Skin                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS FEMALE<br>6 MG/KG | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID | females<br>(cont...) |      |
|------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|----------------------|------|
|                                    | 0037        | 0056 | 0057 | 0061 | 0066 | 0067 | 0071 | 0077 | 0078 | 0081 | 0082 | 0083 | 0084 | 0085 | 0086 | 0087 | 0088 | 0089 | 0091 | 0092 | 0093 | 0094 | 0095 | 0096 |           |                      | 0097 |
|                                    | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0         | 0                    | 0    |
|                                    | 3           | 5    | 5    | 6    | 6    | 6    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7         | 7                    | 7    |
|                                    | 7           | 6    | 4    | 1    | 1    | 8    | 0    | 1    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2         | 2                    | 2    |
|                                    | 8           | 0    | 9    | 8    | 9    | 8    | 9    | 5    | 6    | 6    | 7    | 8    | 9    | 5    | 5    | 5    | 5    | 5    | 5    | 5    | 6    | 6    | 6    | 7    | 7         | 7                    | 7    |
|                                    | 4           | 0    | 0    | 3    | 6    | 5    | 1    | 9    | 2    | 7    | 8    | 1    | 5    | 1    | 2    | 3    | 4    | 7    | 8    | 1    | 4    | 8    | 0    | 2    | 5         |                      |      |

Basal Cell Adenoma  
 Fibroma  
 Keratoacanthoma  
 Schwannoma Malignant  
 Trichoepithelioma

MUSCULOSKELETAL SYSTEM

Bone +

NERVOUS SYSTEM

Brain +

RESPIRATORY SYSTEM

Lung +

Nose + A +  
 Transitional Epithelium, Adenoma X

Trachea +

SPECIAL SENSES SYSTEM

Eye +

Harderian Gland +

URINARY SYSTEM

Kidney +

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

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





TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine  
 CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
 Time Report Requested: 10:59:00  
 First Dose M/F: 10/20/04 / 10/21/04  
 Lab: BAT

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

**ALIMENTARY SYSTEM**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Hepatocellular Adenoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |    |
| Mesentery                 | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 9  |    |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Tooth                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |

**CARDIOVASCULAR SYSTEM**

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine  
 CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
 Time Report Requested: 10:59:00  
 First Dose M/F: 10/20/04 / 10/21/04  
 Lab: BAT

| FISCHER 344 RATS FEMALE<br>6 MG/KG | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |
|------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
|                                    | 0729        | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 |      |          |
| ANIMAL ID                          | 0077        | 0077 | 0078 | 0073 | 0078 | 0075 | 0076 | 0070 | 0073 | 0075 | 0076 | 0079 | 0071 | 0073 | 0074 | 0076 | 0079 | 0070 | 0072 | 0076 | 0079 | 0072 | 0074 | 0077 | 0079 |          |

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Heart        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**ENDOCRINE SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |              |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------|
| Adrenal Cortex<br>Adenoma                                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>3      |
| Adrenal Medulla<br>Pheochromocytoma Benign                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>2      |
| Islets, Pancreatic   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |
| Parathyroid Gland  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |
| Pituitary Gland<br>Pars Distalis, Adenoma                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>29     |
| Thyroid Gland<br>C-cell, Adenoma<br>Follicular Cell, Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47<br>3<br>1 |

**GENERAL BODY SYSTEM**

|      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| NONE |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

**GENITAL SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |              |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------|
| Clitoral Gland<br>Adenoma<br>Carcinoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49<br>3<br>2 |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------|

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS FEMALE<br>6 MG/KG | DAY ON TEST |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      | * TOTALS |  |  |
|------------------------------------|-------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|------|----------|--|--|
|                                    | 07<br>29    | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 | 07<br>29 |      |          |  |  |
| ANIMAL ID                          | 0077        | 0088     | 0099     | 0055     | 0066     | 0000     | 0033     | 0055     | 0066     | 0033     | 0055     | 0066     | 0077     | 0011     | 0033     | 0044     | 0066     | 0099     | 0000     | 0022     | 0066     | 0099     | 0022     | 0044 | 0077     |  |  |
| Ovary                              | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +    | 50       |  |  |
| Granulosa Cell Tumor Benign        |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      | 1        |  |  |
| Granulosa Cell Tumor Malignant     |             |          |          | X        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      | 2        |  |  |
| Uterus                             | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +    | 50       |  |  |
| Adenocarcinoma                     |             |          |          |          |          |          |          |          | X        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      | 1        |  |  |
| Polyp Stromal                      |             |          | X        |          |          | X        |          |          |          |          |          |          |          |          |          |          |          |          |          | X        |          |          |          |      | 9        |  |  |
| Vagina                             |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | +        |          |          |      | 1        |  |  |
| Polyp                              |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | X        |          |          |          |      | 1        |  |  |
| <b>HEMATOPOIETIC SYSTEM</b>        |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      |          |  |  |
| Bone Marrow                        | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +    | 50       |  |  |
| Lymph Node                         |             |          |          | +        |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      | 1        |  |  |
| Lymph Node, Mandibular             | M           | M        | M        | M        | M        | M        | M        | M        | M        | M        | M        | M        | M        | M        | M        | M        | M        | M        | M        | M        | M        | M        | M        | M    | 0        |  |  |
| Lymph Node, Mesenteric             | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +    | 49       |  |  |
| Spleen                             | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +    | 50       |  |  |
| Thymus                             | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +    | 50       |  |  |
| <b>INTEGUMENTARY SYSTEM</b>        |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      |          |  |  |
| Mammary Gland                      | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +    | 50       |  |  |
| Carcinoma                          |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      | 1        |  |  |
| Fibroadenoma                       | X           |          |          | X        |          |          | X        |          | X        |          |          |          |          |          | X        | X        |          |          |          |          |          |          |          | 11   |          |  |  |
| Fibroadenoma, Multiple             |             | X        |          | X        |          |          |          |          | X        | X        | X        |          |          | X        |          |          |          | X        | X        |          | X        | X        |          | 15   |          |  |  |
| Skin                               | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | 50   |          |  |  |

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

M .. Missing tissue  
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P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

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Lab: BAT

| FISCHER 344 RATS FEMALE<br>6 MG/KG | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |
|------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
|                                    | 0779        | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 |          |
| ANIMAL ID                          | 0077        | 0078 | 0079 | 0080 | 0081 | 0082 | 0083 | 0084 | 0085 | 0086 | 0087 | 0088 | 0089 | 0090 | 0091 | 0092 | 0093 | 0094 | 0095 | 0096 | 0097 | 0098 | 0099 | 0100 |          |
|                                    | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    |          |
|                                    | 7           | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    |          |
|                                    | 2           | 2    | 2    | 2    | 2    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    |          |
|                                    | 9           | 9    | 9    | 9    | 9    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    |          |
|                                    | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    |          |
|                                    | 0           | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    |          |
|                                    | 2           | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    | 2    |          |
|                                    | 7           | 8    | 8    | 9    | 9    | 5    | 5    | 6    | 6    | 6    | 6    | 6    | 7    | 7    | 7    | 7    | 7    | 8    | 8    | 8    | 8    | 9    | 9    | 9    |          |
|                                    | 7           | 7    | 8    | 3    | 8    | 5    | 6    | 0    | 3    | 5    | 6    | 9    | 1    | 3    | 4    | 6    | 9    | 0    | 2    | 6    | 9    | 2    | 4    | 7    | 9        |

|                      |  |  |  |  |  |   |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
|----------------------|--|--|--|--|--|---|--|--|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|
| Basal Cell Adenoma   |  |  |  |  |  |   |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |
| Fibroma              |  |  |  |  |  | X |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 4 |
| Keratoacanthoma      |  |  |  |  |  |   |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |
| Schwannoma Malignant |  |  |  |  |  |   |  |  | X |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |
| Trichoepithelioma    |  |  |  |  |  |   |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |

MUSCULOSKELETAL SYSTEM

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

NERVOUS SYSTEM

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

RESPIRATORY SYSTEM

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Nose                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Transitional Epithelium, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

SPECIAL SENSES SYSTEM

|     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

URINARY SYSTEM

|        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| DAY ON TEST             | FISCHER 344 RATS FEMALE |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |      |  |
|-------------------------|-------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|--|
|                         | 0729                    | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 |          | 0729 |  |
| 6 MG/KG                 | ANIMAL ID               |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |      |  |
|                         | 0000                    | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 |          | 0000 |  |
| Urinary Bladder         | +                       | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | 50   |  |
| <b>SYSTEMIC LESIONS</b> |                         |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |  |
| Multiple Organ          | +                       | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | 50   |  |
| Leukemia Mononuclear    |                         |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X        | 2    |  |

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011  
 Time Report Requested: 10:59:00  
 First Dose M/F: 10/20/04 / 10/21/04  
 Lab: BAT

|                                | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |   |
|--------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|
| <b>FISCHER 344 RATS FEMALE</b> | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                      | 0 |
| <b>20 MG/KG</b>                | 6           | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |                      | 7 |
|                                | 0           | 1 | 1 | 1 | 3 | 4 | 5 | 5 | 7 | 8 | 8 | 9 | 0 | 0 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2                    |   |
|                                | 4           | 1 | 3 | 3 | 0 | 6 | 9 | 9 | 3 | 0 | 0 | 7 | 5 | 9 | 0 | 4 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8                    |   |
|                                | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    |   |
|                                | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    |   |
|                                | 3           | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3                    |   |
|                                | 4           | 2 | 4 | 4 | 2 | 0 | 1 | 2 | 4 | 1 | 1 | 2 | 1 | 3 | 0 | 2 | 4 | 0 | 0 | 0 | 1 | 1 | 1 | 2 | 3                    |   |
|                                | 5           | 2 | 3 | 7 | 0 | 9 | 5 | 5 | 9 | 3 | 6 | 9 | 0 | 1 | 2 | 3 | 6 | 1 | 4 | 5 | 1 | 7 | 9 | 8 | 4                    |   |

**ALIMENTARY SYSTEM**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hepatocellular Adenoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mesentery                 |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   | + |   |   |   |   |   |   |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

**CARDIOVASCULAR SYSTEM**

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

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

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

TDMS No. 20107 - 03

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

Date Report Requested: 01/24/2011

Test Type: CHRONIC

N,N-Dimethyl-p-toluidine

Time Report Requested: 10:59:00

Route: GAVAGE

CAS Number: 99-97-8

First Dose M/F: 10/20/04 / 10/21/04

Species/Strain: RATS/F 344/N

Lab: BAT

| DAY ON TEST             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | females<br>(cont...) |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|
| FISCHER 344 RATS FEMALE | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |                      |
|                         | 0 | 1 | 1 | 1 | 3 | 4 | 5 | 5 | 7 | 8 | 8 | 9 | 0 | 0 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 |                      |
| 20 MG/KG                | 4 | 1 | 3 | 3 | 0 | 6 | 9 | 9 | 3 | 0 | 0 | 7 | 5 | 9 | 0 | 4 | 7 | 8 | 8 | 8 | 8 | 8 | 8 |                      |
| ANIMAL ID               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                      |
|                         | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                      |
|                         | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |                      |
|                         | 4 | 2 | 4 | 4 | 2 | 0 | 1 | 2 | 4 | 1 | 1 | 2 | 1 | 3 | 0 | 2 | 4 | 0 | 0 | 0 | 1 | 1 | 1 |                      |
|                         | 5 | 2 | 3 | 7 | 0 | 9 | 5 | 5 | 9 | 3 | 6 | 9 | 0 | 1 | 2 | 3 | 6 | 1 | 4 | 5 | 1 | 7 | 9 |                      |

Heart

+ +

**ENDOCRINE SYSTEM**

Adrenal Cortex  
Adenoma

+  
X

Adrenal Medulla  
Pheochromocytoma Benign  
Pheochromocytoma Malignant

+  
X  
X

Islets, Pancreatic  
Adenoma  
Carcinoma

+ +

Parathyroid Gland

+ +

Pituitary Gland  
Pars Distalis, Adenoma

+  
X X

Thyroid Gland  
C-cell, Adenoma  
C-cell, Carcinoma  
Follicular Cell, Adenoma

+ + + A + + + + A + A + + + + + + + + + + + +  
X  
X

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Clitoral Gland  
Adenoma

+  
X X X

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS FEMALE<br>20 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID             | females<br>(cont...) |
|-------------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------------------|----------------------|
|                                     | 0<br>6<br>0<br>4 | 0<br>6<br>1<br>1 | 0<br>6<br>1<br>3 | 0<br>6<br>1<br>3 | 0<br>6<br>3<br>0 | 0<br>6<br>4<br>6 | 0<br>6<br>5<br>9 | 0<br>6<br>5<br>9 | 0<br>6<br>7<br>3 | 0<br>6<br>8<br>0 | 0<br>6<br>8<br>0 | 0<br>6<br>9<br>7 | 0<br>6<br>9<br>5 | 0<br>7<br>0<br>0 | 0<br>7<br>1<br>1 | 0<br>7<br>1<br>1 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 |                       |                      |
|                                     | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0<br>0<br>3<br>4<br>5 |                      |

Adenoma, Multiple  
 Carcinoma

X

X

Ovary

+ +

Uterus

+ +

Adenoma  
 Polyp Stromal  
 Polyp Stromal, Multiple  
 Sarcoma Stromal

X

X

HEMATOPOIETIC SYSTEM

Bone Marrow

+ +

Lymph Node  
 Deep Cervical, Sarcoma, Metastatic, Skin

+

X

Lymph Node, Mandibular

M M

Lymph Node, Mesenteric

+ +

Spleen

+ +

Thymus  
 Thymoma Benign

+ +

INTEGUMENTARY SYSTEM

Mammary Gland  
 Carcinoma  
 Fibroadenoma  
 Fibroadenoma, Multiple

+ +

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

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

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



TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

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

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Skin                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Basal Cell Carcinoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibroma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lipoma               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Liposarcoma          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Sarcoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Schwannoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

MUSCULOSKELETAL SYSTEM

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

NERVOUS SYSTEM

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Peripheral Nerve |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Spinal Cord      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

RESPIRATORY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Sarcoma, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Nose                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Trachea                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

SPECIAL SENSES SYSTEM

|     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Eye | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

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

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| DAY ON TEST             | FISCHER 344 RATS FEMALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID | females<br>(cont...) |   |  |
|-------------------------|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|----------------------|---|--|
|                         | 0                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |           |                      | 0 |  |
| 6                       | 6                       | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7         | 0                    |   |  |
| 0                       | 1                       | 1 | 1 | 3 | 4 | 5 | 5 | 7 | 8 | 8 | 9 | 0 | 0 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2         | 0                    |   |  |
| 4                       | 1                       | 3 | 3 | 0 | 6 | 9 | 9 | 3 | 0 | 0 | 0 | 0 | 7 | 5 | 9 | 0 | 4 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8         | 0                    |   |  |
| 0                       | 0                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         | 0                    |   |  |
| 0                       | 0                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         | 0                    |   |  |
| 3                       | 3                       | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3         | 0                    |   |  |
| 4                       | 2                       | 4 | 4 | 2 | 0 | 1 | 2 | 4 | 1 | 1 | 2 | 1 | 3 | 0 | 2 | 4 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 2 | 3         | 0                    |   |  |
| 5                       | 2                       | 3 | 7 | 0 | 9 | 5 | 5 | 9 | 3 | 6 | 9 | 0 | 1 | 2 | 3 | 6 | 1 | 4 | 5 | 1 | 7 | 9 | 8 | 4 | 0         |                      |   |  |
| Harderian Gland         | +                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         |                      |   |  |
| <b>URINARY SYSTEM</b>   |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |  |
| Kidney                  | +                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | +                    |   |  |
| Carcinoma               |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |  |
| Lipoma                  |                         |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |  |
| Urinary Bladder         | +                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | +                    |   |  |
| <b>SYSTEMIC LESIONS</b> |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |  |
| Multiple Organ          | +                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | +                    |   |  |
| Leukemia Mononuclear    |                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |   |  |

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

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



TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS FEMALE<br>20 MG/KG | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |        |     |
|-------------------------------------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|--------|-----|
|                                     | 078         | 078    | 079    | 079    | 079    | 079    | 079    | 079    | 079    | 079    | 079    | 079    | 079    | 079    | 079    | 079    | 079    | 079    | 079    | 079    |          | 079    | 079 |
| ANIMAL ID                           | 003338      | 003344 | 003124 | 003227 | 003332 | 003333 | 003333 | 003333 | 003333 | 003333 | 003333 | 003333 | 003333 | 003333 | 003333 | 003333 | 003333 | 003333 | 003333 | 003333 | 003333   | 003333 |     |
| Heart                               | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | +      | 50  |

**ENDOCRINE SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------------------|
| Adrenal Cortex<br>Adenoma   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>1           |
| Adrenal Medulla<br>Pheochromocytoma Benign<br>Pheochromocytoma Malignant          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>1<br>1      |
| Islets, Pancreatic<br>Adenoma<br>Carcinoma  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>1<br>1      |
| Parathyroid Gland   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50                |
| Pituitary Gland<br>Pars Distalis, Adenoma   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>30          |
| Thyroid Gland<br>C-cell, Adenoma<br>C-cell, Carcinoma<br>Follicular Cell, Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47<br>5<br>1<br>2 |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|
| Clitoral Gland<br>Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>7 |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
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 I .. Insufficient tissue

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS FEMALE<br>20 MG/KG      | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |  |
|--|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|--|
|  | 0728        | 0728 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 | 0729 |          |  |
| ANIMAL ID                                | 0033        | 0034 | 0031 | 0022 | 0022 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 | 0033 |          |  |
| Adenoma, Multiple                        |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |
| Carcinoma                                |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 2        |  |
| Ovary                                    | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| Uterus                                   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| Adenoma                                  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    | 1        |  |
| Polyp Stromal                            |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 3        |  |
| Polyp Stromal, Multiple                  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |
| Sarcoma Stromal                          |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |
| <b>HEMATOPOIETIC SYSTEM</b>              |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |
| Bone Marrow                              | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| Lymph Node                               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 2        |  |
| Deep Cervical, Sarcoma, Metastatic, Skin |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |
| Lymph Node, Mandibular                   | M           | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | 0        |  |
| Lymph Node, Mesenteric                   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| Spleen                                   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| Thymus                                   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| Thymoma Benign                           |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    | 1        |  |
| <b>INTEGUMENTARY SYSTEM</b>              |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |
| Mammary Gland                            | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| Carcinoma                                |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 2        |  |
| Fibroadenoma                             |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 19       |  |
| Fibroadenoma, Multiple                   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 7        |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
 + .. Tissue examined microscopically  
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M .. Missing tissue  
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TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| DAY ON TEST                   | FISCHER 344 RATS FEMALE |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |      |  |
|-------------------------------|-------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|------|--|
|                               | 0728                    | 0728   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   | 0729   |          | 0729 |  |
| ANIMAL ID                     | 003338                  | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338 | 003338   |      |  |
| Skin                          | +                       | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |      |  |
| Basal Cell Carcinoma          |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |      |  |
| Fibroma                       |                         |        |        |        | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |      |  |
| Lipoma                        |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | X      |        | 1        |      |  |
| Liposarcoma                   |                         |        |        |        |        |        |        |        |        |        | X      |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |      |  |
| Sarcoma                       |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |      |  |
| Schwannoma Malignant          |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | X      |        | 1        |      |  |
| <b>MUSCULOSKELETAL SYSTEM</b> |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |      |  |
| Bone                          | +                       | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |      |  |
| <b>NERVOUS SYSTEM</b>         |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |      |  |
| Brain                         | +                       | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |      |  |
| Peripheral Nerve              |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |      |  |
| Spinal Cord                   |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |      |  |
| <b>RESPIRATORY SYSTEM</b>     |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |      |  |
| Lung                          | +                       | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |      |  |
| Sarcoma, Metastatic, Skin     |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |      |  |
| Nose                          | +                       | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |      |  |
| Trachea                       | +                       | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |      |  |
| <b>SPECIAL SENSES SYSTEM</b>  |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |      |  |
| Eye                           | +                       | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |      |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
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 X .. Lesion present  
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TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS FEMALE<br>60 MG/KG | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | females<br>(cont...)  |
|-------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|                                     | 0<br>0<br>1<br>4      | 0<br>3<br>8<br>1      | 0<br>3<br>8<br>4      | 0<br>4<br>5<br>9      | 0<br>4<br>6<br>8      | 0<br>4<br>7<br>1      | 0<br>5<br>3<br>3      | 0<br>5<br>3<br>7      | 0<br>5<br>4<br>2      | 0<br>5<br>4<br>7      | 0<br>5<br>8<br>3      | 0<br>6<br>0<br>7      | 0<br>6<br>1<br>0      | 0<br>6<br>1<br>2      | 0<br>6<br>2<br>5      | 0<br>6<br>7<br>0      | 0<br>6<br>8<br>1      | 0<br>6<br>8<br>2      | 0<br>6<br>8<br>4      | 0<br>7<br>0<br>1      | 0<br>7<br>0<br>6      | 0<br>7<br>1<br>4      | 0<br>7<br>1<br>4      | 0<br>7<br>2<br>0      |                       |
| ANIMAL ID                           | 0<br>0<br>3<br>7<br>1 | 0<br>0<br>3<br>6<br>8 | 0<br>0<br>3<br>7<br>7 | 0<br>0<br>3<br>9<br>6 | 0<br>0<br>3<br>8<br>1 | 0<br>0<br>3<br>6<br>9 | 0<br>0<br>3<br>6<br>6 | 0<br>0<br>3<br>8<br>9 | 0<br>0<br>3<br>7<br>2 | 0<br>0<br>3<br>8<br>7 | 0<br>0<br>3<br>8<br>2 | 0<br>0<br>3<br>8<br>5 | 0<br>0<br>3<br>9<br>9 | 0<br>0<br>3<br>8<br>8 | 0<br>0<br>3<br>8<br>6 | 0<br>0<br>3<br>8<br>2 | 0<br>0<br>3<br>8<br>1 | 0<br>0<br>3<br>6<br>9 | 0<br>0<br>3<br>6<br>5 | 0<br>0<br>3<br>8<br>9 | 0<br>0<br>3<br>9<br>5 | 0<br>0<br>3<br>9<br>1 | 0<br>0<br>3<br>9<br>3 | 0<br>0<br>3<br>9<br>5 | 0<br>0<br>3<br>7<br>5 |

Squamous Cell Carcinoma  
 Squamous Cell Papilloma

X

CARDIOVASCULAR SYSTEM

Blood Vessel

+ +

Heart

+ +

ENDOCRINE SYSTEM

Adrenal Cortex  
 Adenoma

+ + + + + + + + + + + + + + A + + + + + + + +  
 X

Adrenal Medulla  
 Pheochromocytoma Benign

+ + + + + + + + + + + + + + A + + + + + + + +

Islets, Pancreatic

+ +

Parathyroid Gland

+ M M + M + + + + + + + + + + + + + + + + + +

Pituitary Gland  
 Pars Distalis, Adenoma

+  
 X X X X X X X X

Thyroid Gland  
 C-cell, Adenoma

+ + M A + + A + + + + + + + + A A + + + + + + + +  
 X X

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

Clitoral Gland

+ +

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

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



TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS FEMALE<br>60 MG/KG | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | ANIMAL ID | females<br>(cont...) |
|-------------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|----------------------|
|                                     | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |           |                      |
|                                     | 0           | 3 | 3 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 |           |                      |
|                                     | 1           | 8 | 8 | 5 | 6 | 7 | 3 | 3 | 4 | 4 | 8 | 0 | 1 | 1 | 2 | 7 | 8 | 8 | 8 | 9 | 0 | 0 | 1 | 1 | 2 |           |                      |
|                                     | 4           | 1 | 4 | 9 | 8 | 1 | 3 | 7 | 2 | 7 | 3 | 7 | 0 | 2 | 5 | 0 | 1 | 2 | 5 | 4 | 1 | 6 | 4 | 4 | 0 |           |                      |
|                                     | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |           |                      |
|                                     | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |           |                      |
|                                     | 3           | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |           |                      |
|                                     | 7           | 6 | 7 | 9 | 8 | 6 | 6 | 8 | 7 | 8 | 8 | 9 | 7 | 9 | 8 | 8 | 6 | 6 | 5 | 8 | 9 | 5 | 9 | 7 |   |           |                      |
|                                     | 1           | 8 | 7 | 6 | 1 | 9 | 6 | 9 | 2 | 7 | 2 | 5 | 9 | 8 | 6 | 8 | 2 | 1 | 0 | 9 | 5 | 9 | 1 | 3 | 5 |           |                      |

Squamous Cell Papilloma

MUSCULOSKELETAL SYSTEM

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bone         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Chordoma     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Osteosarcoma |   |   |   |   | X |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

NERVOUS SYSTEM

|                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Brain                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Oligodendroglioma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

RESPIRATORY SYSTEM

|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Lung                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Alveolar/Bronchiolar Adenoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Neural Crest Tumor, Metastatic, Ear |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Osteosarcoma, Metastatic, Bone      |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Nose                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |  |
| Transitional Epithelium, Adenoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   | X |  |
| Trachea                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

SPECIAL SENSES SYSTEM

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Ear                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Neural Crest Tumor |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Eye                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Harderian Gland    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

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

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





TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS FEMALE<br>60 MG/KG | DAY ON TEST |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | * TOTALS |          |
|-------------------------------------|-------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
|                                     | 07<br>20    | 07<br>21 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 | 07<br>28 |          | 07<br>28 |
| ANIMAL ID                           | 00397       | 00400    | 00405    | 00406    | 00430    | 00433    | 00433    | 00433    | 00433    | 00433    | 00433    | 00433    | 00433    | 00433    | 00433    | 00433    | 00433    | 00433    | 00433    | 00433    | 00433    | 00433    |

|                         |        |
|-------------------------|--------|
| Squamous Cell Carcinoma | 1      |
| Squamous Cell Papilloma | X<br>1 |

CARDIOVASCULAR SYSTEM

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Heart        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

ENDOCRINE SYSTEM

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Adenoma                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   | 2  |
| Adrenal Medulla         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Pheochromocytoma Benign |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Islets, Pancreatic      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Parathyroid Gland       | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 |
| Pituitary Gland         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Pars Distalis, Adenoma  |   | X |   |   |   | X |   |   |   |   |   | X | X | X |   |   | X |   | X | X | X | X |   | 20 |
| Thyroid Gland           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 45 |
| C-cell, Adenoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Clitoral Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

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

TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

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First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| FISCHER 344 RATS FEMALE<br>60 MG/KG                               | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS          |
|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-------------------|
|   | 070         | 072  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  | 078  |                   |
| ANIMAL ID   | 0097        | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 | 0097 |                   |
| Adenoma   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 2                 |
| Ovary<br>Granulosa Cell Tumor Malignant                           | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50<br>1           |
| Uterus<br>Polyp Stromal   | +           | +    | +    | +    | +    | X    | X    |      |      |      |      | X    |      |      |      |      |      | X    |      |      |      |      |      | 50<br>8           |
| <b>HEMATOPOIETIC SYSTEM</b>                                       |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                   |
| Bone Marrow   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50                |
| Lymph Node<br>Mediastinal, Neural Crest Tumor, Metastatic,<br>Ear |             |      |      | +    | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1<br>1            |
| Lymph Node, Mandibular  | M           | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | M    | 0                 |
| Lymph Node, Mesenteric  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 49                |
| Spleen  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50                |
| Thymus  | +           | +    | +    | M    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 48                |
| <b>INTEGUMENTARY SYSTEM</b>                                       |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                   |
| Mammary Gland<br>Fibroadenoma                                     | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50<br>11          |
| Skin<br>Basal Cell Carcinoma<br>Keratoacanthoma<br>Sarcoma        | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50<br>1<br>1<br>1 |

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

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Lab: BAT

| DAY ON TEST | FISCHER 344 RATS FEMALE |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |
|-------------|-------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|
|             | 070                     | 072   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   | 078   |          |
| 60 MG/KG    | 0097                    | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 0097  | 1        |
| ANIMAL ID   | 00397                   | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 00397 | 1        |

Squamous Cell Papilloma

X

1

**MUSCULOSKELETAL SYSTEM**

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Chordoma     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Osteosarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |

**NERVOUS SYSTEM**

|                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Oligodendroglioma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | 1  |

**RESPIRATORY SYSTEM**

|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Alveolar/Bronchiolar Adenoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Neural Crest Tumor, Metastatic, Ear |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | 1  |
| Osteosarcoma, Metastatic, Bone      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Nose                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Transitional Epithelium, Adenoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Trachea                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**SPECIAL SENSES SYSTEM**

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Ear                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Neural Crest Tumor |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | 1  |
| Eye                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Harderian Gland    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

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

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



TDMS No. 20107 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/F 344/N

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

N,N-Dimethyl-p-toluidine

CAS Number: 99-97-8

Date Report Requested: 01/24/2011

Time Report Requested: 10:59:00

First Dose M/F: 10/20/04 / 10/21/04

Lab: BAT

| DAY ON TEST             | FISCHER 344 RATS FEMALE |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |      |  |
|-------------------------|-------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|------|--|
|                         | 0720                    | 0721  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  | 0728  |          | 0728 |  |
| ANIMAL ID               | 00397                   | 00400 | 00403 | 00405 | 00406 | 00407 | 00409 | 00412 | 00414 | 00417 | 00419 | 00423 | 00425 | 00427 | 00429 | 00433 | 00434 | 00436 | 00438 | 00440 | 00442 | 00444 | 00446 | 00448 | 00450    |      |  |
| Lacrimal Gland          |                         |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1    |  |
| <b>URINARY SYSTEM</b>   |                         |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |      |  |
| Kidney                  | +                       | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50   |  |
| Urinary Bladder         | +                       | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50   |  |
| <b>SYSTEMIC LESIONS</b> |                         |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |      |  |
| Multiple Organ          | +                       | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50   |  |
| Leukemia Mononuclear    |                         |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |      |  |

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

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

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