

**TDMS No.** 99037 - 06  
**Test Type:** CHRONIC  
**Route:** GAVAGE  
**Species/Strain:** MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**  
alpha/beta Thujone mixture  
**CAS Number:** THUJONEMIXAB

**Date Report Requested:** 08/11/2010  
**Time Report Requested:** 13:12:57  
**First Dose M/F:** 06/30/03 / 06/30/03  
**Lab:** SRI

F2\_M3

**C Number:** C99037B  
**Lock Date:** 11/20/2006  
**Cage Range:** ALL  
**Date Range:** ALL  
**Reasons For Removal:** 25022 ACCK  
25019 MSAC  
**Removal Date Range:** ALL  
**Treatment Groups:** Include ALL  
**Study Gender:** Both  
**TDMSE Version:** 2.2.0

25021 TSAC  
25018 DACC

25020 NATD

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<b>B6C3F1 MICE MALE</b>	DAY ON TEST	0731	0649	0568	0771	0777	0777	0777	0777	0777	0777	0478	0777	0777	0777	0777	0777	0677	0777	0677	0777	0777	0777	<b>0 MG/KG</b>	ANIMAL ID	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	males (cont...)
	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000																									

**ALIMENTARY SYSTEM**

Esophagus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Gallbladder	+	+	A	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+	+
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	A	+	+	+	+	+	+
Leiomyosarcoma																							
Liver	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Hemangiosarcoma	X						X																
Hepatoblastoma											X												
Hepatoblastoma, Multiple																							
Hepatocellular Adenoma																		X		X	X		X
Hepatocellular Adenoma, Multiple							X	X	X	X	X					X							
Hepatocellular Carcinoma			X					X						X				X	X			X	
Hepatocellular Carcinoma, Multiple															X								X
Hepatocholangioma																							
Histiocytic Sarcoma											X												
Lymphoma Malignant	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

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B6C3F1 MICE MALE 0 MG/KG	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	ANIMAL ID	males (cont...)
		7	6	5	7	7	7	7	7	7	7	4	7	7	7	7	2	7	6	7	7	6	7	7		
		3	4	6	3	2	2	3	3	3	3	9	3	3	3	2	3	0	3	3	3	3	3	3		
		1	9	8	1	9	9	0	0	0	1	1	8	0	0	9	1	3	0	1	0	1	0	1		
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
		0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	2	2	2	2	2		
		1	2	3	4	5	6	7	8	9	0	1	2	3	4	5	6	7	8	9	0	1	2	3		

Mesentery  
 Leiomyosarcoma, Metastatic, Intestine Small,  
 Jejunum

+ +

Pancreas  
 Leiomyosarcoma, Metastatic, Intestine Small,  
 Jejunum  
 Lymphoma Malignant

+  
 X

Salivary Glands  
 Lymphoma Malignant

+  
 X

Stomach, Forestomach

+ +

Stomach, Glandular

+ +

Tongue  
 Fibroma

**CARDIOVASCULAR SYSTEM**

Heart  
 Lymphoma Malignant

+  
 X X

**ENDOCRINE SYSTEM**

Adrenal Cortex  
 Lymphoma Malignant  
 Subcapsular, Adenoma

+  
 X X X X

Adrenal Medulla

+ +

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
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| B6C3F1 MICE MALE<br><br>0 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | males<br>(cont...) |
|---------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|--------------------|
|                                 | 0<br>7<br>3<br>1 | 0<br>6<br>4<br>9 | 0<br>5<br>6<br>8 | 0<br>7<br>7<br>1 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>6<br>3<br>0 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>6<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 |           |                    |
|                                 | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                |           |                    |
|                                 | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                |           |                    |
|                                 | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                |           |                    |
|                                 | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                |           |                    |
|                                 | 1                | 2                | 3                | 4                | 5                | 6                | 7                | 8                | 9                | 0                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 2                | 2                | 2                | 2                |           |                    |

Pheochromocytoma Malignant

Islets, Pancreatic  
Adenoma

+  
 X X

Parathyroid Gland

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

Pituitary Gland

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

Thyroid Gland  
Follicular Cell, Adenoma  
Follicular Cell, Carcinoma

+ +

**GENERAL BODY SYSTEM**

Tissue NOS  
Hepatocellular Carcinoma, Metastatic, Liver

+  
X

**GENITAL SYSTEM**

Epididymis

+ +

Penis

+

Preputial Gland  
Lymphoma Malignant

+  
 X

Prostate  
Lymphoma Malignant

+ + + + + + + + + + + M + + + + + + + + + + + + + +  
 X

Seminal Vesicle

+ +

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| B6C3F1 MICE MALE<br>0 MG/KG | DAY ON TEST | 0           |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             | males<br>(cont...) |             |
|-----------------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------------------|-------------|
|                             |             | 7<br>3<br>1 | 6<br>4<br>9 | 5<br>6<br>8 | 7<br>7<br>1 | 7<br>7<br>2 | 7<br>7<br>2 | 7<br>7<br>3 | 7<br>7<br>3 | 7<br>7<br>3 | 7<br>7<br>0 | 7<br>7<br>1 | 7<br>7<br>1 | 4<br>9<br>8 | 7<br>7<br>3 | 7<br>7<br>3 | 7<br>7<br>3 | 6<br>7<br>3 | 7<br>7<br>3 | 6<br>7<br>3 | 7<br>7<br>3 |                    | 7<br>7<br>3 |
| 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           | 1           | 1           | 1           | 1           | 1           | 1           | 1           | 1           | 1           | 2           | 2           | 2                  |             |
|                             |             | 1           | 2           | 3           | 4           | 5           | 6           | 7           | 8           | 9           | 0           | 1           | 2           | 3           | 4           | 5           | 6           | 7           | 8           | 9           | 0           | 1                  |             |

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Testes                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Interstitial Cell, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |

**HEMATOPOIETIC SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymphoma Malignant   | X |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Lymph Node   | + |   | + |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |
| Lymphoma Malignant   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Iliac, Lymphoma Malignant                                  | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mediastinal, Lymphoma Malignant                            | X |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |
| Pancreatic, Lymphoma Malignant                             | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Renal, Lymphoma Malignant                                  | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Thoracic, Alveolar/Bronchiolar Carcinoma, Metastatic, Lung |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node, Mandibular                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | I | M | + | + | + | + | + | + | + |
| Lymphoma Malignant   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node, Mesenteric                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymphoma Malignant   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Plasma Cell Tumor Malignant                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Spleen   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hemangiosarcoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymphoma Malignant   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Thymus   | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + |
| Hepatocellular Carcinoma, Metastatic, Liver                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |

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 + .. Tissue examined microscopically  
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| B6C3F1 MICE MALE<br><br>0 MG/KG | DAY ON TEST | ANIMAL ID |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | males<br>(cont...) |
|---------------------------------|-------------|-----------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|--------------------|
|                                 |             | 0731      | 0734 | 0738 | 0731 | 0732 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 | 0737 |                    |
|                                 |             | 0         | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    |      |                    |
|                                 |             | 7         | 6    | 5    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 4    | 7    | 7    | 7    | 7    | 7    | 6    | 7    | 7    | 7    | 6    | 7    | 7    |      |                    |
|                                 |             | 3         | 4    | 6    | 3    | 2    | 2    | 3    | 3    | 3    | 3    | 9    | 3    | 3    | 3    | 2    | 3    | 0    | 3    | 3    | 3    | 3    | 3    | 3    | 3    |      |                    |
|                                 |             | 1         | 9    | 8    | 1    | 9    | 9    | 0    | 0    | 0    | 1    | 1    | 8    | 0    | 0    | 0    | 9    | 1    | 3    | 0    | 1    | 0    | 1    | 0    | 1    |      |                    |

Lymphoma Malignant

X

X

**INTEGUMENTARY SYSTEM**

Mammary Gland

+ +

Skin

+ +

**MUSCULOSKELETAL SYSTEM**

Bone

+ +

Osteoma

Skeletal Muscle

+

Hemangiosarcoma

X

**NERVOUS SYSTEM**

Brain

+ +

**RESPIRATORY SYSTEM**

Lung

+ +

Alveolar/Bronchiolar Adenoma

X

X

X

Alveolar/Bronchiolar Carcinoma

X

X

X

X

Hepatocellular Carcinoma, Metastatic, Liver

X

X

Leiomyosarcoma, Metastatic, Intestine Small, Jejunum

Lymphoma Malignant

X

Nose

+ +

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| B6C3F1 MICE MALE<br><br>0 MG/KG   | 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 | ANIMAL ID |   | males<br>(cont...) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|---|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|--|--|--|
|   |             | 7 | 6 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 7 | 7 | 7 |   |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
|   |             | 3 | 4 | 6 | 3 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 9 | 3 | 3 | 3 | 2 | 3 | 0 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 1 | 0         | 0 | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |   |   |  |  |  |  |  |
|   |             | 1 | 9 | 8 | 1 | 9 | 9 | 0 | 0 | 0 | 0 | 1 | 1 | 8 | 0 | 0 | 9 | 1 | 3 | 0 | 1 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 2         | 0 | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |  |  |  |  |
| Lymphoma Malignant  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
| Trachea   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
| <b>SPECIAL SENSES SYSTEM</b>  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
| Eye   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
| Harderian Gland<br>Adenoma<br>Carcinoma   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
|   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
|   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
| <b>URINARY SYSTEM</b>   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
| Kidney<br>Alveolar/Bronchiolar Carcinoma, Metastatic,<br>Lung<br>Lymphoma Malignant |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
|   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
| Urinary Bladder<br>Lymphoma Malignant   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
|   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
| <b>SYSTEMIC LESIONS</b>   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
| Multiple Organ<br>Histiocytic Sarcoma<br>Lymphoma 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE<br>0 MG/KG | DAY ON TEST | 0 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |   |   |   |   |
|-----------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|---|---|---|
|                             |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          | 0 | 0 | 0 | 0 |
| 2                           | 2           | 3 | 0 | 2 | 7 | 3 | 9 | 2 | 3 | 8 | 3 | 2 | 3 | 3 | 2 | 7 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 | 3 | 2 | 2 |
| 9                           | 9           | 0 | 4 | 9 | 7 | 0 | 8 | 9 | 1 | 1 | 0 | 9 | 0 | 1 | 9 | 6 | 1 | 9 | 9 | 1 | 1 | 1 | 0        | 0 | 0 | 0 | 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 |
| 2                           | 2           | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4        | 4 | 4 | 5 | 2 |
| 6                           | 7           | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9        | 0 | 0 | 0 |   |

ALIMENTARY SYSTEM

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Gallbladder                        | + | + | + | A | + | + | + | + | + | A | + | + | M | + | M | + | + | + | + | M | + | + | + | + | + | + | 43 |
| Intestine Large, Cecum             | + | + | + | + | + | + | + | I | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Intestine Large, Colon             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Rectum            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Duodenum          | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Intestine Small, Ileum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Jejunum           | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Leiomyosarcoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | 1  |
| Liver                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Hemangiosarcoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Hepatoblastoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Hepatoblastoma, Multiple           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   | 1  |
| Hepatocellular Adenoma             | X | X | X |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   | X |   |   |   |   | 10 |
| Hepatocellular Adenoma, Multiple   |   |   |   |   |   |   | X | X | X |   |   |   | X | X |   |   |   | X |   |   |   | X |   |   |   |   | 14 |
| Hepatocellular Carcinoma           | X |   |   | X |   |   |   | X | X | X | X |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   | 13 |
| Hepatocellular Carcinoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Hepatocholangioma                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | 1  |
| Histiocytic Sarcoma                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE<br>0 MG/KG | 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 | * TOTALS |
|-----------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|                             | ANIMAL ID   | 7 | 7 | 7 | 6 | 7 | 6 | 7 | 5 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 4 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |          |
|                             |             | 2 | 2 | 3 | 0 | 2 | 7 | 3 | 9 | 2 | 3 | 8 | 3 | 2 | 3 | 3 | 2 | 7 | 3 | 3 | 3 | 3 | 3 | 3 | 2 | 9 |          |
|                             |             | 9 | 9 | 0 | 4 | 9 | 7 | 0 | 8 | 9 | 1 | 1 | 0 | 9 | 0 | 1 | 9 | 6 | 1 | 9 | 9 | 1 | 1 | 1 | 0 | 2 |          |
|                             |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
|                             |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
|                             |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
|                             |             | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 |          |
|                             |             | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |          |

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Mesentery  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
| Leiomyosarcoma, Metastatic, Intestine Small, Jejunum |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
| Pancreas   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Leiomyosarcoma, Metastatic, Intestine Small, Jejunum |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Lymphoma Malignant                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Salivary Glands                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Lymphoma Malignant                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Stomach, Forestomach                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Stomach, Glandular                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Tongue   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Fibroma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

**CARDIOVASCULAR SYSTEM**

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Heart              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |

**ENDOCRINE SYSTEM**

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Adrenal Cortex       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Lymphoma Malignant   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Subcapsular, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Adrenal Medulla      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | 49 |   |

\* .. 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE | 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 | * TOTALS |
|------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|                  |             | 7 | 7 | 7 | 6 | 7 | 6 | 7 | 5 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 4 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |          |
| 0 MG/KG          | ANIMAL ID   | 2 | 2 | 3 | 0 | 2 | 7 | 3 | 9 | 2 | 3 | 8 | 3 | 2 | 3 | 3 | 2 | 7 | 3 | 3 | 3 | 3 | 3 | 3 | 2 |          |
|                  |             | 9 | 9 | 0 | 4 | 9 | 7 | 0 | 8 | 9 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 6 | 1 | 9 | 9 | 1 | 1 | 1 | 0 |          |
|                  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
|                  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
|                  |             | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 |          |
|                  |             | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |          |

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Pheochromocytoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | 1  |   |
| Islets, Pancreatic Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   | 50 |   |
|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  | 4 |
| Parathyroid Gland          | + | + | + | + | + | + | + | + | + | + | + | + | M | + | M | M | + | + | + | + | + | M | + | + | M | + |   | 43 |   |
| Pituitary Gland            | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + |   | 48 |   |
| Thyroid Gland              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   | 49 |   |
| Follicular Cell, Adenoma   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |   |
| Follicular Cell, Carcinoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | 1  |   |

### GENERAL BODY SYSTEM

|   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |   |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|
| Tissue NOS                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |   |
| Hepatocellular Carcinoma, Metastatic, Liver |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   | 1 |

### GENITAL SYSTEM

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |    |   |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|----|---|
| Epididymis         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  | 50 |   |
| Penis              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |    | 1 |
| Preputial Gland    | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  | 49 |   |
| Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |    | 1 |
| Prostate           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  | 49 |   |
| Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |    | 1 |
| Seminal Vesicle    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  | 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. 99037 - 06

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

alpha/beta Thujone mixture

CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010

Time Report Requested: 13:12:57

First Dose M/F: 06/30/03 / 06/30/03

Lab: SRI

| B6C3F1 MICE MALE<br>0 MG/KG                          | 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  | * TOTALS |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----------|
|  |             | 7 | 7 | 7 | 6 | 7 | 6 | 7 | 5 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 4 | 7 | 7 | 7 | 7 | 7  |          |
|  |             | 2 | 2 | 3 | 0 | 2 | 7 | 3 | 9 | 2 | 3 | 8 | 3 | 2 | 3 | 3 | 2 | 7 | 3 | 2 | 3 | 3 | 3  |          |
|  |             | 9 | 9 | 0 | 4 | 9 | 7 | 0 | 8 | 9 | 9 | 1 | 1 | 0 | 9 | 0 | 1 | 9 | 6 | 1 | 9 | 9 | 1  |          |
| ANIMAL ID  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |          |
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |          |
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |          |
|  |             | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4  | 5        |
|  |             | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7  | 9        |
| Lymphoma Malignant                                   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |          |
| <b>INTEGUMENTARY SYSTEM</b>                          |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |          |
| Mammary Gland  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |          |
| Skin   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |          |
| <b>MUSCULOSKELETAL SYSTEM</b>                        |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |          |
| Bone   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |          |
| Osteoma  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   | 1  |          |
| Skeletal Muscle                                      |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   | 2  |          |
| Hemangiosarcoma                                      |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   | 2  |          |
| <b>NERVOUS SYSTEM</b>                                |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |          |
| Brain  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |          |
| <b>RESPIRATORY SYSTEM</b>                            |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |          |
| Lung   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |          |
| Alveolar/Bronchiolar Adenoma                         |             |   |   | X |   |   |   |   | X | X |   |   |   |   |   |   |   |   | X |   |   |   | 7  |          |
| Alveolar/Bronchiolar Carcinoma                       |             |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | X |   |   | 6  |          |
| Hepatocellular Carcinoma, Metastatic, Liver          |             |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   |   |   |   |   | 4  |          |
| Leiomyosarcoma, Metastatic, Intestine Small, Jejunum |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | 1  |          |
| Lymphoma Malignant                                   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 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  
BLANK .. Not examined microscopically

TDMS No. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE<br>0 MG/KG                      | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |  |  |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|--|
|  | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      | 0<br>6<br>2<br>4      | 0<br>7<br>7<br>9      | 0<br>6<br>3<br>7      | 0<br>7<br>9<br>0      | 0<br>5<br>2<br>8      | 0<br>7<br>3<br>9      | 0<br>7<br>1<br>1      | 0<br>5<br>3<br>8      | 0<br>7<br>2<br>3      | 0<br>7<br>3<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>1      | 0<br>4<br>7<br>6      | 0<br>7<br>3<br>1      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>9      |                       |  |  |
| ANIMAL ID  | 0<br>0<br>0<br>2<br>6 | 0<br>0<br>0<br>2<br>7 | 0<br>0<br>0<br>2<br>8 | 0<br>0<br>0<br>2<br>9 | 0<br>0<br>0<br>3<br>0 | 0<br>0<br>0<br>3<br>1 | 0<br>0<br>0<br>3<br>2 | 0<br>0<br>0<br>3<br>3 | 0<br>0<br>0<br>3<br>4 | 0<br>0<br>0<br>3<br>5 | 0<br>0<br>0<br>3<br>6 | 0<br>0<br>0<br>3<br>7 | 0<br>0<br>0<br>3<br>8 | 0<br>0<br>0<br>3<br>9 | 0<br>0<br>0<br>4<br>0 | 0<br>0<br>0<br>4<br>1 | 0<br>0<br>0<br>4<br>2 | 0<br>0<br>0<br>4<br>3 | 0<br>0<br>0<br>4<br>4 | 0<br>0<br>0<br>4<br>5 | 0<br>0<br>0<br>4<br>6 | 0<br>0<br>0<br>4<br>7 | 0<br>0<br>0<br>4<br>8 | 0<br>0<br>0<br>4<br>9 | 0<br>0<br>0<br>5<br>0 |  |  |
| Lymphoma Malignant                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |  |  |
| Trachea  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |  |  |
| <b>SPECIAL SENSES SYSTEM</b>                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
| Eye  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |  |  |
| Harderian Gland                                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |  |  |
| Adenoma  |                       | X                     |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       | X                     |                       | X                     |                       |                       |                       |                       | 8                     |                       |  |  |
| Carcinoma  |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |                       |  |  |
| <b>URINARY SYSTEM</b>                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
| Kidney   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |  |  |
| Alveolar/Bronchiolar Carcinoma, Metastatic, Lung |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |  |  |
| Lymphoma Malignant                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |  |  |
| Urinary Bladder                                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |  |  |
| Lymphoma Malignant                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |  |  |
| <b>SYSTEMIC LESIONS</b>                          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
| Multiple Organ                                   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |  |  |
| Histiocytic Sarcoma                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |  |  |
| Lymphoma Malignant                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 4                     |                       |  |  |

\* .. 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



| B6C3F1 MICE MALE<br>3 MG/KG                           | DAY ON TEST | 0730 | 0730 | 0731 | 0731 | 0764 | 0771 | 0772 | 0773 | 0774 | 0776 | 0777 | 0777 | 0777 | 0777 | 0767 | 0777 | 0777 | 0767 | 0777 | 0777 | 0767 | 0777 | 0777 | 0767 | 0777 | 0777 | 0767 | 0777 | 0777 | 0767 | 0777 | 0777 | 0767 | 0777 | males<br>(cont...) |      |
|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|--------------------|------|
|   | ANIMAL ID   | 0051 | 0052 | 0053 | 0054 | 0055 | 0056 | 0057 | 0058 | 0059 | 0060 | 0061 | 0062 | 0063 | 0064 | 0065 | 0066 | 0067 | 0068 | 0069 | 0070 | 0071 | 0072 | 0073 | 0074 | 0075 | 0076 | 0077 | 0078 | 0079 | 0080 | 0081 | 0082 | 0083 | 0084 |                    | 0085 |
| Sarcoma   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                    |      |
| Pancreas<br>Sarcoma, Metastatic, Mesentery            |             | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                  |      |
| Salivary Glands                                       |             | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                  |      |
| Stomach, Forestomach                                  |             | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                  |      |
| Stomach, Glandular                                    |             | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                  |      |
| <b>CARDIOVASCULAR SYSTEM</b>                          |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                    |      |
| Heart   |             | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                    |      |
| <b>ENDOCRINE SYSTEM</b>                               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                    |      |
| Adrenal Cortex<br>Subcapsular, Adenoma                |             | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                  |      |
| Adrenal Medulla<br>Bilateral, Pheochromocytoma Benign |             | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                  |      |
| Islets, Pancreatic<br>Adenoma<br>Adenoma, Multiple    |             | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                  |      |
| Parathyroid Gland                                     |             | +    | +    | +    | +    | +    | M    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                  |      |
| Pituitary Gland<br>Pars Distalis, Adenoma             |             | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                  | 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE<br>3 MG/KG | 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 | males<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 | 0 | 0 | 0 | 0 | 0 |                    |
| Thyroid Gland               |             | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |   |                    |
|                             |             | 3 | 3 | 3 | 3 | 5 | 3 | 2 | 3 | 2 | 7 | 3 | 3 | 3 | 3 | 5 | 2 | 3 | 3 | 3 | 3 | 6 | 3 | 3 | 3 | 3 | 3 | 3 |   |                    |
|                             |             | 0 | 0 | 1 | 1 | 4 | 1 | 9 | 0 | 9 | 4 | 0 | 1 | 1 | 0 | 4 | 9 | 1 | 0 | 1 | 0 | 3 | 3 | 1 | 0 | 1 | 0 | 2 | 2 |                    |
|                             |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    |
|                             |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    |
|                             |             | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |                    |
|                             |             | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |   |                    |
|                             |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |                    |

**GENERAL BODY SYSTEM**

Tissue NOS  
 Hemangiosarcoma

**GENITAL SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Epididymis  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Preputial Gland<br>Hemangiosarcoma                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | I | + | + | + | + | + |   |  |
| Prostate  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Seminal Vesicle<br>Sarcoma, Metastatic, Mesentery | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Testes<br>Interstitial Cell, Adenoma              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

**HEMATOPOIETIC SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bone Marrow<br>Mast Cell Tumor Malignant            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymph Node, Mandibular<br>Mast Cell Tumor Malignant | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymph Node, Mesenteric                              | + | + | + | + | + | + | + | + | + | M | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

\* .. 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE<br>3 MG/KG | 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 | ANIMAL ID | males<br>(cont...) |   |  |
|-----------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|--------------------|---|--|
|                             | 7           | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 |           |                    |   |  |
|                             |             | 3 | 3 | 3 | 3 | 3 | 5 | 3 | 2 | 3 | 2 | 7 | 3 | 3 | 3 | 5 | 2 | 3 | 3 | 3 | 6 | 3 | 3 | 6 | 3 | 0         | 0                  |   |  |
|                             |             | 0 | 0 | 1 | 1 | 0 | 4 | 1 | 9 | 0 | 9 | 4 | 0 | 1 | 1 | 0 | 4 | 9 | 1 | 0 | 1 | 0 | 3 | 3 | 3 | 1         | 0                  | 0 |  |
|                             |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         | 0                  | 0 |  |
|                             |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         | 0                  | 0 |  |
|                             |             | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7         | 0                  | 0 |  |
|                             |             | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5         | 0                  | 0 |  |

Histiocytic Sarcoma  
 Lymphoma Malignant

Spleen  
 Lymphoma Malignant  
 Mast Cell Tumor Malignant

Thymus  
 Lymphoma Malignant

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

**INTEGUMENTARY SYSTEM**

Mammary Gland

Skin  
 Mast Cell Tumor Malignant  
 Subcutaneous Tissue, Hemangiosarcoma  
 Subcutaneous Tissue, Osteosarcoma,  
 Metastatic, Uncertain Primary Site

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
|   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

**MUSCULOSKELETAL SYSTEM**

Bone

Skeletal Muscle  
 Sarcoma

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

**NERVOUS SYSTEM**

Brain

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

\* .. 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. 99037 - 06  
Test Type: CHRONIC  
Route: GAVAGE  
Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
alpha/beta Thujone mixture  
CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
Time Report Requested: 13:12:57  
First Dose M/F: 06/30/03 / 06/30/03  
Lab: SRI

|                         |             |                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------|-------------|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 MICE MALE</b> | 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 |   |
|                         |             | 7                                | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 |   |
|                         |             | 3                                | 3 | 3 | 3 | 3 | 5 | 3 | 2 | 3 | 2 | 7 | 3 | 3 | 3 | 3 | 5 | 2 | 3 | 3 | 3 | 3 | 6 | 3 | 3 |   |
| <b>3 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 | 0 | 0 |   |   |
|                         |             | 5                                | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 |   |   |
|                         |             |                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                         |             | 1                                | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 |
|                         |             | <b>males</b><br><b>(cont...)</b> |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

Multiple Organ  
Histiocytic Sarcoma  
Lymphoma 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

| B6C3F1 MICE MALE<br>3 MG/KG | DAY ON TEST | 0 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | * TOTALS |
|-----------------------------|-------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----------|
|                             |             | 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |
|                             |             | 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |
| ANIMAL ID                   |             | 0 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | * TOTALS |
|                             |             | 0 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |
|                             |             | 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |
|                             |             | 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | * TOTALS |
|                             |             | 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |
|                             |             | 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |

**ALIMENTARY SYSTEM**

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|
| Esophagus                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Gallbladder                           | + | + | + | + | + | + | + | A | + | + | + | + | I | + | + | + | + | M | + | + | + | + | 45      |
| Intestine Large, Cecum                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Large, Colon                | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49      |
| Intestine Large, Rectum               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Small, Duodenum             | + | + | + | + | + | + | + | A | I | + | + | + | + | + | + | + | + | + | + | + | + | + | 46      |
| Intestine Small, Ileum                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | 48      |
| Intestine Small, Jejunum<br>Carcinoma | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46<br>2 |
| Liver                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Hemangiosarcoma                       |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3       |
| Hepatoblastoma                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3       |
| Hepatocellular Adenoma                |   |   | X |   |   |   | X | X |   |   | X |   | X | X |   | X |   |   | X |   | X | X | 15      |
| Hepatocellular Adenoma, Multiple      |   | X |   |   | X |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | 8       |
| Hepatocellular Carcinoma              |   |   |   |   | X | X |   | X |   | X | X | X |   |   |   |   |   | X |   | X |   |   | 18      |
| Hepatocellular Carcinoma, Multiple    |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | X |   | X | X |   | 8       |
| Mast Cell Tumor Malignant             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2       |
| Mesentery                             |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   | 4       |
| 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
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 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE<br>3 MG/KG | 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 | * TOTALS |
|-----------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|                             | ANIMAL ID   | 7 | 7 | 7 | 0 | 7 | 7 | 5 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |          |

Sarcoma 1

Pancreas Sarcoma, Metastatic, Mesentery + 50  
1

Salivary Glands + 50

Stomach, Forestomach + 50

Stomach, Glandular + 50

### CARDIOVASCULAR SYSTEM

Heart + 50

### ENDOCRINE SYSTEM

Adrenal Cortex Subcapsular, Adenoma + + + + + X + + + + + + + + + + + X + + + + 50  
4

Adrenal Medulla Bilateral, Pheochromocytoma Benign + + + + M + + + + + + + + + + + X + + + + 49  
1

Islets, Pancreatic Adenoma + X + 50  
1  
Adenoma, Multiple X 1

Parathyroid Gland + + + + I + + + + + + + + + + + + + + + + + + 48

Pituitary Gland Pars Distalis, Adenoma + 50  
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  
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First Dose M/F: 06/30/03 / 06/30/03  
Lab: SRI

| <b>B6C3F1 MICE MALE</b> | 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 | <b>* TOTALS</b> |   |
|-------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|
|                         |             | 7 | 7 | 7 | 0 | 7 | 7 | 5 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |                 |   |
| <b>3 MG/KG</b>          | ANIMAL ID   | 3 | 3 | 3 | 0 | 1 | 3 | 2 | 3 | 8 | 3 | 3 | 3 | 3 | 3 | 3 | 2 | 3 | 3 | 3 | 3 | 2 | 3 | 3 | 2 | 3 | 0               | 0 |
|                         |             | 1 | 0 | 0 | 4 | 5 | 0 | 9 | 1 | 7 | 1 | 1 | 0 | 0 | 0 | 0 | 1 | 9 | 0 | 1 | 1 | 1 | 9 | 0 | 1 | 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 |
|                         |             | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9               | 0 |
|                         |             | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0               |   |

Thyroid Gland

+ +

50

### GENERAL BODY SYSTEM

Tissue NOS + 1  
Hemangiosarcoma X 1

### GENITAL SYSTEM

Epididymis + 50  
Preputial Gland + 49  
Hemangiosarcoma X 1  
Prostate + 50  
Seminal Vesicle + 50  
Sarcoma, Metastatic, Mesentery 1  
Testes + 50  
Interstitial Cell, Adenoma X 1

### HEMATOPOIETIC SYSTEM

Bone Marrow + 50  
Mast Cell Tumor Malignant 2  
Lymph Node, Mandibular + + + + + + + + M + + + + + + + + + + + + + + 49  
Mast Cell Tumor Malignant 1  
Lymph Node, Mesenteric + 48

\* .. 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. 99037 - 06  
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**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**  
 alpha/beta Thujone mixture  
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 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

|   |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                 |           |
|---|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|-----------|
| DAY ON TEST   | ANIMAL ID | 7 | 7 | 7 | 0 | 7 | 7 | 5 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |                 |           |
| <b>B6C3F1 MICE MALE</b>   |           | 3 | 3 | 3 | 0 | 1 | 3 | 2 | 3 | 8 | 3 | 3 | 3 | 3 | 3 | 2 | 3 | 3 | 3 | 3 | 3 | 2 | 3 | 2 | 3 |                 |           |
|   |           | 1 | 0 | 0 | 4 | 5 | 0 | 9 | 1 | 7 | 1 | 1 | 0 | 0 | 0 | 1 | 9 | 0 | 1 | 1 | 1 | 9 | 0 | 1 | 0 |                 |           |
| <b>3 MG/KG</b>  |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                 |           |
|   |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                 |           |
|   |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                 |           |
|   |           | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |                 |           |
|   |           | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | <b>* TOTALS</b> |           |
| Histiocytic Sarcoma   |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X               | <b>1</b>  |
| Lymphoma Malignant  |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X               | <b>1</b>  |
| Spleen  |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b>       |           |
| Lymphoma Malignant  |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X               | <b>1</b>  |
| Mast Cell Tumor Malignant   |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | <b>2</b>  |
| Thymus  |           | + | + | + | + | + | + |   |   | I | + | + | M | + | + | + | + | + | + | + | + | + | + | + | M | +               | <b>43</b> |
| Lymphoma Malignant  |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X               | <b>1</b>  |
| <b>INTEGUMENTARY SYSTEM</b>   |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |           |
| Mammary Gland   |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +               | <b>50</b> |
| Skin  |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +               | <b>50</b> |
| Mast Cell Tumor Malignant   |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | <b>1</b>  |
| Subcutaneous Tissue, Hemangiosarcoma                                  |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | <b>1</b>  |
| Subcutaneous Tissue, Osteosarcoma, Metastatic, Uncertain Primary Site |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | <b>1</b>  |
| <b>MUSCULOSKELETAL SYSTEM</b>   |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |           |
| Bone  |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +               | <b>50</b> |
| Skeletal Muscle   |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | <b>1</b>  |
| Sarcoma   |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | <b>1</b>  |
| <b>NERVOUS SYSTEM</b>   |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |           |
| Brain   |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +               | <b>50</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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE<br>3 MG/KG | DAY ON TEST |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      | * TOTALS |
|-----------------------------|-------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|------|----------|
|                             | 07<br>31    | 07<br>30 | 07<br>30 | 07<br>04 | 07<br>75 | 07<br>73 | 07<br>52 | 07<br>73 | 07<br>68 | 07<br>73 | 07<br>73 | 07<br>73 | 07<br>73 | 07<br>73 | 07<br>73 | 07<br>73 | 07<br>73 | 07<br>73 | 07<br>73 | 07<br>73 | 07<br>73 | 07<br>73 |      |          |
| ANIMAL ID                   | 0076        | 0077     | 0078     | 0079     | 0080     | 0081     | 0082     | 0083     | 0084     | 0085     | 0086     | 0087     | 0088     | 0089     | 0090     | 0091     | 0092     | 0093     | 0094     | 0095     | 0096     | 0097     | 0098 |          |
|                             | 0           | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0    |          |
|                             | 0           | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0        | 0    |          |
|                             | 7           | 7        | 7        | 7        | 8        | 8        | 8        | 8        | 8        | 8        | 8        | 8        | 8        | 8        | 9        | 9        | 9        | 9        | 9        | 9        | 9        | 9        | 9    |          |
|                             | 6           | 7        | 8        | 9        | 0        | 1        | 2        | 3        | 4        | 5        | 6        | 7        | 8        | 9        | 0        | 1        | 2        | 3        | 4        | 5        | 6        | 7        | 8    |          |
|                             |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |      |          |

**RESPIRATORY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Alveolar/Bronchiolar Adenoma                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Alveolar/Bronchiolar Adenoma, Multiple      | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Alveolar/Bronchiolar Carcinoma              |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  |
| Hepatocellular Carcinoma, Metastatic, Liver |   |   |   |   |   |   |   |   | X |   |   | X |   | X |   |   |   |   |   | X |   |   |   | 8  |
| Nose  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Trachea                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**SPECIAL SENSES SYSTEM**

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Harderian Gland    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenoma            | X |   |   |   |   |   |   |   |   |   | X |   |   |   |   | X |   |   |   |   |   |   |   | 8  |
| Carcinoma          |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Bilateral, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | 1  |

**URINARY SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Urethra         |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**SYSTEMIC LESIONS**

\* .. 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. 99037 - 06

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

alpha/beta Thujone mixture

CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010

Time Report Requested: 13:12:57

First Dose M/F: 06/30/03 / 06/30/03

Lab: SRI

|                         |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |           |                 |  |
|-------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|-----------------|--|
| <b>B6C3F1 MICE MALE</b> | DAY ON TEST | 7 | 7 | 7 | 0 | 7 | 7 | 5 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7         |                 |  |
|                         |             | 3 | 3 | 3 | 0 | 1 | 3 | 2 | 3 | 8 | 3 | 3 | 3 | 3 | 3 | 2 | 3 | 3 | 3 | 3 | 3 | 2 | 3 | 3 | 2         | 3               |  |
|                         |             | 1 | 0 | 0 | 4 | 5 | 0 | 9 | 1 | 7 | 1 | 1 | 0 | 0 | 1 | 9 | 0 | 1 | 1 | 1 | 9 | 0 | 1 | 1 | 9         | 0               |  |
| <b>3 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 | 0 | 0 | 0 | 0         |                 |  |
|                         |             | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9         |                 |  |
|                         |             | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9         | <b>* TOTALS</b> |  |
| Multiple Organ          |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |                 |  |
| Histiocytic Sarcoma     |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |                 |  |
| Lymphoma Malignant      |             |   |   |   | X |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>2</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  
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|   |             |   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                                  |                  |
|---|-------------|---|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------------------------------|------------------|
| <b>B6C3F1 MICE MALE</b><br><br><b>6 MG/KG</b> | DAY ON TEST | 0<br>6<br>8<br>8  | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>0 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>6<br>9<br>6 | 0<br>6<br>9<br>8 | 0<br>6<br>6<br>7 | 0<br>7<br>2<br>9 | 0<br>6<br>7<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>5<br>8<br>9 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 | 0<br>7<br>2<br>9 | 0<br>7<br>3<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>3<br>0 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | <b>males</b><br><b>(cont...)</b> |                  |
|   | ANIMAL ID   | 0<br>0<br>1<br>0  | 0<br>0<br>1<br>0 | 0<br>0<br>1<br>0 | 0<br>0<br>1<br>0 | 0<br>0<br>1<br>0 | 0<br>0<br>1<br>0 | 0<br>0<br>1<br>0 | 0<br>0<br>1<br>0 | 0<br>0<br>1<br>1 | 0<br>0<br>1<br>1 | 0<br>0<br>1<br>1 | 0<br>0<br>1<br>1 | 0<br>0<br>1<br>1 | 0<br>0<br>1<br>1 | 0<br>0<br>1<br>1 | 0<br>0<br>1<br>1 | 0<br>0<br>1<br>1 | 0<br>0<br>1<br>1 | 0<br>0<br>1<br>2 | 0<br>0<br>1<br>2 | 0<br>0<br>1<br>2 | 0<br>0<br>1<br>2 | 0<br>0<br>1<br>2 |                                  | 0<br>0<br>1<br>2 |
|   |             | 1<br>2<br>3<br>4<br>5<br>6<br>7<br>8<br>9<br>0<br>1<br>2<br>3<br>4<br>5<br>6<br>7<br>8<br>9<br>0<br>1<br>2<br>3<br>4<br>5 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                                  |                  |

**ALIMENTARY SYSTEM**

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Gallbladder                        | A | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + |   |
| Intestine Large, Cecum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenoma                            |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Carcinoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |
| Intestine Small, Ileum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Carcinoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Intestine Small, Jejunum           | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Carcinoma                          | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymphoma Malignant                 |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Liver                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hemangiosarcoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Hepatoblastoma                     |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatocellular Adenoma             | X |   |   |   |   |   |   |   | X |   | X |   |   |   |   |   | X | X | X | X | X |   |   |   |
| Hepatocellular Adenoma, Multiple   |   |   | X | X |   |   |   |   |   |   |   | X | X | X |   |   |   |   |   |   |   | X | X | X |
| Hepatocellular Carcinoma           |   |   |   |   |   | X |   |   |   | X | X |   |   |   |   |   | X |   |   |   |   | X |   |   |
| Hepatocellular Carcinoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE<br>6 MG/KG | DAY ON TEST | 0<br>6<br>8<br>8      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      | 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>6<br>9<br>6      | 0<br>6<br>9<br>8      | 0<br>6<br>7<br>9      | 0<br>6<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>6<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>5<br>8<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>9      | 0<br>2<br>2<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9 | males<br>(cont...) |
|-----------------------------|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|--------------------|
|                             | ANIMAL ID   | 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>3 | 0<br>0<br>1<br>0<br>4 | 0<br>0<br>1<br>0<br>5 | 0<br>0<br>1<br>0<br>6 | 0<br>0<br>1<br>0<br>7 | 0<br>0<br>1<br>0<br>8 | 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>1 | 0<br>0<br>1<br>1<br>2 | 0<br>0<br>1<br>1<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>1<br>6 | 0<br>0<br>1<br>1<br>7 | 0<br>0<br>1<br>1<br>8 | 0<br>0<br>1<br>1<br>9 | 0<br>0<br>1<br>1<br>0 | 0<br>0<br>1<br>1<br>1 | 0<br>0<br>1<br>1<br>2 | 0<br>0<br>1<br>1<br>3 | 0<br>0<br>1<br>1<br>4 | 0<br>0<br>1<br>1<br>5 |                  |                    |

Lymphoma Malignant

X

Mesentery  
Alveolar/Bronchiolar Carcinoma, Metastatic,  
Lung

+

+

Pancreas  
Lymphoma Malignant

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

Salivary Glands  
Lymphoma Malignant

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

Stomach, Forestomach  
Squamous Cell Papilloma

+ +

Stomach, Glandular

+ +

Tooth

**CARDIOVASCULAR SYSTEM**

Heart  
Alveolar/Bronchiolar Carcinoma, Metastatic,  
Lung  
Lymphoma Malignant

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

**ENDOCRINE SYSTEM**

Adrenal Cortex  
Subcapsular, Adenoma

+ +

\* .. 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID |  |
|------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|--|
|                  | 0688        | 0731 | 0730 | 0729 | 0729 | 0729 | 0729 | 0729 | 0666 | 0666 | 0666 | 0777 | 0666 | 0777 | 0777 | 0777 | 0555 | 0777 | 0777 | 0777 | 0222 | 0777 | 0777 | 0777 | 0777 |           |  |
| 6 MG/KG          | 0010        | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011      |  |

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adrenal Medulla                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Islets, Pancreatic Adenoma       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Parathyroid Gland                | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | M | + | + |   |
| Pituitary Gland                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + |
| Thyroid Gland Lymphoma Malignant | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

**GENERAL BODY SYSTEM**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |   |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|
| Tissue NOS<br>Alveolar/Bronchiolar Carcinoma, Metastatic, Lung |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | + | X |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|

**GENITAL SYSTEM**

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Epididymis                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Preputial Gland Lymphoma Malignant | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Prostate Lymphoma Malignant        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Seminal Vesicle                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Testes                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

\* .. 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. 99037 - 06  
Test Type: CHRONIC  
Route: GAVAGE  
Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
alpha/beta Thujone mixture  
CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
Time Report Requested: 13:12:57  
First Dose M/F: 06/30/03 / 06/30/03  
Lab: SRI

|                  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
|------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|
| B6C3F1 MICE MALE | DAY ON TEST | 0688 | 0733 | 0732 | 0772 | 0772 | 0772 | 0666 | 0666 | 0767 | 0677 | 0777 | 0777 | 0555 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 | 0777 |
|                  | ANIMAL ID   | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 | 0010 |

males  
(cont...)

Lymphoma Malignant X  
Interstitial Cell, Adenoma X

### HEMATOPOIETIC SYSTEM

Bone Marrow +  
Lymphoma Malignant X

Lymph Node +  
Bronchial, Lymphoma Malignant X  
Iliac, Lymphoma Malignant X  
Mediastinal, Lymphoma Malignant X  
Renal, Lymphoma Malignant X

Lymph Node, Mandibular + + + + + + + + + + + + + + M + + + M + + + +  
Lymphoma Malignant X

Lymph Node, Mesenteric + + + + + + + + + M + + + + + + + + + M + + + +  
Lymphoma Malignant X

Spleen +  
Hemangiosarcoma X X X  
Lymphoma Malignant X

Thymus + + + + + + + + + + M + + + + + + + + + + + + + + +  
Lymphoma Malignant X

### INTEGUMENTARY SYSTEM

Mammary Gland +

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

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 Lab: SRI

| B6C3F1 MICE MALE<br>6 MG/KG                 | 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 | ANIMAL ID | males<br>(cont...) |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|--------------------|
|   |             | 6 | 7 | 7 | 7 | 7 | 7 | 6 | 6 | 6 | 7 | 6 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 2 | 7 | 2 | 7 | 7 | 7 | 7 |           |                    |
|   |             | 8 | 3 | 3 | 2 | 2 | 2 | 2 | 9 | 9 | 9 | 2 | 2 | 2 | 8 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 9 | 9 | 9 | 9 |           |                    |
|   |             | 8 | 1 | 0 | 9 | 9 | 9 | 6 | 8 | 7 | 1 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 9 | 0 | 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         |                    |
|   |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1         |                    |
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 0         |                    |
|   |             | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 |           |                    |
| Skin  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |           |                    |
| <b>MUSCULOSKELETAL SYSTEM</b>               |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Bone  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |                    |
| Skeletal Muscle                             |             |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Hemangiosarcoma                             |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Lymphoma Malignant                          |             |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| <b>NERVOUS SYSTEM</b>                       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Brain                                       |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |                    |
| <b>RESPIRATORY SYSTEM</b>                   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Lung  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |                    |
| Alveolar/Bronchiolar Adenoma                |             |   |   |   |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | X | X |   |           |                    |
| Alveolar/Bronchiolar Carcinoma              |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | X |   |   |   |           |                    |
| Alveolar/Bronchiolar Carcinoma, Multiple    |             |   |   |   |   |   |   |   |   |   |   | X |   | X |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Hepatocellular Carcinoma, Metastatic, Liver |             |   |   |   |   | X |   |   | X |   | X |   |   |   |   |   |   |   | X |   |   | X |   |   |   |   |           |                    |
| Lymphoma Malignant                          |             |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Nose  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |                    |
| Fibroma                                     |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Trachea                                     |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |                    |
| <b>SPECIAL SENSES SYSTEM</b>                |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                    |
| Eye   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |                    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
 + .. Tissue examined microscopically  
 X .. Lesion present  
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| B6C3F1 MICE MALE<br>6 MG/KG                      | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID | males<br>(cont...) |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      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|      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
|--|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|--------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|
|  | 0688        | 0731 | 0730 | 0729 | 0728 | 0727 | 0726 | 0725 | 0724 | 0723 | 0722 | 0721 | 0720 | 0719 | 0718 | 0717 | 0716 | 0715 | 0714 | 0713 | 0712 | 0711 | 0710 |           |                    | 0709 | 0708 | 0707 | 0706 | 0705 | 0704 | 0703 | 0702 | 0701 | 0700 | 0699 | 0698 | 0697 | 0696 | 0695 | 0694 | 0693 | 0692 | 0691 | 0690 | 0689 | 0688 | 0687 | 0686 | 0685 | 0684 | 0683 | 0682 | 0681 | 0680 | 0679 | 0678 | 0677 | 0676 | 0675 | 0674 | 0673 | 0672 | 0671 | 0670 | 0669 | 0668 | 0667 | 0666 | 0665 | 0664 | 0663 | 0662 | 0661 | 0660 | 0659 | 0658 | 0657 | 0656 | 0655 | 0654 | 0653 | 0652 | 0651 | 0650 | 0649 | 0648 | 0647 | 0646 | 0645 | 0644 | 0643 | 0642 | 0641 | 0640 | 0639 | 0638 | 0637 | 0636 | 0635 | 0634 | 0633 | 0632 | 0631 | 0630 | 0629 | 0628 | 0627 | 0626 | 0625 | 0624 | 0623 | 0622 | 0621 | 0620 | 0619 | 0618 | 0617 | 0616 | 0615 | 0614 | 0613 | 0612 | 0611 | 0610 | 0609 | 0608 | 0607 | 0606 | 0605 | 0604 | 0603 | 0602 | 0601 | 0600 | 0599 | 0598 | 0597 | 0596 | 0595 | 0594 | 0593 | 0592 | 0591 | 0590 | 0589 | 0588 | 0587 | 0586 | 0585 | 0584 | 0583 | 0582 | 0581 | 0580 | 0579 | 0578 | 0577 | 0576 | 0575 | 0574 | 0573 | 0572 | 0571 | 0570 | 0569 | 0568 | 0567 | 0566 | 0565 | 0564 | 0563 | 0562 | 0561 | 0560 | 0559 | 0558 | 0557 | 0556 | 0555 | 0554 | 0553 | 0552 | 0551 | 0550 | 0549 | 0548 | 0547 | 0546 | 0545 | 0544 | 0543 | 0542 | 0541 | 0540 | 0539 | 0538 | 0537 | 0536 | 0535 | 0534 | 0533 | 0532 | 0531 | 0530 | 0529 | 0528 | 0527 | 0526 | 0525 | 0524 | 0523 | 0522 | 0521 | 0520 | 0519 | 0518 | 0517 | 0516 | 0515 | 0514 | 0513 | 0512 | 0511 | 0510 | 0509 | 0508 | 0507 | 0506 | 0505 | 0504 | 0503 | 0502 | 0501 | 0500 | 0499 | 0498 | 0497 | 0496 | 0495 | 0494 | 0493 | 0492 | 0491 | 0490 | 0489 | 0488 | 0487 | 0486 | 0485 | 0484 | 0483 | 0482 | 0481 | 0480 | 0479 | 0478 | 0477 | 0476 | 0475 | 0474 | 0473 | 0472 | 0471 | 0470 | 0469 | 0468 | 0467 | 0466 | 0465 | 0464 | 0463 | 0462 | 0461 | 0460 | 0459 | 0458 | 0457 | 0456 | 0455 | 0454 | 0453 | 0452 | 0451 | 0450 | 0449 | 0448 | 0447 | 0446 | 0445 | 0444 | 0443 | 0442 | 0441 | 0440 | 0439 | 0438 | 0437 | 0436 | 0435 | 0434 | 0433 | 0432 | 0431 | 0430 | 0429 | 0428 | 0427 | 0426 | 0425 | 0424 | 0423 | 0422 | 0421 | 0420 | 0419 | 0418 | 0417 | 0416 | 0415 | 0414 | 0413 | 0412 | 0411 | 0410 | 0409 | 0408 | 0407 | 0406 | 0405 | 0404 | 0403 | 0402 | 0401 | 0400 | 0399 | 0398 | 0397 | 0396 | 0395 | 0394 | 0393 | 0392 | 0391 | 0390 | 0389 | 0388 | 0387 | 0386 | 0385 | 0384 | 0383 | 0382 | 0381 | 0380 | 0379 | 0378 | 0377 | 0376 | 0375 | 0374 | 0373 | 0372 | 0371 | 0370 | 0369 | 0368 | 0367 | 0366 | 0365 | 0364 | 0363 | 0362 | 0361 | 0360 | 0359 | 0358 | 0357 | 0356 | 0355 | 0354 | 0353 | 0352 | 0351 | 0350 | 0349 | 0348 | 0347 | 0346 | 0345 | 0344 | 0343 | 0342 | 0341 | 0340 | 0339 | 0338 | 0337 | 0336 | 0335 | 0334 | 0333 | 0332 | 0331 | 0330 | 0329 | 0328 | 0327 | 0326 | 0325 | 0324 | 0323 | 0322 | 0321 | 0320 | 0319 | 0318 | 0317 | 0316 | 0315 | 0314 | 0313 | 0312 | 0311 | 0310 | 0309 | 0308 | 0307 | 0306 | 0305 | 0304 | 0303 | 0302 | 0301 | 0300 | 0299 | 0298 | 0297 | 0296 | 0295 | 0294 | 0293 | 0292 | 0291 | 0290 | 0289 | 0288 | 0287 | 0286 | 0285 | 0284 | 0283 | 0282 | 0281 | 0280 | 0279 | 0278 | 0277 | 0276 | 0275 | 0274 | 0273 | 0272 | 0271 | 0270 | 0269 | 0268 | 0267 | 0266 | 0265 | 0264 | 0263 | 0262 | 0261 | 0260 | 0259 | 0258 | 0257 | 0256 | 0255 | 0254 | 0253 | 0252 | 0251 | 0250 | 0249 | 0248 | 0247 | 0246 | 0245 | 0244 | 0243 | 0242 | 0241 | 0240 | 0239 | 0238 | 0237 | 0236 | 0235 | 0234 | 0233 | 0232 | 0231 | 0230 | 0229 | 0228 | 0227 | 0226 | 0225 | 0224 | 0223 | 0222 | 0221 | 0220 | 0219 | 0218 | 0217 | 0216 | 0215 | 0214 | 0213 | 0212 | 0211 | 0210 | 0209 | 0208 | 0207 | 0206 | 0205 | 0204 | 0203 | 0202 | 0201 | 0200 | 0199 | 0198 | 0197 | 0196 | 0195 | 0194 | 0193 | 0192 | 0191 | 0190 | 0189 | 0188 | 0187 | 0186 | 0185 | 0184 | 0183 | 0182 | 0181 | 0180 | 0179 | 0178 | 0177 | 0176 | 0175 | 0174 | 0173 | 0172 | 0171 | 0170 | 0169 | 0168 | 0167 | 0166 | 0165 | 0164 | 0163 | 0162 | 0161 | 0160 | 0159 | 0158 | 0157 | 0156 | 0155 | 0154 | 0153 | 0152 | 0151 | 0150 | 0149 | 0148 | 0147 | 0146 | 0145 | 0144 | 0143 | 0142 | 0141 | 0140 | 0139 | 0138 | 0137 | 0136 | 0135 | 0134 | 0133 | 0132 | 0131 | 0130 | 0129 | 0128 | 0127 | 0126 | 0125 | 0124 | 0123 | 0122 | 0121 | 0120 | 0119 | 0118 | 0117 | 0116 | 0115 | 0114 | 0113 | 0112 | 0111 | 0110 | 0109 | 0108 | 0107 | 0106 | 0105 | 0104 | 0103 | 0102 | 0101 | 0100 | 0099 | 0098 | 0097 | 0096 | 0095 | 0094 | 0093 | 0092 | 0091 | 0090 | 0089 | 0088 | 0087 | 0086 | 0085 | 0084 | 0083 | 0082 | 0081 | 0080 | 0079 | 0078 | 0077 | 0076 | 0075 | 0074 | 0073 | 0072 | 0071 | 0070 | 0069 | 0068 | 0067 | 0066 | 0065 | 0064 | 0063 | 0062 | 0061 | 0060 | 0059 | 0058 | 0057 | 0056 | 0055 | 0054 | 0053 | 0052 | 0051 | 0050 | 0049 | 0048 | 0047 | 0046 | 0045 | 0044 | 0043 | 0042 | 0041 | 0040 | 0039 | 0038 | 0037 | 0036 | 0035 | 0034 | 0033 | 0032 | 0031 | 0030 | 0029 | 0028 | 0027 | 0026 | 0025 | 0024 | 0023 | 0022 | 0021 | 0020 | 0019 | 0018 | 0017 | 0016 | 0015 | 0014 | 0013 | 0012 | 0011 | 0010 | 0009 | 0008 | 0007 | 0006 | 0005 | 0004 | 0003 |
| Harderian Gland                                  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      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|      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Adenoma  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |    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  |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Carcinoma  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |  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    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Lymphoma Malignant                               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| <b>URINARY SYSTEM</b>                            |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Kidney   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Alveolar/Bronchiolar Carcinoma, Metastatic, Lung |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Lymphoma Malignant                               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Renal Tubule, Adenoma                            |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Urinary Bladder                                  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Lymphoma Malignant                               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| <b>SYSTEMIC LESIONS</b>                          |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Multiple Organ                                   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
| Lymphoma 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. 99037 - 06  
Test Type: CHRONIC  
Route: GAVAGE  
Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
alpha/beta Thujone mixture  
CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
Time Report Requested: 13:12:57  
First Dose M/F: 06/30/03 / 06/30/03  
Lab: SRI

| B6C3F1 MICE MALE | DAY ON TEST | 0 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  | * TOTALS |
|------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|----------|
|                  |             | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 |  |          |
| 6 MG/KG          | 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 |  |          |
|                  | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |  |          |
|                  | 2           | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 |  |          |
|                  | 6           | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 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 |  |          |

ALIMENTARY SYSTEM

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Esophagus                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Gallbladder                        | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | M | + | + | +  | 44 |
| Intestine Large, Cecum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | +  | 49 |
| Intestine Large, Colon             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Intestine Large, Rectum            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Intestine Small, Duodenum          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Adenoma                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Carcinoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Intestine Small, Ileum             | M | + | + | + | + | I | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 48 |
| Carcinoma                          |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Intestine Small, Jejunum           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 49 |
| Carcinoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2  |
| Lymphoma Malignant                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2  |
| Liver                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Hemangiosarcoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  | 2  |
| Hepatoblastoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Hepatocellular Adenoma             |   | X |   |   |   |   |   | X | X |   |   |   | X | X | X |   |   |   |   | X |   | X | 16 |    |
| Hepatocellular Adenoma, Multiple   | X |   |   | X | X | X | X |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   | 14 |    |
| Hepatocellular Carcinoma           |   | X | X |   | X | X |   |   |   |   |   | X | X | X |   | X | X |   |   |   |   |   | 15 |    |
| Hepatocellular Carcinoma, Multiple |   |   | X |   |   |   |   | X | X |   |   |   |   | X |   |   |   |   | X |   | X |   | 8  |    |

\* .. 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE<br>6 MG/KG | 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 | * TOTALS |
|-----------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|                             | ANIMAL ID   | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |          |
|                             |             | 3 | 2 | 6 | 3 | 3 | 3 | 2 | 0 | 3 | 2 | 3 | 3 | 3 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |          |
|                             |             | 0 | 9 | 4 | 1 | 0 | 0 | 9 | 4 | 0 | 9 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 1 | 5 | 0 | 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 |          |
|                             |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |          |
|                             |             | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 |          |
|                             |             | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 9 |          |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |   |    |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|---|----|
| Lymphoma Malignant                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |   |    |
| Mesentery  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | + | 3 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |   |    |
| Alveolar/Bronchiolar Carcinoma, Metastatic, Lung |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | X | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |   |    |
| Pancreas   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | + | + | 50 |
| Lymphoma Malignant                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |   |    |
| Salivary Glands                                  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |   |    |
| Lymphoma Malignant                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | X | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |   |    |
| Stomach, Forestomach                             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |   |    |
| Squamous Cell Papilloma                          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   | X | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |   |    |
| Stomach, Glandular                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |   |    |
| Tooth  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + | 1  |   |   |    |

**CARDIOVASCULAR SYSTEM**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Heart  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Alveolar/Bronchiolar Carcinoma, Metastatic, Lung |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   | X | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
| Lymphoma Malignant                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   | X | 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |

**ENDOCRINE SYSTEM**

|                      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Subcapsular, Adenoma |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 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

| <b>B6C3F1 MICE MALE</b>   |  | DAY ON TEST |       |       |       |       |       |       |       |       |       |                                       |       |       |       |       |       |       |       |       |       |       |       |         |                 |
|---|--|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|---------------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|---------|-----------------|
|   |  | 0730        | 0739  | 0664  | 0771  | 0777  | 0777  | 0777  | 0777  | 0777  | 0777  | 0777                                  | 0777  | 0777  | 0777  | 0777  | 0777  | 0777  | 0777  | 0667  | 0777  | 0777  | 0777  | 0777    |                 |
| <b>6 MG/KG</b>  |  | ANIMAL ID   |       |       |       |       |       |       |       |       |       |                                       |       |       |       |       |       |       |       |       |       |       |       |         | <b>* TOTALS</b> |
|   |  | 00126       | 00112 | 00111 | 00111 | 00111 | 00111 | 00111 | 00111 | 00111 | 00111 | 00111                                 | 00111 | 00111 | 00111 | 00111 | 00111 | 00111 | 00111 | 00111 | 00111 | 00111 | 00111 | 00111   |                 |
| Adrenal Medulla   |  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +                                     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50      |                 |
| Islets, Pancreatic Adenoma  |  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +                                     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50<br>1 |                 |
| Parathyroid Gland   |  | +           | +     | +     | +     | +     | +     | M     | +     | +     | +     | +                                     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 47      |                 |
| Pituitary Gland   |  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +                                     | +     | +     | +     | +     | +     | +     | M     | +     | +     | +     | +     | 48      |                 |
| Thyroid Gland Lymphoma Malignant  |  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +                                     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50<br>1 |                 |
| <b>GENERAL BODY SYSTEM</b>  |  |             |       |       |       |       |       |       |       |       |       |                                       |       |       |       |       |       |       |       |       |       |       |       |         |                 |
| Tissue NOS Alveolar/Bronchiolar Carcinoma, Metastatic, Lung                       |  |             |       |       |       |       |       |       |       |       |       |                                       |       |       |       |       |       |       |       |       |       |       |       | 1<br>1  |                 |
| <b>GENITAL SYSTEM</b>   |  |             |       |       |       |       |       |       |       |       |       |                                       |       |       |       |       |       |       |       |       |       |       |       |         |                 |
| Epididymis  |  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +                                     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50      |                 |
| Preputial Gland Lymphoma Malignant  |  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +                                     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50<br>2 |                 |
| Prostate Lymphoma Malignant   |  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +                                     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50<br>1 |                 |
| Seminal Vesicle   |  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +                                     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50      |                 |
| Testes  |  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +                                     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50      |                 |
| * .. Total animals with tissue examined microscopically; Total animals with tumor |  |             |       |       |       |       |       |       |       |       |       | M .. Missing tissue                   |       |       |       |       |       |       |       |       |       |       |       |         |                 |
| + .. Tissue examined microscopically  |  |             |       |       |       |       |       |       |       |       |       | A .. Autolysis precludes evaluation   |       |       |       |       |       |       |       |       |       |       |       |         |                 |
| X .. Lesion present   |  |             |       |       |       |       |       |       |       |       |       | BLANK .. Not examined microscopically |       |       |       |       |       |       |       |       |       |       |       |         |                 |
| I .. Insufficient tissue  |  |             |       |       |       |       |       |       |       |       |       |                                       |       |       |       |       |       |       |       |       |       |       |       |         |                 |

|                         |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  |
|-------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--|
| <b>B6C3F1 MICE MALE</b> | DAY ON TEST | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  | 0730  |  |
|                         | ANIMAL ID   | 00126 | 00127 | 00128 | 00129 | 00130 | 00131 | 00132 | 00133 | 00134 | 00135 | 00136 | 00137 | 00138 | 00139 | 00140 | 00141 | 00142 | 00143 | 00144 | 00145 | 00146 | 00147 | 00148 | 00149 | 00150 | 00151 | 00152 |  |

Lymphoma Malignant  
 Interstitial Cell, Adenoma

1  
1

**HEMATOPOIETIC SYSTEM**

Bone Marrow  
 Lymphoma Malignant

+ +

X

50  
2

Lymph Node  
 Bronchial, Lymphoma Malignant  
 Iliac, Lymphoma Malignant  
 Mediastinal, Lymphoma Malignant  
 Renal, Lymphoma Malignant

1  
1  
1  
1  
1

Lymph Node, Mandibular  
 Lymphoma Malignant

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

46  
1

Lymph Node, Mesenteric  
 Lymphoma Malignant

+ + + + + + + + + + X + + + + + + + + M + + + + +

47  
2

Spleen  
 Hemangiosarcoma  
 Lymphoma Malignant

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

X X

50  
3  
5

Thymus  
 Lymphoma Malignant

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

X

44  
2

**INTEGUMENTARY SYSTEM**

Mammary 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. 99037 - 06  
Test Type: CHRONIC  
Route: GAVAGE  
Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
alpha/beta Thujone mixture  
CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
Time Report Requested: 13:12:57  
First Dose M/F: 06/30/03 / 06/30/03  
Lab: SRI

| B6C3F1 MICE MALE                            | 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 | * TOTALS |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|   |             | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 |          |
| 6 MG/KG                                     | 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        |
|   |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 0        |
|   |             | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5        |
|   |             | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 0        |
| Skin  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |
| <b>MUSCULOSKELETAL SYSTEM</b>               |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Bone  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |
| Skeletal Muscle                             |             |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   | 3        |
| Hemangiosarcoma                             |             |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   | 1        |
| Lymphoma Malignant                          |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| <b>NERVOUS SYSTEM</b>                       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Brain                                       |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |
| <b>RESPIRATORY SYSTEM</b>                   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Lung  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |
| Alveolar/Bronchiolar Adenoma                |             |   |   |   | X |   |   |   |   |   |   |   |   | X |   |   |   |   | X |   |   |   |   | 8        |
| Alveolar/Bronchiolar Carcinoma              |             |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   |   |   | X |   | X |   |   | 6        |
| Alveolar/Bronchiolar Carcinoma, Multiple    |             |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3        |
| Hepatocellular Carcinoma, Metastatic, Liver |             |   |   | X |   |   |   |   |   | X |   |   |   | X | X |   |   |   |   |   |   |   |   | 9        |
| Lymphoma Malignant                          |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Nose  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |
| Fibroma                                     |             |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Trachea                                     |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |
| <b>SPECIAL SENSES SYSTEM</b>                |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Eye   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE<br>6 MG/KG | DAY ON TEST | ANIMAL ID |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |   |   |  |
|-----------------------------|-------------|-----------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|---|---|--|
|                             |             | 0730      | 0732 | 0734 | 0731 | 0733 | 0735 | 0737 | 0739 | 0741 | 0743 | 0745 | 0747 | 0749 | 0751 | 0753 | 0755 | 0757 | 0759 | 0761 | 0763 |          |   |   |  |
|                             |             | 0         | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    | 0    |          |   |   |  |
|                             |             | 7         | 7    | 6    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 7    | 6    | 7    | 7        | 7 | 7 |  |
|                             |             | 3         | 2    | 6    | 3    | 3    | 3    | 2    | 0    | 3    | 2    | 3    | 3    | 3    | 2    | 3    | 3    | 3    | 3    | 7    | 3    | 2        | 2 | 2 |  |
|                             |             | 0         | 9    | 4    | 1    | 0    | 0    | 9    | 4    | 0    | 9    | 1    | 0    | 0    | 9    | 0    | 0    | 0    | 1    | 1    | 5    | 0        | 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 |  |
|                             |             | 1         | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1    | 1        | 1 | 1 |  |
|                             |             | 2         | 2    | 2    | 2    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 3    | 4    | 4    | 4    | 4    | 4    | 4    | 4    | 4        | 4 | 5 |  |
|                             |             | 6         | 7    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6        | 7 | 9 |  |

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Harderian Gland    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenoma            |   |   |   |   |   |   | X |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   | 4  |
| Carcinoma          |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | X |   | 3  |
| Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

**URINARY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Alveolar/Bronchiolar Carcinoma, Metastatic, Lung |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Lymphoma Malignant                               |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Renal Tubule, Adenoma                            |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Urinary Bladder                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymphoma Malignant                               |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |

**SYSTEMIC LESIONS**

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymphoma Malignant |   |   |   |   |   |   | X |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   | 7  |

\* .. 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

|                         |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |                            |
|-------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------------------------|
| <b>B6C3F1 MICE MALE</b> | DAY ON TEST | 0729  | 0729  | 0674  | 0773  | 0772  | 0679  | 0770  | 0770  | 0770  | 0770  | 0770  | 0678  | 0771  | 0672  | 0770  | 0670  | 0671  | 0770  | 0573  | 0772  | 0770  | 0773  | 0773  | <b>males<br/>(cont...)</b> |
|                         | ANIMAL ID   | 00151 | 00152 | 00153 | 00154 | 00155 | 00156 | 00157 | 00158 | 00159 | 00160 | 00161 | 00162 | 00163 | 00164 | 00165 | 00166 | 00167 | 00168 | 00169 | 00170 | 00171 | 00172 | 00173 |                            |

**ALIMENTARY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M |
| Gallbladder                                    | + | + | A | + | I | + | A | + | + | + | M | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum                         | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon                         | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum<br>Adenoma           | + | + | A | + | + | + | A | + | + | + | + | + | A | + | + | A | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum<br>Carcinoma            | + | + | A | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum<br>Carcinoma          | + | + | A | + | + | + | A | + | + | + | + | + | A | + | + | A | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum<br>Lymphoma Malignant |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Liver  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Cholangioma                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hemangiosarcoma                                |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatoblastoma                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatocellular Adenoma                         |   |   |   |   | X |   |   |   |   |   |   |   | X |   |   | X |   |   |   |   | X | X | X |   |   |   |
| Hepatocellular Adenoma, Multiple               |   |   | X |   | X | X |   | X |   | X |   |   | X | X |   |   | X |   |   |   |   |   |   |   | X |   |
| Hepatocellular Carcinoma                       | X | X | X | X | X |   | X |   | X |   |   | X | X |   |   | X |   |   |   |   |   |   |   |   |   |   |
| Hepatocellular Carcinoma, Multiple             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
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 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | males<br>(cont...) |       |
|------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--------------------|-------|
|                  | 0729        | 0729  | 0764  | 0773  | 0773  | 0777  | 0767  | 0777  | 0777  | 0777  | 0777  | 0777  | 0767  | 0777  | 0767  | 0777  | 0767  | 0777  | 0767  | 0777  | 0767  | 0777  | 0757  | 0777  |                    | 0777  |
| 12 MG/KG         | 00151       | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151 | 00151              | 00151 |

Leiomyosarcoma, Metastatic, Stomach, Glandular

Mesentery + Hemangioma + Leiomyosarcoma, Metastatic, Stomach, Glandular X

Pancreas + Hepatoblastoma, Metastatic, Liver + Leiomyosarcoma, Metastatic, Stomach, Glandular +

Salivary Glands +

Stomach, Forestomach + Squamous Cell Carcinoma + Squamous Cell Papilloma X

Stomach, Glandular + Leiomyosarcoma A Mast Cell Tumor Malignant X Squamous Cell Carcinoma, Metastatic, Stomach, Forestomach +

Tongue

**CARDIOVASCULAR SYSTEM**

Heart + Hepatoblastoma, Metastatic, Liver +

\* .. 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE<br>12 MG/KG | DAY ON TEST | 0729  | 0729  | 0674  | 0771  | 0771  | 0771  | 0676  | 0777  | 0777  | 0777  | 0777  | 0676  | 0777  | 0676  | 0777  | 0676  | 0777  | 0676  | 0777  | 0579  | 0777  | 0777  | 0777  | males<br>(cont...) |       |
|------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--------------------|-------|
|                              | ANIMAL ID   | 00151 | 00152 | 00153 | 00154 | 00155 | 00156 | 00157 | 00158 | 00159 | 00160 | 00161 | 00162 | 00163 | 00164 | 00165 | 00166 | 00167 | 00168 | 00169 | 00170 | 00171 | 00172 | 00173 |                    | 00174 |
|                              |             | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0                  |       |

Schwannoma Malignant

**ENDOCRINE SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adrenal Cortex                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Leiomyosarcoma, Metastatic, Stomach, Glandular |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Subcapsular, Adenoma                           |   |   |   |   |   |   |   |   | X |   |   |   |   |   | X | X |   | X |   |   |   | X |   |   |
| Adrenal Medulla                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Islets, Pancreatic                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Parathyroid Gland                              | + | M | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pituitary Gland                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + |
| Thyroid Gland                                  | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Follicular Cell, Adenoma                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |

**GENERAL BODY SYSTEM**

|            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Tissue NOS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

**GENITAL SYSTEM**

|            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Epididymis | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Penis      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |

\* .. 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE<br><br>12 MG/KG  | DAY ON TEST | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>6<br>0<br>4      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>2<br>9      | 0<br>6<br>1<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>9      | 0<br>6<br>3<br>8      | 0<br>7<br>3<br>1      | 0<br>6<br>3<br>1      | 0<br>7<br>5<br>2      | 0<br>6<br>3<br>0      | 0<br>7<br>7<br>0      | 0<br>6<br>3<br>1      | 0<br>7<br>9<br>3      | 0<br>5<br>7<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | males<br>(cont...) |                       |                       |
|---|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--------------------|-----------------------|-----------------------|
|   | ANIMAL ID   | 0<br>0<br>1<br>5<br>1 | 0<br>0<br>1<br>5<br>2 | 0<br>0<br>1<br>5<br>3 | 0<br>0<br>1<br>5<br>4 | 0<br>0<br>1<br>5<br>5 | 0<br>0<br>1<br>5<br>6 | 0<br>0<br>1<br>5<br>7 | 0<br>0<br>1<br>5<br>8 | 0<br>0<br>1<br>5<br>9 | 0<br>0<br>1<br>6<br>0 | 0<br>0<br>1<br>6<br>1 | 0<br>0<br>1<br>6<br>2 | 0<br>0<br>1<br>6<br>3 | 0<br>0<br>1<br>6<br>4 | 0<br>0<br>1<br>6<br>5 | 0<br>0<br>1<br>6<br>6 | 0<br>0<br>1<br>6<br>7 | 0<br>0<br>1<br>6<br>8 | 0<br>0<br>1<br>6<br>9 | 0<br>0<br>1<br>7<br>0 | 0<br>0<br>1<br>7<br>1 | 0<br>0<br>1<br>7<br>2 | 0<br>0<br>1<br>7<br>3 |                    | 0<br>0<br>1<br>7<br>4 | 0<br>0<br>1<br>7<br>5 |
| Preputial Gland   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | +                     |                       |
| Prostate  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | +                     |                       |
| Seminal Vesicle<br>Leiomyosarcoma, Metastatic, Stomach,<br>Glandular                              |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | +                     |                       |
| Testes  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | +                     |                       |
| <b>HEMATOPOIETIC SYSTEM</b>   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |                       |                       |
| Bone Marrow<br>Hemangiosarcoma  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | +                     |                       |
| Lymph Node<br>Hepatoblastoma, Metastatic, Liver<br>Mediastinal, Hepatoblastoma, Metastatic, Liver |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |                       |                       |
| Lymph Node, Mandibular  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | +                     |                       |
| Lymph Node, Mesenteric<br>Leiomyosarcoma, Metastatic, Stomach,<br>Glandular                       |             | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | +                     |                       |
| Spleen<br>Squamous Cell Carcinoma, Metastatic,<br>Stomach, Forestomach                            |             | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | +                     |                       |
| Thymus  |             | +                     | +                     | +                     | M                     | +                     | +                     | I                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | M                     | I                     | +                     | +                     | +                     | +                     | M                  |                       |                       |

\* .. 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. 99037 - 06  
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 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

|                         |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |                            |
|-------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------------------------|
| <b>B6C3F1 MICE MALE</b> | DAY ON TEST | 0729  | 0729  | 0674  | 0771  | 0779  | 0679  | 0770  | 0779  | 0770  | 0779  | 0678  | 0771  | 0672  | 0770  | 0677  | 0770  | 0671  | 0770  | 0573  | 0772  | 0770  | 0773  | 0770  | <b>males<br/>(cont...)</b> |
|                         | ANIMAL ID   | 00151 | 00152 | 00153 | 00154 | 00155 | 00156 | 00157 | 00158 | 00159 | 00160 | 00161 | 00162 | 00163 | 00164 | 00165 | 00166 | 00167 | 00168 | 00169 | 00170 | 00171 | 00172 | 00173 |                            |

**INTEGUMENTARY SYSTEM**

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Skin                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Subcutaneous Tissue, Fibroma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Subcutaneous Tissue, Hemangiosarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |

**MUSCULOSKELETAL SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone                              | I | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Skeletal Muscle                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatoblastoma, Metastatic, Liver |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**NERVOUS SYSTEM**

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

**RESPIRATORY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Alveolar/Bronchiolar Adenoma                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X | X | X |   |   |   |   |
| Alveolar/Bronchiolar Carcinoma              |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Alveolar/Bronchiolar Carcinoma, Multiple    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |
| Hepatoblastoma, Metastatic, Liver           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatocellular Carcinoma, Metastatic, Liver |   |   |   | X |   |   | X |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |
| Schwannoma Malignant, Metastatic, Heart     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

|                         |                 |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------|-----------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 MICE MALE</b> | <b>12 MG/KG</b> | 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 |
|                         |                 |             | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 6 | 7 | 6 | 7 | 6 | 7 | 6 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|                         |                 |             | 2 | 2 | 0 | 3 | 3 | 2 | 1 | 3 | 2 | 3 | 2 | 3 | 0 | 3 | 3 | 5 | 3 | 7 | 3 | 9 | 3 | 7 | 9 | 3 | 7 | 2 | 3 | 3 | 3 | 3 | 3 | 3 |
|                         |                 | 9           | 9 | 4 | 0 | 1 | 9 | 0 | 0 | 0 | 0 | 0 | 8 | 1 | 1 | 2 | 0 | 7 | 0 | 1 | 0 | 0 | 1 | 0 | 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 |
|                         |                 | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                         |                 | 5           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |
|                         |                 | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 |   |

males  
 (cont...)

Trachea +

**SPECIAL SENSES SYSTEM**

Eye +

Harderian Gland +  
 Adenoma  
 Carcinoma X

**URINARY SYSTEM**

Kidney +  
 Hepatoblastoma, Metastatic, Liver

Urinary Bladder +

**SYSTEMIC LESIONS**

Multiple Organ +  
 Lymphoma Malignant 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. 99037 - 06  
 Test Type: CHRONIC  
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 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
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| B6C3F1 MICE MALE<br>12 MG/KG                              | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |
|---|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|
|   | 0730        | 0731  | 0732  | 0733  | 0734  | 0735  | 0736  | 0737  | 0738  | 0739  | 0740  | 0741  | 0742  | 0743  | 0744  | 0745  | 0746  | 0747  | 0748  | 0749  | 0750  | 0751  |          |
| ANIMAL ID   | 00176       | 00177 | 00178 | 00179 | 00180 | 00181 | 00182 | 00183 | 00184 | 00185 | 00186 | 00187 | 00188 | 00189 | 00190 | 00191 | 00192 | 00193 | 00194 | 00195 | 00196 | 00197 |          |
| Leiomyosarcoma, Metastatic, Stomach, Glandular            |             |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
| Mesentery Hemangioma                                      |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 7        |
| Leiomyosarcoma, Metastatic, Stomach, Glandular            |             |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
| Pancreas Hepatoblastoma, Metastatic, Liver                |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 50       |
| Leiomyosarcoma, Metastatic, Stomach, Glandular            |             |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
| Salivary Glands   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 50       |
| Stomach, Forestomach Squamous Cell Carcinoma              |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 50       |
| Squamous Cell Papilloma                                   |             |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
| Stomach, Glandular Leiomyosarcoma                         |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 49       |
| Mast Cell Tumor Malignant                                 |             |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
| Squamous Cell Carcinoma, Metastatic, Stomach, Forestomach |             |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
| Tongue  |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
| <b>CARDIOVASCULAR SYSTEM</b>                              |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |
| Heart Hepatoblastoma, Metastatic, Liver                   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 50       |
|   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |

\* .. 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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|                         |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |   |   |
|-------------------------|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|---|
| <b>B6C3F1 MICE MALE</b> | <b>DAY ON TEST</b> | 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 | 0 | 7 | 7 | 4 | 7 | 7 | 7 | 7 | 4 | 5 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7               | 7 |   |
|                         |                    | 3 | 3 | 3 | 0 | 0 | 3 | 5 | 2 | 2 | 3 | 3 | 7 | 4 | 3 | 3 | 3 | 1 | 3 | 3 | 2 | 3 | 2 | 3               | 3 | 3 |
| <b>12 MG/KG</b>         | <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 |   |
|                         |                    | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               | 2 |   |
|                         |                    | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0               |   |   |
|                         |                    | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8               |   |   |
|                         |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>* TOTALS</b> |   |   |

Schwannoma Malignant X 1

**ENDOCRINE SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Leiomyosarcoma, Metastatic, Stomach, Glandular |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Subcapsular, Adenoma                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 5  |
| Adrenal Medulla                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Islets, Pancreatic Adenoma                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Parathyroid Gland                              | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | 46 |
| Pituitary Gland                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Thyroid Gland                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Follicular Cell, Adenoma                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

**GENERAL BODY SYSTEM**

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

**GENITAL SYSTEM**

|            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Epididymis | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Penis      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE MALE | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |
|------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
|                  | 0730        | 0731 | 0734 | 0739 | 0770 | 0771 | 0774 | 0777 | 0779 | 0782 | 0783 | 0787 | 0788 | 0790 | 0791 | 0793 | 0795 | 0797 | 0799 | 0802 | 0803 | 0807 | 0808 | 0810 |          |
| 12 MG/KG         | 0076        | 0077 | 0078 | 0079 | 0080 | 0081 | 0082 | 0083 | 0084 | 0085 | 0086 | 0087 | 0088 | 0089 | 0090 | 0091 | 0092 | 0093 | 0094 | 0095 | 0096 | 0097 | 0098 | 0099 |          |
|                  | 0017        | 0018 | 0019 | 0020 | 0021 | 0022 | 0023 | 0024 | 0025 | 0026 | 0027 | 0028 | 0029 | 0030 | 0031 | 0032 | 0033 | 0034 | 0035 | 0036 | 0037 | 0038 | 0039 | 0040 |          |

**INTEGUMENTARY SYSTEM**

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Skin                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Subcutaneous Tissue, Fibroma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Subcutaneous Tissue, Hemangiosarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

**MUSCULOSKELETAL SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Skeletal Muscle                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Hepatoblastoma, Metastatic, Liver |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

**NERVOUS SYSTEM**

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

**RESPIRATORY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Alveolar/Bronchiolar Adenoma                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 6  |
| Alveolar/Bronchiolar Carcinoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Alveolar/Bronchiolar Carcinoma, Multiple    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Hepatoblastoma, Metastatic, Liver           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Hepatocellular Carcinoma, Metastatic, Liver |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 5  |
| Schwannoma Malignant, Metastatic, Heart     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 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  
 BLANK .. Not examined microscopically





TDMS No. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
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 Lab: SRI

|                         |                 |           |       |        |        |        |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |                            |       |
|-------------------------|-----------------|-----------|-------|--------|--------|--------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------------------------|-------|
| <b>B6C3F1 MICE MALE</b> | DAY ON TEST     | 0183      | 01335 | 022391 | 077331 | 077331 | 02268 | 02239 | 00779 | 00779 | 00779 | 00234 | 00326 | 00228 | 00228 | 00722 | 00224 | 00137 | 00372 | 00229 | 00122 | 00134 | 00234 | 00249 | <b>males<br/>(cont...)</b> |       |
|                         | <b>25 MG/KG</b> | ANIMAL ID | 00201 | 00002  | 00003  | 00004  | 00005 | 00006 | 00007 | 00008 | 00009 | 00010 | 00011 | 00012 | 00013 | 00014 | 00015 | 00016 | 00017 | 00018 | 00019 | 00020 | 00021 | 00022 |                            | 00023 |

**ALIMENTARY SYSTEM**

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

\* .. 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. 99037 - 06  
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| B6C3F1 MICE MALE             | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | males<br>(cont...) |
|------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|--------------------|
|                              | 0183        | 0135 | 0229 | 0271 | 0771 | 0722 | 0223 | 0035 | 0072 | 0077 | 0077 | 0223 | 0346 | 0022 | 0022 | 0077 | 0222 | 0224 | 0013 | 0037 | 0222 | 0230 | 0011 | 0024 | 0029 |                    |
| 25 MG/KG                     | ANIMAL ID   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                    |
|                              | 0020        | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002 | 0002               |
| Squamous Cell Papilloma      |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                    |
| Stomach, Glandular           | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                    |
| <b>CARDIOVASCULAR SYSTEM</b> |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                    |
| Heart                        | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                    |
| <b>ENDOCRINE SYSTEM</b>      |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                    |
| Adrenal Cortex               | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                    |
| Adrenal Medulla              | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                    |
| Islets, Pancreatic Adenoma   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | X    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                    |
| Parathyroid Gland            | +           | M    | +    | +    | +    | +    | +    | +    | +    | +    | M    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                    |
| Pituitary Gland              | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                    |
| Thyroid Gland                | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                    |
| <b>GENERAL BODY SYSTEM</b>   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                    |
| NONE                         |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                    |
| <b>GENITAL SYSTEM</b>        |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                    |
| Epididymis                   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                    |

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

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| B6C3F1 MICE MALE<br>25 MG/KG | DAY ON TEST | 0117               | 0227               | 0379               | 0415               | 0521               | 0672               | 0723               | 0829               | 0931               | 1033               | 1137               | 1242               | 1348               | 1454               | 1560               | 1666               | 1772               | 1878               | 1984               | 2090               | 2196               | * TOTALS |
|------------------------------|-------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|----------|
|                              | ANIMAL ID   | 001222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 | 000222233334567890 |          |

**ALIMENTARY SYSTEM**

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |    |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|----|
| Esophagus                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |    |
| Gallbladder                        | + | + | M | + | + | + | + | M | + | + | + | + | + | + | A | + | + | + | + | A | + | + | A | M  | 43 |    |
| Intestine Large, Cecum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |    |
| Intestine Large, Colon             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 49 |    |
| Intestine Large, Rectum            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |    |
| Intestine Small, Duodenum          | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | A | + | + | + | + | + | + | + | +  | 48 |    |
| Intestine Small, Ileum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | +  | 49 |    |
| Intestine Small, Jejunum           | + | + | A | + | A | + | + | + | A | + | + | + | + | + | + | A | + | + | + | A | A | + | + | A  | +  | 43 |
| Liver                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |    |
| Hepatocellular Adenoma             |   |   |   | X |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   | 6  |    |    |
| Hepatocellular Adenoma, Multiple   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | X |   |   | X |   | 7  |    |    |
| Hepatocellular Carcinoma           |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | 2  |    |    |
| Hepatocellular Carcinoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   | X | 3  |    |    |
| Mesentery                          |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |    |    |
| Pancreas                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |    |
| Salivary Glands                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |    |
| Stomach, Forestomach               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

|                         |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |                 |
|-------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|-----------------|
| <b>B6C3F1 MICE MALE</b> | 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               | <b>* TOTALS</b> |
|                         |             | 1 | 2 | 2 | 7 | 1 | 2 | 7 | 2 | 2 | 2 | 7 | 7 | 2 | 2 | 6 | 6 | 2 | 3 | 7 | 2 | 6 | 3 | 7 | 1 | 7 | 1 | 7 | 1 | 7 |                 |                 |
|                         |             | 1 | 0 | 7 | 2 | 7 | 9 | 3 | 3 | 2 | 5 | 2 | 2 | 3 | 3 | 8 | 8 | 2 | 3 | 3 | 5 | 0 | 7 | 3 | 9 | 2 | 2 | 9 | 2 | 9 |                 |                 |
|                         |             | 7 | 6 | 6 | 9 | 1 | 5 | 1 | 9 | 1 | 3 | 9 | 9 | 2 | 3 | 3 | 7 | 5 | 1 | 1 | 3 | 4 | 4 | 1 | 1 | 9 | 1 | 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               |                 |
| <b>25 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 | <b>* TOTALS</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 |                 |                 |
|                         | 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 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 |                 |                 |
|                         | 6           | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 0 | 0 | 0 |   |                 |                 |

**NERVOUS SYSTEM**

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

**RESPIRATORY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Alveolar/Bronchiolar Adenoma                |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | <b>6</b>  |
| Alveolar/Bronchiolar Carcinoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Alveolar/Bronchiolar Carcinoma, Multiple    |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>2</b>  |
| Hepatocellular Carcinoma, Metastatic, Liver |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Nose  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Trachea                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |

**SPECIAL SENSES SYSTEM**

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |           |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|-----------|
| Eye                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | <b>50</b> |
| Harderian Gland Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>49</b> |           |
|                         |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>2</b>  |

**URINARY SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |

**SYSTEMIC LESIONS**

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

TDMS No. 99037 - 06  
Test Type: CHRONIC  
Route: GAVAGE  
Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
alpha/beta Thujone mixture  
CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
Time Report Requested: 13:12:57  
First Dose M/F: 06/30/03 / 06/30/03  
Lab: SRI

|                         |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                 |  |
|-------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|-----------------|--|
| <b>B6C3F1 MICE MALE</b> | 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         |                 |  |
|                         |             | 1 | 2 | 2 | 7 | 1 | 2 | 7 | 2 | 2 | 2 | 7 | 7 | 2 | 2 | 6 | 6 | 2 | 3 | 7 | 2 | 6 | 3 | 7 | 1 | 7         |                 |  |
|                         |             | 1 | 0 | 7 | 2 | 7 | 9 | 3 | 3 | 2 | 5 | 2 | 2 | 3 | 3 | 8 | 8 | 2 | 3 | 3 | 5 | 0 | 7 | 3 | 9 | 2         |                 |  |
| <b>25 MG/KG</b>         | 7           | 6 | 6 | 9 | 1 | 5 | 1 | 9 | 1 | 3 | 9 | 9 | 2 | 3 | 3 | 7 | 5 | 1 | 1 | 3 | 4 | 4 | 1 | 1 | 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 |           | <b>* TOTALS</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 |           |                 |  |
|                         | 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 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |           |                 |  |
|                         | 6           | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |           |                 |  |
| Multiple Organ          |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |                 |  |

\*\*\* 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE<br>0 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID        | females<br>(cont...) |                  |                  |
|-------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------------------|------------------|------------------|
|                               | 0<br>7<br>3<br>3 | 0<br>7<br>1<br>5 | 0<br>7<br>3<br>3 | 0<br>7<br>9<br>5 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>2<br>9<br>6 | 0<br>5<br>6<br>4 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>6<br>9<br>1 | 0<br>6<br>6<br>9 | 0<br>7<br>3<br>2 | 0<br>3<br>7<br>3 | 0<br>7<br>3<br>2 | 0<br>6<br>2<br>8 |                  |                      | 0<br>7<br>3<br>2 | 0<br>1<br>4<br>2 |
|                               | 0<br>0<br>5<br>1 | 0<br>0<br>5<br>2 | 0<br>0<br>5<br>3 | 0<br>0<br>5<br>4 | 0<br>0<br>5<br>5 | 0<br>0<br>5<br>6 | 0<br>0<br>5<br>7 | 0<br>0<br>5<br>8 | 0<br>0<br>5<br>9 | 0<br>0<br>6<br>0 | 0<br>0<br>6<br>1 | 0<br>0<br>6<br>2 | 0<br>0<br>6<br>3 | 0<br>0<br>6<br>4 | 0<br>0<br>6<br>5 | 0<br>0<br>6<br>6 | 0<br>0<br>6<br>7 | 0<br>0<br>6<br>8 | 0<br>0<br>6<br>9 | 0<br>0<br>7<br>0 | 0<br>0<br>7<br>1 | 0<br>0<br>7<br>2 | 0<br>0<br>7<br>3     | 0<br>0<br>7<br>4 | 0<br>0<br>7<br>5 |

**ALIMENTARY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Gallbladder                            | + | A | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum                 | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon                 | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum              | + | A | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + |
| Intestine Small, Ileum                 | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum               | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hemangiosarcoma                        |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatocellular Adenoma                 |   |   |   |   | X | X |   |   |   |   |   |   | X |   |   |   | X |   |   |   |   | X |   |   |   |   |
| Hepatocellular Adenoma, Multiple       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatocellular Carcinoma               |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatocellular Carcinoma, Multiple     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Histiocytic Sarcoma                    |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymphoma Malignant                     | X |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Plasma Cell Tumor Malignant            |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mesentery                              | + |   |   |   |   |   |   |   |   |   |   | + | + |   |   |   |   |   |   |   |   |   |   |   | + |   |
| Schwannoma Malignant, Metastatic, 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. 99037 - 06

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

alpha/beta Thujone mixture

CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010

Time Report Requested: 13:12:57

First Dose M/F: 06/30/03 / 06/30/03

Lab: SRI

|                    |           | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |   |
|--------------------|-----------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|---|
| B6C3F1 MICE FEMALE | ANIMAL ID | 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...) |   |   |
|                    |           | 7           | 7 | 7 | 0 | 7 | 7 | 7 | 7 | 2 | 5 | 7 | 7 | 7 | 7 | 7 | 6 | 6 | 7 | 3 | 7 | 7 | 6 |                      | 7 | 1 |
| 0 MG/KG            |           | 3           | 1 | 3 | 9 | 3 | 3 | 3 | 9 | 6 | 3 | 3 | 3 | 3 | 3 | 9 | 6 | 3 | 2 | 3 | 3 | 2 | 3 | 4                    | 3 |   |
|                    |           | 3           | 5 | 3 | 5 | 3 | 2 | 2 | 2 | 6 | 4 | 3 | 3 | 3 | 3 | 1 | 9 | 3 | 0 | 3 | 2 | 3 | 2 | 2                    | 2 |   |
|                    | 0         | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    | 0 |   |
|                    | 0         | 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 |   |
|                    | 5         | 5           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7                    | 7 |   |
|                    | 1         | 2           | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4                    | 5 |   |

Pancreas  
Histiocytic Sarcoma + A +

Salivary Glands  
Lymphoma Malignant + M +

Stomach, Forestomach +

Stomach, Glandular + A +

CARDIOVASCULAR SYSTEM

Heart +

ENDOCRINE SYSTEM

Adrenal Cortex  
Adenoma +  
Lymphoma Malignant  
Plasma Cell Tumor Malignant X

Adrenal Medulla +

Islets, Pancreatic  
Adenoma + A +  
X

Parathyroid Gland + + + + + + M + + M + + + + + + + + + + + + + +

Pituitary Gland  
Pars Distalis, Adenoma + + + + + + + + + + + + + + + + + X + + + + + M +

\* .. 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

| B6C3F1 MICE FEMALE | DAY ON TEST | ANIMAL ID |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |  | females<br>(cont...) |
|--------------------|-------------|-----------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--|----------------------|
|                    |             | 00733     | 00735 | 00737 | 00739 | 00741 | 00743 | 00745 | 00747 | 00749 | 00751 | 00753 | 00755 | 00757 | 00759 | 00761 | 00763 | 00765 | 00767 | 00769 | 00771 | 00773 | 00775 | 00777 |  |                      |
| 0 MG/KG            |             | 0         | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     |  |                      |
|                    |             | 0         | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     |  |                      |
|                    |             | 2         | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     |  |                      |
|                    |             | 5         | 5     | 5     | 5     | 5     | 5     | 5     | 5     | 5     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 7     | 7     | 7     | 7     |  |                      |
|                    |             | 1         | 2     | 3     | 4     | 5     | 6     | 7     | 8     | 9     | 0     | 1     | 2     | 3     | 4     | 5     | 6     | 7     | 8     | 9     | 0     | 1     | 2     | 3     |  |                      |

Thyroid Gland +

**GENERAL BODY SYSTEM**

Tissue NOS +  
 Plasma Cell Tumor Malignant X

**GENITAL SYSTEM**

Clitoral Gland + M + + + + + + + + + + + + + + + M + + + + + + +  
 Ovary + A +  
 Choriocarcinoma  
 Cystadenoma X X  
 Plasma Cell Tumor Malignant X  
 Uterus +  
 Histiocytic Sarcoma X  
 Polyp Stromal

**HEMATOPOIETIC SYSTEM**

Bone Marrow +  
 Hemangiosarcoma X  
 Plasma Cell Tumor Malignant X  
 Lymph Node + + + + +  
 Histiocytic Sarcoma X  
 Plasma Cell Tumor Malignant X  
 Iliac, Histiocytic Sarcoma X  
 Iliac, Lymphoma Malignant 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

| B6C3F1 MICE FEMALE<br>0 MG/KG | 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 | ANIMAL ID | females<br>(cont...) |
|-------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|----------------------|
|                               |             | 7 | 7 | 7 | 0 | 7 | 7 | 7 | 7 | 2 | 5 | 7 | 7 | 7 | 7 | 6 | 6 | 7 | 3 | 7 | 7 | 6 | 7 | 1 | 7 |   |           |                      |
|                               |             | 3 | 1 | 3 | 9 | 3 | 3 | 3 | 3 | 9 | 6 | 3 | 3 | 3 | 3 | 9 | 6 | 3 | 3 | 3 | 2 | 3 | 3 | 2 | 3 |   |           |                      |
|                               |             | 3 | 5 | 3 | 5 | 3 | 2 | 2 | 2 | 6 | 4 | 3 | 3 | 3 | 3 | 1 | 9 | 3 | 0 | 3 | 2 | 8 | 2 | 2 | 2 |   |           |                      |
|                               |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |           |                      |
|                               |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |           |                      |
|                               |             | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |   |           |                      |
|                               |             | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |   |           |                      |
|                               |             | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 |           |                      |

Inguinal, Histiocytic Sarcoma  
 Mediastinal, Lymphoma Malignant  
 Mediastinal, Plasma Cell Tumor Malignant  
 Pancreatic, Histiocytic Sarcoma  
 Renal, Histiocytic Sarcoma  
 Renal, Lymphoma Malignant

X  
  
  
  
  
X  
  
  
X

Lymph Node, Mandibular  
 Lymphoma Malignant  
 Plasma Cell Tumor Malignant

+ M + + + + + + + + + + + + + + + M + + + + +  
 X

Lymph Node, Mesenteric  
 Histiocytic Sarcoma  
 Lymphoma Malignant  
 Plasma Cell Tumor Malignant

+ A + + + + + + + + + + + + + I + + + + + + + + +  
 X

Spleen  
 Hemangiosarcoma  
 Histiocytic Sarcoma  
 Lymphoma Malignant  
 Plasma Cell Tumor Malignant

+  
 X  
  
  
X X  
 X

Thymus  
 Histiocytic Sarcoma  
 Lymphoma Malignant

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

**INTEGUMENTARY SYSTEM**

Mammary Gland  
 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE<br>0 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | females<br>(cont...) |                       |                  |
|-------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------------------|-----------------------|------------------|
|                               | 0<br>7<br>3<br>3 | 0<br>7<br>1<br>5 | 0<br>7<br>3<br>3 | 0<br>0<br>9<br>5 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>2<br>9<br>6 | 0<br>5<br>6<br>4 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>6<br>9<br>1 | 0<br>6<br>6<br>9 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>2 | 0<br>6<br>2<br>8 | 0<br>7<br>3<br>2 |           |                      | 0<br>1<br>4<br>2      | 0<br>7<br>3<br>2 |
|                               | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0         | 0                    | 0<br>0<br>2<br>5<br>1 |                  |

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Skin                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Subcutaneous Tissue, Fibrosarcoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   | X |   |  |
| Subcutaneous Tissue, Hemangiosarcoma      |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Subcutaneous Tissue, Sarcoma              |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Subcutaneous Tissue, Schwannoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

**MUSCULOSKELETAL SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bone                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Skeletal Muscle                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Rhabdomyosarcoma                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |  |
| Schwannoma Malignant, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

**NERVOUS SYSTEM**

|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Brain                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Cranial Nerve, Schwannoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

**RESPIRATORY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Lung                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Alveolar/Bronchiolar Adenoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Alveolar/Bronchiolar Adenoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Alveolar/Bronchiolar Carcinoma         |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |  |
| Fibrosarcoma, Metastatic, Skin         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |  |
| Histiocytic Sarcoma                    |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymphoma Malignant                     |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |  |
| Plasma Cell Tumor Malignant            |   |   |   |   |   |   |   | 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



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 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
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 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE<br>0 MG/KG                               | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | females<br>(cont...) |                  |
|---|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------------------|------------------|
|   | 0<br>7<br>3<br>3 | 0<br>7<br>1<br>5 | 0<br>7<br>3<br>3 | 0<br>0<br>9<br>5 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>2<br>9<br>6 | 0<br>5<br>6<br>4 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>6<br>9<br>1 | 0<br>6<br>6<br>9 | 0<br>7<br>3<br>3 | 0<br>3<br>2<br>0 | 0<br>7<br>3<br>2 | 0<br>6<br>2<br>8 |           |                      | 0<br>7<br>3<br>2 |
| Nose  | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    | +                |
| Trachea   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    | +                |
| <b>SPECIAL SENSES SYSTEM</b>                                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |                  |
| Eye   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    | +                |
| Harderian Gland<br>Adenoma<br>Carcinoma                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | X                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    | +                |
| <b>URINARY SYSTEM</b>                                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |                  |
| Kidney<br>Lymphoma Malignant<br>Plasma Cell Tumor Malignant | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    | +                |
| Urinary Bladder<br>Plasma Cell Tumor Malignant              | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | X                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    | +                |
| <b>SYSTEMIC LESIONS</b>                                     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |                  |
| Multiple Organ<br>Histiocytic Sarcoma<br>Lymphoma Malignant | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    | +                |
|   |                  | 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  
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 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE<br>0 MG/KG |  | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |      |
|-------------------------------|--|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|
|                               |  | 0733        | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 |          |      |
| ANIMAL ID                     |  | 0076        | 0077 | 0078 | 0079 | 0080 | 0081 | 0082 | 0083 | 0084 | 0085 | 0086 | 0087 | 0088 | 0089 | 0090 | 0091 | 0092 | 0093 | 0094 | 0095 | 0096 | 0097 | 0098 | 0099     | 50   |
|                               |  | 0002        | 0007 | 0008 | 0009 | 0010 | 0011 | 0012 | 0013 | 0014 | 0015 | 0016 | 0017 | 0018 | 0019 | 0020 | 0021 | 0022 | 0023 | 0024 | 0025 | 0026 | 0027 | 0028 | 0029     | 0030 |

**ALIMENTARY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Esophagus                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Gallbladder                            | + | + | + | + | + | + | + | + | + | + | I | + | + | A | + | + | + | + | + | + | A | A | A | + | 43 |    |
| Intestine Large, Cecum                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | +  | 48 |
| Intestine Large, Colon                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 49 |
| Intestine Large, Rectum                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | I | + | + | + | + | + | + | + | + | + | +  | 49 |
| Intestine Small, Duodenum              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | +  | 46 |
| Intestine Small, Ileum                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | +  | 48 |
| Intestine Small, Jejunum               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | A | +  | 47 |
| Liver                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Hemangiosarcoma                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |    |
| Hepatocellular Adenoma                 |   |   |   |   |   |   |   |   |   |   | X |   | X |   | X | X |   |   |   |   | X |   |   |   | 10 |    |
| Hepatocellular Adenoma, Multiple       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | X |   |   | 3  |    |
| Hepatocellular Carcinoma               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   | 2  |    |
| Hepatocellular Carcinoma, Multiple     |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   | 1  |    |
| Histiocytic Sarcoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |    |
| Lymphoma Malignant                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |    |
| Plasma Cell Tumor Malignant            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |    |
| Mesentery                              |   |   |   |   |   |   |   |   |   | + |   |   | + |   |   |   |   |   |   | + |   |   |   |   | 10 |    |
| Schwannoma Malignant, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | 1  |    |

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

| B6C3F1 MICE FEMALE<br>0 MG/KG | DAY ON TEST | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>6<br>8<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>5<br>8<br>0      | 0<br>2<br>4<br>6      | 0<br>7<br>3<br>3      | * TOTALS |
|-------------------------------|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|
|                               | ANIMAL ID   | 0<br>0<br>2<br>7<br>6 | 0<br>0<br>2<br>7<br>7 | 0<br>0<br>2<br>7<br>8 | 0<br>0<br>2<br>7<br>8 | 0<br>0<br>2<br>7<br>8 | 0<br>0<br>2<br>8<br>8 | 0<br>0<br>2<br>8<br>8 | 0<br>0<br>2<br>8<br>8 | 0<br>0<br>2<br>8<br>8 | 0<br>0<br>2<br>8<br>8 | 0<br>0<br>2<br>8<br>8 | 0<br>0<br>2<br>8<br>8 | 0<br>0<br>2<br>8<br>8 | 0<br>0<br>2<br>9<br>9 | 0<br>0<br>2<br>9<br>9 | 0<br>0<br>2<br>9<br>9 | 0<br>0<br>2<br>9<br>9 | 0<br>0<br>2<br>9<br>9 | 0<br>0<br>2<br>9<br>9 | 0<br>0<br>2<br>9<br>9 | 0<br>0<br>2<br>9<br>9 | 0<br>0<br>2<br>9<br>9 |          |
| Pancreas                      |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 48       |
| Histiocytic Sarcoma           |             | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |
| Salivary Glands               |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49       |
| Lymphoma Malignant            |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       | 1        |
| Stomach, Forestomach          |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |
| Stomach, Glandular            |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | 48       |
| <b>CARDIOVASCULAR SYSTEM</b>  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |
| Heart                         |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |
| <b>ENDOCRINE SYSTEM</b>       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |
| Adrenal Cortex                |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |
| Adenoma                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       | 1        |
| Lymphoma Malignant            |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |
| Plasma Cell Tumor Malignant   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |
| Adrenal Medulla               |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |
| Islets, Pancreatic            |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | 48       |
| Adenoma                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |
| Parathyroid Gland             |             | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | M                     | +                     | 45       |
| Pituitary Gland               |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49       |
| Pars Distalis, Adenoma        |             |                       |                       |                       |                       |                       |                       |                       | 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE<br>0 MG/KG | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |  |
|-------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|--|
|                               | 0733        | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 |          |  |
| ANIMAL ID                     | 0076        | 0077 | 0078 | 0079 | 0080 | 0081 | 0082 | 0083 | 0084 | 0085 | 0086 | 0087 | 0088 | 0089 | 0090 | 0091 | 0092 | 0093 | 0094 | 0095 | 0096 | 0097 | 0098 | 0099 |          |  |
| Thyroid Gland                 | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50   |          |  |
| <b>GENERAL BODY SYSTEM</b>    |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |
| Tissue NOS                    |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |
| Plasma Cell Tumor Malignant   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |
| <b>GENITAL SYSTEM</b>         |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |
| Clitoral Gland                | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 48   |          |  |
| Ovary                         | +           | M    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 48   |          |  |
| Choriocarcinoma               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      | 1    |          |  |
| Cystadenoma                   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 2    |          |  |
| Plasma Cell Tumor Malignant   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1    |          |  |
| Uterus                        | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50   |          |  |
| Histiocytic Sarcoma           |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1    |          |  |
| Polyp Stromal                 |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      | 1    |          |  |
| <b>HEMATOPOIETIC SYSTEM</b>   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |
| Bone Marrow                   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50   |          |  |
| Hemangiosarcoma               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1    |          |  |
| Plasma Cell Tumor Malignant   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1    |          |  |
| Lymph Node                    | +           |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | +    | 6    |          |  |
| Histiocytic Sarcoma           |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1    |          |  |
| Plasma Cell Tumor Malignant   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1    |          |  |
| Iliac, Histiocytic Sarcoma    |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1    |          |  |
| Iliac, Lymphoma Malignant     |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      | 2    |          |  |

\* .. 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. 99037 - 06  
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P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
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 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE<br>0 MG/KG             | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |
|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
|   | 0733        | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 | 0733 |          |
| ANIMAL ID                                 | 0076        | 0077 | 0078 | 0079 | 0080 | 0081 | 0082 | 0083 | 0084 | 0085 | 0086 | 0087 | 0088 | 0089 | 0090 | 0091 | 0092 | 0093 | 0094 | 0095 | 0096 | 0097 |          |
| Skin                                      | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |
| Subcutaneous Tissue, Fibrosarcoma         |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 2        |
| Subcutaneous Tissue, Hemangiosarcoma      |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |
| Subcutaneous Tissue, Sarcoma              |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |
| Subcutaneous Tissue, Schwannoma Malignant |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      | 1        |
| <b>MUSCULOSKELETAL SYSTEM</b>             |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |
| Bone                                      | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |
| Skeletal Muscle                           |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 3        |
| Rhabdomyosarcoma                          |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      | 1        |
| Schwannoma Malignant, Metastatic, Skin    |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      | 1        |
| <b>NERVOUS SYSTEM</b>                     |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |
| Brain                                     | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |
| Cranial Nerve, Schwannoma Malignant       |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      | 1        |
| <b>RESPIRATORY SYSTEM</b>                 |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |
| Lung                                      | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |
| Alveolar/Bronchiolar Adenoma              |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      | 2        |
| Alveolar/Bronchiolar Adenoma, Multiple    |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    | 1        |
| Alveolar/Bronchiolar Carcinoma            |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |
| Fibrosarcoma, Metastatic, Skin            |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |
| Histiocytic Sarcoma                       |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |
| Lymphoma Malignant                        |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |
| Plasma Cell Tumor Malignant               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
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 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE           | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |                       |                       |  |  |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|--|
|                              | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>6<br>8<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>5<br>8<br>0      |                       | 0<br>2<br>4<br>6      | 0<br>7<br>3<br>3      |  |  |
| 0 MG/KG                      | ANIMAL ID             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
|                              | 0<br>0<br>2<br>7<br>6 | 0<br>0<br>2<br>7<br>7 | 0<br>0<br>2<br>7<br>8 | 0<br>0<br>2<br>7<br>9 | 0<br>0<br>2<br>8<br>0 | 0<br>0<br>2<br>8<br>1 | 0<br>0<br>2<br>8<br>2 | 0<br>0<br>2<br>8<br>3 | 0<br>0<br>2<br>8<br>4 | 0<br>0<br>2<br>8<br>5 | 0<br>0<br>2<br>8<br>6 | 0<br>0<br>2<br>8<br>7 | 0<br>0<br>2<br>8<br>8 | 0<br>0<br>2<br>8<br>9 | 0<br>0<br>2<br>9<br>0 | 0<br>0<br>2<br>9<br>1 | 0<br>0<br>2<br>9<br>2 | 0<br>0<br>2<br>9<br>3 | 0<br>0<br>2<br>9<br>4 | 0<br>0<br>2<br>9<br>5 | 0<br>0<br>2<br>9<br>6 | 0<br>0<br>2<br>9<br>7 | 0<br>0<br>2<br>9<br>8 | 0<br>0<br>2<br>9<br>9 | 0<br>0<br>2<br>9<br>0 |  |  |
| Nose                         | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |  |  |
| Trachea                      | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |  |  |
| <b>SPECIAL SENSES SYSTEM</b> |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
| Eye                          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |  |  |
| Harderian Gland              | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |  |  |
| Adenoma                      |                       |                       | X                     |                       |                       |                       |                       | X                     |                       |                       |                       | X                     |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       | 5                     |                       |  |  |
| Carcinoma                    |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |  |  |
| <b>URINARY SYSTEM</b>        |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
| Kidney                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |  |  |
| Lymphoma Malignant           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |  |  |
| Plasma Cell Tumor Malignant  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |  |  |
| Urinary Bladder              | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |  |  |
| Plasma Cell Tumor Malignant  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |                       |  |  |
| <b>SYSTEMIC LESIONS</b>      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
| Multiple Organ               | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |  |  |
| Histiocytic Sarcoma          | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |                       |  |  |
| Lymphoma Malignant           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       | X                     | 6                     |                       |  |  |

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 + .. Tissue examined microscopically  
 X .. Lesion present  
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Date Report Requested: 08/11/2010  
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|   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                                    |                       |
|---|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------------------------|-----------------------|
| <b>B6C3F1 MICE FEMALE</b><br><b>3 MG/KG</b> | DAY ON TEST | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>6<br>7<br>2      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>5<br>3<br>4      | 0<br>0<br>5<br>4      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>6<br>9<br>4      | 0<br>7<br>3<br>3      | 0<br>0<br>0<br>3      | 0<br>0<br>0<br>5      | 0<br>7<br>3<br>3      | 0<br>7<br>1<br>9      | <b>females</b><br><b>(cont...)</b> |                       |
|   | ANIMAL ID   | 0<br>0<br>3<br>0<br>1 | 0<br>0<br>3<br>0<br>2 | 0<br>0<br>3<br>0<br>3 | 0<br>0<br>3<br>0<br>4 | 0<br>0<br>3<br>0<br>6 | 0<br>0<br>3<br>0<br>7 | 0<br>0<br>3<br>0<br>8 | 0<br>0<br>3<br>0<br>9 | 0<br>0<br>3<br>1<br>0 | 0<br>0<br>3<br>1<br>1 | 0<br>0<br>3<br>1<br>2 | 0<br>0<br>3<br>1<br>3 | 0<br>0<br>3<br>1<br>4 | 0<br>0<br>3<br>1<br>5 | 0<br>0<br>3<br>1<br>6 | 0<br>0<br>3<br>1<br>7 | 0<br>0<br>3<br>1<br>8 | 0<br>0<br>3<br>2<br>9 | 0<br>0<br>3<br>2<br>0 | 0<br>0<br>3<br>2<br>1 | 0<br>0<br>3<br>2<br>2 | 0<br>0<br>3<br>2<br>3 |                                    | 0<br>0<br>3<br>2<br>4 |

**ALIMENTARY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus  | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Gallbladder  | + | + | + | + | + | + | + | A | + | + | + | + | + | + | A | + | + | + | A | + | I | + | + | + |
| Intestine Large, Cecum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | I | + | + | + |
| Intestine Large, Colon   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum<br>Leiomyosarcoma  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + |
| Intestine Small, Ileum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + |
| Intestine Small, Jejunum<br>Leiomyosarcoma<br>Lymphoma Malignant   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | X |
| Liver<br>Hepatocellular Adenoma<br>Hepatocellular Adenoma, Multiple<br>Hepatocellular Carcinoma<br>Histiocytic Sarcoma<br>Lymphoma Malignant | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Mesentery  |   |   |   |   |   |   |   |   | + |   |   |   |   |   | + |   |   |   |   |   | + |   |   |   |
| Pancreas   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

\* .. 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE<br>3 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | females<br>(cont...) |  |
|-------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------------------|--|
|                               | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>6<br>7<br>2 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>5<br>5<br>4 | 0<br>0<br>0<br>4 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>0<br>0<br>2 | 0<br>7<br>3<br>4 | 0<br>7<br>3<br>2 | 0<br>6<br>9<br>4 | 0<br>7<br>3<br>3 | 0<br>0<br>0<br>5 | 0<br>7<br>3<br>3 | 0<br>0<br>0<br>3 | 0<br>7<br>3<br>6 |           |                      |  |
| Lymphoma Malignant            |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |  |
| Sarcoma, Metastatic, Skin     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           | X                    |  |
| Salivary Glands               | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                      |  |
| Lymphoma Malignant            |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |  |
| Stomach, Forestomach          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                      |  |
| Lymphoma Malignant            |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |  |
| Stomach, Glandular            | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                      |  |
| Lymphoma Malignant            |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |  |
| <b>CARDIOVASCULAR SYSTEM</b>  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |  |
| Heart                         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                      |  |
| Lymphoma Malignant            |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |  |
| <b>ENDOCRINE SYSTEM</b>       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |  |
| Adrenal Cortex                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                      |  |
| Histiocytic Sarcoma           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X         |                      |  |
| Lymphoma Malignant            |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |  |
| Adrenal Medulla               | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                      |  |
| Pheochromocytoma Benign       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X         |                      |  |
| Islets, Pancreatic            | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                      |  |
| Adenoma                       |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |  |
| Parathyroid Gland             | +                | +                | +                | +                | M                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         |                      |  |

\* .. 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







|                           |                |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                          |
|---------------------------|----------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|--------------------------|
| <b>B6C3F1 MICE FEMALE</b> | DAY ON TEST    | 0732 | 0732 | 0672 | 0773 | 0773 | 0773 | 0503 | 0073 | 0773 | 0773 | 0773 | 0773 | 0773 | 0073 | 0773 | 0773 | 0673 | 0773 | 0003 | 0003 | 0773 | 0773 | ANIMAL ID | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | 0030 | <b>females (cont...)</b> |
|                           | <b>3 MG/KG</b> | 0113 | 0022 | 0003 | 0004 | 0006 | 0007 | 0008 | 0009 | 0010 | 0011 | 0012 | 0013 | 0014 | 0015 | 0016 | 0017 | 0018 | 0019 | 0020 | 0021 | 0022 | 0023 |           | 0024 | 0025 | 0026 |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                          |

Adenoma  
Carcinoma  
Lymphoma Malignant

X  
  
X

**URINARY SYSTEM**

Kidney  
Histiocytic Sarcoma  
Lymphoma Malignant

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

X

Urinary Bladder  
Histiocytic Sarcoma  
Lymphoma Malignant

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

X

**SYSTEMIC LESIONS**

Multiple Organ  
Histiocytic Sarcoma  
Lymphoma Malignant

+ + + + + + + + + + + + + + + + + + + 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

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TDMS No. 99037 - 06

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

alpha/beta Thujone mixture

CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010

Time Report Requested: 13:12:57

First Dose M/F: 06/30/03 / 06/30/03

Lab: SRI

|                           |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 | 0 |
|---------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|---|
| <b>B6C3F1 MICE FEMALE</b> | DAY ON TEST | 7 | 7 | 7 | 7 | 0 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 5 | 6 | 5 | 7 | 0 | 7 | 7               | 7 |   |
|                           |             | 3 | 3 | 3 | 3 | 0 | 3 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 7 | 3 | 6 | 6 | 8 | 3 | 0 | 3 | 3               | 3 |   |
|                           |             | 3 | 3 | 3 | 3 | 6 | 3 | 4 | 3 | 3 | 2 | 2 | 2 | 2 | 7 | 2 | 6 | 9 | 5 | 2 | 5 | 2 | 2               | 2 |   |
| <b>3 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 | 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 |   |
|                           |             | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4               | 5 |   |
|                           | 7           | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9               |   |   |
|                           |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>* TOTALS</b> |   |   |

**ALIMENTARY SYSTEM**

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |           |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|-----------|
| Esophagus                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>48</b> |           |
| Gallbladder                      | + | + | + | + | A | + | I | + | + | + | + | + | + | + | A | + | A | + | + | + | A | + | + | M         | <b>39</b> |
| Intestine Large, Cecum           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | <b>46</b> |           |
| Intestine Large, Colon           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | <b>48</b> |           |
| Intestine Large, Rectum          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>49</b> |           |
| Intestine Small, Duodenum        | M | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | <b>44</b> |           |
| Leiomyosarcoma                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   | <b>1</b>  |           |
| Intestine Small, Ileum           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | <b>47</b> |           |
| Intestine Small, Jejunum         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | <b>47</b> |           |
| Leiomyosarcoma                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   | <b>1</b>  |           |
| Lymphoma Malignant               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |           |
| Liver                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>49</b> |           |
| Hepatocellular Adenoma           | X |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   | X |   |   | <b>3</b>  |           |
| Hepatocellular Adenoma, Multiple |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |           |
| Hepatocellular Carcinoma         |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>7</b>  |           |
| Histiocytic Sarcoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |           |
| Lymphoma Malignant               |   |   |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>3</b>  |           |
| Mesentery                        |   |   |   | + |   |   |   |   |   |   |   | + |   |   |   |   | + |   |   |   |   |   |   | <b>6</b>  |           |
| Pancreas                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>49</b> |           |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
 + .. Tissue examined microscopically  
 X .. Lesion present  
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TDMS No. 99037 - 06  
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P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

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 Lab: SRI

| B6C3F1 MICE FEMALE<br>3 MG/KG                               | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |              |
|---|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|--------------|
|   | 0733        | 0733  | 0733  | 0733  | 0736  | 0734  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  | 0733  |          | 0733         |
| ANIMAL ID   | 00327       | 00338 | 00339 | 00330 | 00331 | 00332 | 00333 | 00334 | 00335 | 00336 | 00337 | 00338 | 00339 | 00340 | 00341 | 00342 | 00343 | 00344 | 00345 | 00346 | 00347 | 00348 | 00349    | 00350        |
| Lymphoma Malignant  |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1            |
| Sarcoma, Metastatic, Skin                                   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1            |
| Salivary Glands<br>Lymphoma Malignant                       | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | M     | +     | +     | +     | +     | +        | 48<br>1      |
| Stomach, Forestomach<br>Lymphoma Malignant                  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 49<br>1      |
| Stomach, Glandular<br>Lymphoma Malignant                    | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 49<br>1      |
| <b>CARDIOVASCULAR SYSTEM</b>                                |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |              |
| Heart<br>Lymphoma Malignant                                 | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 49<br>1      |
| <b>ENDOCRINE SYSTEM</b>                                     |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |              |
| Adrenal Cortex<br>Histiocytic Sarcoma<br>Lymphoma Malignant | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 49<br>1<br>1 |
| Adrenal Medulla<br>Pheochromocytoma Benign                  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | M     | +     | +        | 47<br>1      |
| Islets, Pancreatic<br>Adenoma                               | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 49<br>1      |
| Parathyroid Gland   | +           | +     | M     | M     | M     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | M     | +     | +     | +     | +     | +        | 42           |

\* .. 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE<br>3 MG/KG             | 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       | * TOTALS |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|----------|
|   | ANIMAL ID   | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0       |          |
| Pituitary Gland<br>Pars Distalis, Adenoma |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48<br>3 |          |
| Thyroid Gland                             |             | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48      |          |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

|   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                             |
|---|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------------------|
| Clitoral Gland<br>Lymphoma Malignant  |  | + | + | + | + | + | + | + | I | + | + | + | M | + | + | + | + | + | + | + | + | + | + | 46<br>1                     |
| Ovary<br>Granulosa Cell Tumor Benign<br>Histiocytic Sarcoma<br>Lymphoma Malignant                         |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X | + | 47<br>1<br>1<br>1           |
| Uterus<br>Histiocytic Sarcoma<br>Leiomyosarcoma<br>Lymphoma Malignant<br>Polyp Stromal<br>Sarcoma Stromal |  | + | + | + | + | + | + | + | + | + | + | X | + | + | + | + | + | + | + | + | + | + | + | 49<br>2<br>1<br>1<br>1<br>1 |

**HEMATOPOIETIC SYSTEM**

|                                   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |
|-----------------------------------|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|
| Bone Marrow<br>Lymphoma Malignant |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49<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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE<br>3 MG/KG | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |    |  |  |
|-------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|----|--|--|
|                               | 0733        | 0733  | 0733  | 0733  | 0706  | 0703  | 0704  | 0703  | 0703  | 0702  | 0702  | 0702  | 0702  | 0702  | 0702  | 0702  | 0702  | 0702  | 0702  | 0702  | 0702  | 0702  |          |    |  |  |
| ANIMAL ID                     | 00327       | 00328 | 00329 | 00330 | 00331 | 00332 | 00333 | 00334 | 00335 | 00336 | 00337 | 00338 | 00339 | 00340 | 00341 | 00342 | 00343 | 00344 | 00345 | 00346 | 00347 | 00348 | 00349    |    |  |  |
| Adenoma                       |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1  |  |  |
| Carcinoma                     |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 2  |  |  |
| Lymphoma Malignant            |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1  |  |  |
| <b>URINARY SYSTEM</b>         |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |    |  |  |
| Kidney                        | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 49 |  |  |
| Histiocytic Sarcoma           |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1  |  |  |
| Lymphoma Malignant            |             |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 2  |  |  |
| Urinary Bladder               | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 49 |  |  |
| Histiocytic Sarcoma           |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1  |  |  |
| Lymphoma Malignant            |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1  |  |  |
| <b>SYSTEMIC LESIONS</b>       |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |    |  |  |
| Multiple Organ                | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 49 |  |  |
| Histiocytic Sarcoma           |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 2  |  |  |
| Lymphoma Malignant            |             | X     | X     | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 9  |  |  |

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

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

TDMS No. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE | 6 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | females<br>(cont...)  |                  |
|--------------------|---------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|-----------------------|------------------|
|                    |         | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>4<br>8<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>6<br>8<br>2 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>6<br>4<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>6<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>3 |           |                       | 0<br>7<br>3<br>3 |
|                    |         | 0                | 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>5<br>1 |                  |

**ALIMENTARY SYSTEM**

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Gallbladder                      | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum        | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum           | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + |
| Intestine Small, Jejunum         | + | + | + | + | A | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hemangiosarcoma                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatocellular Adenoma           | X |   |   |   |   |   |   |   |   |   | X |   |   | X |   |   | X |   |   |   |   |   |   |
| Hepatocellular Adenoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatocellular Carcinoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |
| Lymphoma Malignant               | X |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   | X |   |
| Mesentery                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hemangioma                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hemangiosarcoma                  |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |
| Pancreas                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymphoma Malignant               | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
 + .. Tissue examined microscopically  
 X .. Lesion present  
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TDMS No. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE<br>6 MG/KG   | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | ANIMAL ID | females<br>(cont...) |
|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----------|----------------------|
|   | 0732        | 0733 | 0734 | 0735 | 0736 | 0737 | 0738 | 0739 | 0740 | 0741 | 0742 | 0743 | 0744 | 0745 | 0746 | 0747 | 0748 | 0749 | 0750 | 0751 | 0752 | 0753 | 0754 | 0755 | 0756 |           |                      |
| Mesothelioma Malignant  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X         |                      |
| Salivary Glands<br>Lymphoma Malignant                                 | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         |                      |
| Stomach, Forestomach<br>Hemangioma                                    | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         |                      |
| Stomach, Glandular<br>Lymphoma Malignant                              | +           | +    | +    | +    | A    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         |                      |
| <b>CARDIOVASCULAR SYSTEM</b>  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                      |
| Heart   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         |                      |
| <b>ENDOCRINE SYSTEM</b>   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |           |                      |
| Adrenal Cortex<br>Lymphoma Malignant                                  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         |                      |
| Adrenal Medulla<br>Pheochromocytoma Benign                            | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         |                      |
| Islets, Pancreatic  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         |                      |
| Parathyroid Gland   | +           | M    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         |                      |
| Pituitary Gland<br>Pars Distalis, Adenoma<br>Pars Intermedia, Adenoma | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +         |                      |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
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 X .. Lesion present  
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TDMS No. 99037 - 06  
 Test Type: CHRONIC  
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 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
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 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | females<br>(cont...)  |
|--------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|                    | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>4<br>8<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>6<br>8<br>2      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>6<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>6<br>4<br>6      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>6<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      |                       |                       |
| 6 MG/KG            | 0<br>0<br>3<br>5<br>1 | 0<br>0<br>3<br>5<br>2 | 0<br>0<br>3<br>5<br>3 | 0<br>0<br>3<br>5<br>4 | 0<br>0<br>3<br>5<br>5 | 0<br>0<br>3<br>5<br>6 | 0<br>0<br>3<br>5<br>7 | 0<br>0<br>3<br>5<br>8 | 0<br>0<br>3<br>5<br>9 | 0<br>0<br>3<br>6<br>0 | 0<br>0<br>3<br>6<br>1 | 0<br>0<br>3<br>6<br>2 | 0<br>0<br>3<br>6<br>3 | 0<br>0<br>3<br>6<br>4 | 0<br>0<br>3<br>6<br>5 | 0<br>0<br>3<br>6<br>6 | 0<br>0<br>3<br>6<br>7 | 0<br>0<br>3<br>6<br>8 | 0<br>0<br>3<br>6<br>9 | 0<br>0<br>3<br>7<br>0 | 0<br>0<br>3<br>7<br>1 | 0<br>0<br>3<br>7<br>2 | 0<br>0<br>3<br>7<br>3 | 0<br>0<br>3<br>7<br>4 | 0<br>0<br>3<br>7<br>5 |

Thyroid Gland  
 Follicular Cell, Adenoma

+  
 X

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Clitoral Gland

+ + + + M +

Ovary  
 Cystadenoma  
 Hemangiosarcoma  
 Luteoma

+  
 X X  
 X X

Uterus  
 Lymphoma Malignant  
 Polyp Stromal

+  
 X X

**HEMATOPOIETIC SYSTEM**

Bone Marrow  
 Hemangiosarcoma  
 Lymphoma Malignant

+  
 X

Lymph Node  
 Iliac, Lymphoma Malignant  
 Mediastinal, Lymphoma Malignant  
 Renal, Lymphoma 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









| B6C3F1 MICE FEMALE<br>6 MG/KG | 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 | * TOTALS |
|-------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|                               |             | 6 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 6 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |          |
|                               |             | 9 | 3 | 5 | 3 | 3 | 3 | 3 | 3 | 2 | 3 | 3 | 3 | 0 | 3 | 3 | 3 | 3 | 1 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |          |
|                               |             | 8 | 2 | 2 | 2 | 2 | 2 | 2 | 8 | 4 | 2 | 3 | 3 | 9 | 2 | 3 | 3 | 3 | 7 | 3 | 3 | 2 | 2 | 2 | 2 | 2 | 2 |          |
|                               |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
|                               |             | 0 | 0 | 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 |          |
|                               |             | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 |          |
|                               |             | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |   |          |

ALIMENTARY SYSTEM

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                        | + | + | + | + | + | + | + | + | I | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Gallbladder                      | + | + | A | + | + | + | + | A | A | + | M | + | + | + | + | + | M | + | + | + | M | + | + | + | + | + | 43 |
| Intestine Large, Cecum           | + | + | A | + | + | + | + | + | A | + | + | M | + | + | + | + | + | A | + | + | + | + | + | + | + | + | 46 |
| Intestine Large, Colon           | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | 48 |
| Intestine Large, Rectum          | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Intestine Small, Duodenum        | + | + | A | + | + | + | + | + | A | A | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | 45 |
| Intestine Small, Ileum           | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | 45 |
| Intestine Small, Jejunum         | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | 45 |
| Liver                            | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Hemangiosarcoma                  |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Hepatocellular Adenoma           |   |   |   |   | X |   | X |   |   |   |   |   | X |   |   |   |   |   | X |   |   |   | X |   |   |   | 9  |
| Hepatocellular Adenoma, Multiple |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | 2  |
| Hepatocellular Carcinoma         |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | 3  |
| Lymphoma Malignant               |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  |
| Mesentery                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 5  |
| Hemangioma                       |   |   |   |   |   |   |   |   |   |   |   | + | + |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Hemangiosarcoma                  |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Pancreas                         | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Lymphoma Malignant               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 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

| 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 |
|------------------------------|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|-----------|---|
| 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 |
| <b>B6C3F1 MICE FEMALE</b>    | 6               | 6 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 6 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7         | 7         | 7 |
|                              | 9               | 3 | 5 | 3 | 3 | 3 | 3 | 3 | 2 | 3 | 3 | 3 | 3 | 0 | 3 | 3 | 3 | 3 | 1 | 3 | 3 | 3 | 3 | 3         | 3         | 3 |
| <b>6 MG/KG</b>               | 8               | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 8 | 4 | 2 | 3 | 3 | 9 | 2 | 3 | 3 | 7 | 3 | 3 | 2 | 2 | 2 | 2         | 2         |   |
|                              | 0               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         | 0         | 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         | 4         |   |
|                              | 7               | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9         | 0         |   |
|                              | 6               | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9         | 0         |   |
|                              | <b>* TOTALS</b> |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |           |   |
| Mesothelioma Malignant       |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1</b>  |   |
| Salivary Glands              |                 | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | +         |   |
| Lymphoma Malignant           |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>49</b> |   |
|                              |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>2</b>  |   |
| Stomach, Forestomach         |                 | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M         | +         |   |
| Hemangioma                   |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>48</b> |   |
|                              |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1</b>  |   |
| Stomach, Glandular           |                 | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M         | +         |   |
| Lymphoma Malignant           |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>47</b> |   |
|                              |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1</b>  |   |
| <b>CARDIOVASCULAR SYSTEM</b> |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |           |   |
| Heart                        |                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | +         |   |
|                              |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>50</b> |           |   |
| <b>ENDOCRINE SYSTEM</b>      |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |           |   |
| Adrenal Cortex               |                 | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | +         |   |
| Lymphoma Malignant           |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>49</b> |   |
|                              |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>2</b>  |   |
| Adrenal Medulla              |                 | M | + | + | + | + | + | + | A | + | + | + | M | I | + | + | + | + | + | + | + | + | + | +         |           |   |
| Pheochromocytoma Benign      |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>46</b> |   |
|                              |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1</b>  |   |
| Islets, Pancreatic           |                 | + | + | A | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | +         |   |
|                              |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>48</b> |           |   |
| Parathyroid Gland            |                 | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | M | + | + | + | M | + | + | +         | +         |   |
|                              |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>46</b> |           |   |
| Pituitary Gland              |                 | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | +         |   |
| Pars Distalis, Adenoma       |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>48</b> |   |
| Pars Intermedia, Adenoma     |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>3</b>  |   |
|                              |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1</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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE<br>6 MG/KG             | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |       |       |       |      |  |
|---|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------|-------|-------|------|--|
|   | 0698        | 0732  | 0652  | 0732  | 0772  | 0772  | 0772  | 0668  | 0668  | 0772  | 0772  | 0772  | 0667  | 0772  | 0772  | 0772  | 0667  | 0772  | 0772  | 0772  |          | 0667  | 0772  | 0772  | 0772 |  |
| ANIMAL ID                                 | 00376       | 00377 | 00378 | 00379 | 00380 | 00381 | 00382 | 00383 | 00384 | 00385 | 00386 | 00387 | 00388 | 00389 | 00390 | 00391 | 00392 | 00393 | 00394 | 00395 | 00396    | 00397 | 00398 | 00399 |      |  |
| Lymph Node, Mandibular Lymphoma Malignant | +           | +     | M     | +     | +     | +     | +     | +     | A     | +     | I     | +     | +     | X     | M     | +     | +     | +     | +     | +     | +        | +     | +     | +     | 45   |  |
|   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       | 3    |  |
| Lymph Node, Mesenteric Lymphoma Malignant | +           | +     | +     | +     | +     | +     | +     | +     | A     | +     | +     | +     | +     | +     | M     | +     | +     | +     | M     | +     | +        | +     | +     | +     | 46   |  |
|   |             |       | X     |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       | X     |       |          |       |       |       | 5    |  |
| Spleen Hemangiosarcoma                    | +           | +     | A     | +     | +     | +     | +     | +     | A     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | +     | 48   |  |
| Lymphoma Malignant                        |             |       |       |       |       |       |       |       | X     |       |       |       |       |       | X     |       |       |       | X     |       |          |       | X     |       | 2    |  |
|   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       | 7    |  |
| Thymus Fibrosarcoma, Metastatic, Skin     | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | M     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | 46    |      |  |
| Lymphoma Malignant                        |             |       | X     |       |       |       |       |       | X     | X     | X     |       |       |       |       |       |       |       |       |       |          |       |       | 1     |      |  |
|   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       | 4     |      |  |
| <b>INTEGUMENTARY SYSTEM</b>               |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |      |  |
| Mammary Gland                             | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | +     | 50   |  |
| Skin Subcutaneous Tissue, Fibrosarcoma    | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | +     | 50   |  |
| Subcutaneous Tissue, Hemangiosarcoma      |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       | 1    |  |
| Subcutaneous Tissue, Sarcoma              |             |       |       |       |       |       |       |       |       |       |       |       |       |       | X     |       |       |       |       |       |          |       |       |       | 1    |  |
|   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       | 1    |  |
| <b>MUSCULOSKELETAL SYSTEM</b>             |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |      |  |
| Bone                                      | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | +     | 50   |  |
| <b>NERVOUS SYSTEM</b>                     |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |       |       |      |  |
| Brain                                     | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | +     | +     | +     | 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. 99037 - 06  
 Test Type: CHRONIC  
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P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |  |
|--------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|--|
|                    | 0698        | 0732  | 0652  | 0733  | 0772  | 0772  | 0772  | 0668  | 0667  | 0773  | 0773  | 0773  | 0667  | 0773  | 0773  | 0773  | 0667  | 0773  | 0773  | 0773  | 0667  | 0773  | 0773  |       |          |  |
| 6 MG/KG            | 00376       | 00377 | 00378 | 00379 | 00380 | 00381 | 00382 | 00383 | 00384 | 00385 | 00386 | 00387 | 00388 | 00389 | 00390 | 00391 | 00392 | 00393 | 00394 | 00395 | 00396 | 00397 | 00398 | 00399 | 00400    |  |
|                    | 00376       | 00377 | 00378 | 00379 | 00380 | 00381 | 00382 | 00383 | 00384 | 00385 | 00386 | 00387 | 00388 | 00389 | 00390 | 00391 | 00392 | 00393 | 00394 | 00395 | 00396 | 00397 | 00398 | 00399 | 00400    |  |

**RESPIRATORY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Alveolar/Bronchiolar Adenoma             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   | 2  |
| Alveolar/Bronchiolar Carcinoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Alveolar/Bronchiolar Carcinoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Carcinoma, Metastatic, Harderian Gland   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Fibrosarcoma, Metastatic, Skin           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant                       |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Nose                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Trachea                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**SPECIAL SENSES SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye                                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Carcinoma, Metastatic, Harderian Gland | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Harderian Gland                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenoma                                |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 5  |
| Carcinoma                              | X |   |   |   |   |   | X |   |   |   |   | X |   |   |   |   | X |   |   |   |   |   |   |   |   | 4  |
| Lymphoma Malignant                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

**URINARY SYSTEM**

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney             | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Lymphoma Malignant |   |   | X |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Urinary Bladder    | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |

\* .. 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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | females<br>(cont...)  |
|--------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|                    | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>6<br>6<br>8      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>3      | 0<br>6<br>9<br>1      | 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>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      |                       |                       |
| 12 MG/KG           | ANIMAL ID             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|                    | 0<br>0<br>4<br>0<br>1 | 0<br>0<br>4<br>0<br>2 | 0<br>0<br>4<br>0<br>3 | 0<br>0<br>4<br>0<br>4 | 0<br>0<br>4<br>0<br>5 | 0<br>0<br>4<br>0<br>6 | 0<br>0<br>4<br>0<br>7 | 0<br>0<br>4<br>0<br>8 | 0<br>0<br>4<br>0<br>9 | 0<br>0<br>4<br>0<br>0 | 0<br>0<br>4<br>0<br>1 | 0<br>0<br>4<br>0<br>2 | 0<br>0<br>4<br>0<br>3 | 0<br>0<br>4<br>0<br>4 | 0<br>0<br>4<br>0<br>5 | 0<br>0<br>4<br>0<br>6 | 0<br>0<br>4<br>0<br>7 | 0<br>0<br>4<br>0<br>8 | 0<br>0<br>4<br>0<br>9 | 0<br>0<br>4<br>0<br>0 | 0<br>0<br>4<br>0<br>1 | 0<br>0<br>4<br>0<br>2 | 0<br>0<br>4<br>0<br>3 | 0<br>0<br>4<br>0<br>4 | 0<br>0<br>4<br>0<br>5 |

Leiomyosarcoma, Metastatic, Intestine Small, Jejunum

Pancreas  
 Histiocytic Sarcoma  
 Lymphoma Malignant

+  
 X

X

Salivary Glands  
 Lymphoma Malignant

+  
 X

X

Stomach, Forestomach

+ +

Stomach, Glandular

+ + + + + + + + + + + + I + + + + + + + + + + + +

**CARDIOVASCULAR SYSTEM**

Heart  
 Histiocytic Sarcoma

+ +

**ENDOCRINE SYSTEM**

Adrenal Cortex

+ +

Adrenal Medulla

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

Islets, Pancreatic

+ +

Parathyroid Gland

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

Pituitary Gland  
 Pars Intermedia, 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



| B6C3F1 MICE FEMALE<br>12 MG/KG  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 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 |           |                      |
|   | 7           | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 0         |                      |
|   | 3           | 3 | 3 | 6 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 1 | 3 | 3 | 9 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 0         |                      |
|   | 3           | 3 | 3 | 8 | 3 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 0 | 3 | 3 | 1 | 9 | 9 | 9 | 9 | 9 | 3 | 3 | 3 | 3 | 0         |                      |
|   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         |                      |
|   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         |                      |
|   | 4           | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 0         |                      |
|   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 0         |                      |
|   | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 0         | females<br>(cont...) |
| Lymph Node, Mesenteric<br>Histiocytic Sarcoma<br>Lymphoma Malignant               | +           | + | + | + | + | + | + | + | + | + | + | + | X | + | + | + | + | + | + | + | + | + | + | + |   |           |                      |
| Spleen<br>Histiocytic Sarcoma<br>Lymphoma Malignant                               | +           | + | + | + | + | + | + | + | + | + | + | + | X | + | + | + | + | + | + | + | + | + | + | + |   |           |                      |
| Thymus<br>Lymphoma Malignant  | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |           |                      |
| <b>INTEGUMENTARY SYSTEM</b>   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |
| Mammary Gland<br>Adenoma  | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |                      |
| Skin<br>Subcutaneous Tissue, Sarcoma<br>Subcutaneous Tissue, Schwannoma Malignant | +           | + | + | + | + | + | + | + | + | + | + | + | X | + | + | + | + | + | + | + | + | + | + | + |   |           |                      |
| <b>MUSCULOSKELETAL SYSTEM</b>   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |
| Bone  | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |                      |
| <b>NERVOUS SYSTEM</b>   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                      |
| Brain<br>Carcinoma, Metastatic, Pituitary Gland                                   | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |           |                      |
| <b>RESPIRATORY 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

| B6C3F1 MICE FEMALE<br>12 MG/KG                | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | females<br>(cont...) |
|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------------------|
|   | 0733        | 0733 | 0733 | 0668 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0773 | 0669 | 0722 | 0722 | 0722 | 0722 | 0722 | 0722 | 0722 |                      |
| ANIMAL ID                                     | 0040        | 0044 | 0040 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 |                      |
| Lung  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                      |
| Alveolar/Bronchiolar Adenoma                  |             |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |
| Alveolar/Bronchiolar Carcinoma                |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |                      |
| Carcinoma, Metastatic, Harderian Gland        |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |                      |
| Carcinoma, Metastatic, Uncertain Primary Site |             |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |
| Histiocytic Sarcoma                           |             |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |                      |
| Lymphoma Malignant                            |             | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |
| Nose  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                      |
| Trachea                                       | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                      |
| <b>SPECIAL SENSES SYSTEM</b>                  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |
| Eye   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                      |
| Carcinoma, Metastatic, Harderian Gland        |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |                      |
| Harderian Gland                               | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                      |
| Adenoma                                       |             |      |      | X    | X    |      | X    |      |      |      | X    |      |      |      |      | X    |      | X    |      |      | X    |      |      |                      |
| Carcinoma                                     |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |                      |
| <b>URINARY SYSTEM</b>                         |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |
| Kidney  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                      |
| Histiocytic Sarcoma                           |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |
| Lymphoma Malignant                            |             | X    |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      | X    |      |                      |
| Urinary Bladder                               | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    |                      |
| <b>SYSTEMIC LESIONS</b>                       |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |

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

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TDMS No. 99037 - 06

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

alpha/beta Thujone mixture

CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010

Time Report Requested: 13:12:57

First Dose M/F: 06/30/03 / 06/30/03

Lab: SRI

| B6C3F1 MICE FEMALE<br>12 MG/KG                       | 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 | ANIMAL ID |   |  |   |                 |    |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|---|--|---|-----------------|----|
|  |             | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 6 | 7 | 7 | 5 | 7 | 7 | 7 | 7 |           |   |  | 7 | 7               | 7  |
|  |             | 3 | 3 | 3 | 3 | 3 | 3 | 1 | 3 | 3 | 3 | 2 | 7 | 2 | 2 | 2 | 1 | 3 | 4 | 9 | 3 | 3 | 4 | 3 | 3 | 3 | 3 | 3 | 3         | 3 |  |   |                 |    |
|  |             | 2 | 2 | 2 | 2 | 2 | 2 | 9 | 2 | 2 | 2 | 9 | 9 | 9 | 9 | 9 | 1 | 3 | 7 | 4 | 9 | 3 | 3 | 1 | 3 | 1 | 1 | 1 | 1         | 1 |  |   |                 |    |
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         | 0 |  |   |                 |    |
|  |             | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4         | 4 |  |   |                 |    |
|  |             | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4         | 4 |  |   |                 |    |
|  |             | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 0 | 0         | 0 |  |   | <b>* TOTALS</b> |    |
| Leiomyosarcoma, Metastatic, Intestine Small, Jejunum |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |           |   |  |   |                 | 1  |
| Pancreas   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | + |  |   |                 | 50 |
| Histiocytic Sarcoma                                  |             |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |  |   |                 | 2  |
| Lymphoma Malignant                                   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |  |   |                 | 1  |
| Salivary Glands                                      |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | + |  |   |                 | 50 |
| Lymphoma Malignant                                   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |  |   |                 | 2  |
| Stomach, Forestomach                                 |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | + |  |   |                 | 50 |
| Stomach, Glandular                                   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | +         | + |  |   |                 | 48 |
| <b>CARDIOVASCULAR SYSTEM</b>                         |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |  |   |                 |    |
| Heart  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | + |  |   |                 | 50 |
| Histiocytic Sarcoma                                  |             |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |  |   |                 | 1  |
| <b>ENDOCRINE SYSTEM</b>                              |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |  |   |                 |    |
| Adrenal Cortex                                       |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | + |  |   |                 | 50 |
| Adrenal Medulla                                      |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | + |  |   |                 | 48 |
| Islets, Pancreatic                                   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | + |  |   |                 | 50 |
| Parathyroid Gland                                    |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | M | + | + | + | + | + | + | + | +         | + |  |   |                 | 47 |
| Pituitary Gland                                      |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +         | + |  |   |                 | 49 |
| Pars Intermedia, Carcinoma                           |             |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |   |  |   |                 | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
X .. Lesion present  
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TDMS No. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE<br>12 MG/KG  | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |
|---|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|
|   | 0732        | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  |          |
| ANIMAL ID   | 00426       | 00447 | 00448 | 00449 | 00450 | 00451 | 00452 | 00453 | 00454 | 00455 | 00456 | 00457 | 00458 | 00459 | 00460 | 00461 | 00462 | 00463 | 00464 | 00465 | 00466 | 00467 | 00468 | 00469 | 00470    |
| Lymph Node, Mesenteric Histiocytic Sarcoma Lymphoma Malignant               | +           | +     | +     | +     | M     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 48       |
|   |             |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
|   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 5        |
| Spleen Histiocytic Sarcoma Lymphoma Malignant                               | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |
|   |             |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       | X     |       |       |       |       |       |       |       | 3        |
|   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 10       |
| Thymus Lymphoma Malignant   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | M     | +     | +     | +     | +     | M     | +     | +     | +     | +     | +     | +     | +     | +     | 48       |
|   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 6        |
|   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |
| <b>INTEGUMENTARY SYSTEM</b>   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |
| Mammary Gland Adenoma   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |
|   |             |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
| Skin Subcutaneous Tissue, Sarcoma Subcutaneous Tissue, Schwannoma Malignant | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |
|   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
|   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
| <b>MUSCULOSKELETAL SYSTEM</b>   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |
| Bone  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |
| <b>NERVOUS SYSTEM</b>   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |
| Brain Carcinoma, Metastatic, Pituitary Gland                                | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |
|   |             |       |       |       |       |       |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       | 1        |
| <b>RESPIRATORY 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

| B6C3F1 MICE FEMALE<br>12 MG/KG                | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |  |  |
|---|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|--|--|
|   | 0732        | 0732  | 0732  | 0732  | 0732  | 0731  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  | 0732  |          |  |  |
| ANIMAL ID                                     | 00426       | 00442 | 00448 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 | 00444 |          |  |  |
| Lung  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |  |  |
| Alveolar/Bronchiolar Adenoma                  |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | X     |       |       |       |       |       | 2        |  |  |
| Alveolar/Bronchiolar Carcinoma                |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |  |  |
| Carcinoma, Metastatic, Harderian Gland        |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |  |  |
| Carcinoma, Metastatic, Uncertain Primary Site |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |  |  |
| Histiocytic Sarcoma                           |             |       |       |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 2        |  |  |
| Lymphoma Malignant                            |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |  |  |
| Nose  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |  |  |
| Trachea                                       | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |  |  |
| <b>SPECIAL SENSES SYSTEM</b>                  |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |  |  |
| Eye   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |  |  |
| Carcinoma, Metastatic, Harderian Gland        |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |  |  |
| Harderian Gland                               | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | M     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 49       |  |  |
| Adenoma                                       |             |       |       |       |       |       |       |       |       |       |       |       |       | X     |       |       |       |       |       | X     |       |       |       |       | 9        |  |  |
| Carcinoma                                     |             |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       | X     |       |       |       |       |       |       |       | 3        |  |  |
| <b>URINARY SYSTEM</b>                         |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |  |  |
| Kidney  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |  |  |
| Histiocytic Sarcoma                           |             |       |       |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1        |  |  |
| Lymphoma Malignant                            |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 4        |  |  |
| Urinary Bladder                               | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50       |  |  |
| <b>SYSTEMIC LESIONS</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. 99037 - 06  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID        | females<br>(cont...) |
|--------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------------------|
|                    | 0<br>1<br>3<br>8 | 0<br>1<br>6<br>9 | 0<br>3<br>1<br>6 | 0<br>2<br>8<br>2 | 0<br>2<br>3<br>9 | 0<br>3<br>1<br>6 | 0<br>2<br>8<br>2 | 0<br>2<br>3<br>9 | 0<br>2<br>3<br>2 | 0<br>2<br>3<br>6 | 0<br>3<br>1<br>4 | 0<br>0<br>9<br>2 | 0<br>2<br>3<br>4 | 0<br>1<br>1<br>7 | 0<br>2<br>2<br>5 | 0<br>2<br>2<br>4 | 0<br>2<br>2<br>6 | 0<br>3<br>0<br>9 | 0<br>2<br>8<br>8 | 0<br>1<br>3<br>6 | 0<br>1<br>4<br>9 | 0<br>2<br>4<br>8 | 0<br>2<br>7<br>6 | 0<br>3<br>4<br>1 |                  |                      |
| 25 MG/KG           | 0<br>4<br>5<br>1 | 0<br>4<br>5<br>2 | 0<br>0<br>5<br>3 | 0<br>0<br>5<br>4 | 0<br>0<br>5<br>5 | 0<br>0<br>5<br>6 | 0<br>0<br>5<br>7 | 0<br>0<br>5<br>8 | 0<br>0<br>5<br>9 | 0<br>0<br>6<br>0 | 0<br>0<br>6<br>1 | 0<br>0<br>6<br>2 | 0<br>0<br>6<br>3 | 0<br>0<br>6<br>4 | 0<br>0<br>6<br>5 | 0<br>0<br>6<br>6 | 0<br>0<br>6<br>7 | 0<br>0<br>6<br>8 | 0<br>0<br>6<br>9 | 0<br>0<br>7<br>0 | 0<br>0<br>7<br>1 | 0<br>0<br>7<br>2 | 0<br>0<br>7<br>3 | 0<br>0<br>7<br>4 | 0<br>0<br>7<br>5 |                      |

Heart +

**ENDOCRINE SYSTEM**

Adrenal Cortex +

Adrenal Medulla +

Islets, Pancreatic +

Parathyroid Gland + + M +

Pituitary Gland + + + + + + + + + + + + + + + + M + + + + + + + +

Thyroid Gland + + M +

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Clitoral Gland +

Ovary +

Uterus +

**HEMATOPOIETIC SYSTEM**

Bone Marrow +

\* .. 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. 99037 - 06  
 Test Type: CHRONIC  
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 Species/Strain: MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**  
 alpha/beta Thujone mixture  
 CAS Number: THUJONEMIXAB

Date Report Requested: 08/11/2010  
 Time Report Requested: 13:12:57  
 First Dose M/F: 06/30/03 / 06/30/03  
 Lab: SRI

| B6C3F1 MICE FEMALE<br>25 MG/KG | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | * TOTALS         |                  |                  |                  |                  |
|--------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
|                                | 0<br>3<br>1<br>6 | 0<br>1<br>7<br>7 | 0<br>3<br>1<br>6 | 0<br>2<br>8<br>4 | 0<br>2<br>9<br>2 | 0<br>0<br>0<br>4 | 0<br>2<br>1<br>5 | 0<br>2<br>8<br>4 | 0<br>2<br>5<br>7 | 0<br>1<br>8<br>4 | 0<br>0<br>0<br>6 | 0<br>2<br>9<br>0 | 0<br>2<br>5<br>3 | 0<br>1<br>5<br>9 | 0<br>1<br>6<br>6 | 0<br>2<br>4<br>7 | 0<br>3<br>2<br>6 | 0<br>3<br>1<br>6 | 0<br>1<br>3<br>1 | 0<br>2<br>7<br>5 | 0<br>2<br>0<br>5 | 0<br>1<br>5<br>6 |                  | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 |                  |                  |
|                                | ANIMAL ID        |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
|                                | 0<br>4<br>7<br>6 | 0<br>0<br>4<br>7 | 0<br>0<br>4<br>7 | 0<br>0<br>4<br>7 | 0<br>0<br>4<br>8 | 0<br>0<br>4<br>8 | 0<br>0<br>4<br>8 | 0<br>0<br>4<br>8 | 0<br>0<br>4<br>8 | 0<br>0<br>4<br>8 | 0<br>0<br>4<br>8 | 0<br>0<br>4<br>8 | 0<br>0<br>4<br>8 | 0<br>0<br>4<br>8 | 0<br>0<br>4<br>9 | 0<br>0<br>4<br>9 | 0<br>0<br>4<br>9 | 0<br>0<br>4<br>9 | 0<br>0<br>4<br>9 | 0<br>0<br>4<br>9 | 0<br>0<br>4<br>9 | 0<br>0<br>4<br>9 | 0<br>0<br>4<br>9 | 0<br>0<br>4<br>9 | 0<br>0<br>4<br>9 | 0<br>0<br>4<br>9 | 0<br>0<br>4<br>9 |
| Heart                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50               |
| <b>ENDOCRINE SYSTEM</b>        |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
| Adrenal Cortex                 | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50               |
| Adrenal Medulla                | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 49               |
| Islets, Pancreatic             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50               |
| Parathyroid Gland              | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 49               |
| Pituitary Gland                | +                | +                | +                | +                | +                | +                | +                | +                | +                | I                | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 47               |
| Thyroid Gland                  | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 49               |
| <b>GENERAL BODY SYSTEM</b>     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
| NONE                           |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
| <b>GENITAL SYSTEM</b>          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
| Clitoral Gland                 | +                | +                | +                | +                | M                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | M                | +                | 47               |
| Ovary                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50               |
| Uterus                         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50               |
| <b>HEMATOPOIETIC SYSTEM</b>    |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
| Bone Marrow                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50               |

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

|                           |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |
|---------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|
| <b>B6C3F1 MICE FEMALE</b> | 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 |   |                 |
|                           |             | 3 | 1 | 3 | 2 | 2 | 0 | 2 | 2 | 2 | 1 | 0 | 2 | 2 | 1 | 1 | 2 | 2 | 3 | 3 | 1 | 2 | 2 | 2 | 1 |   | 0               |
| <b>25 MG/KG</b>           |             | 1 | 7 | 1 | 8 | 9 | 0 | 1 | 8 | 5 | 8 | 0 | 9 | 5 | 5 | 6 | 4 | 2 | 1 | 1 | 3 | 3 | 7 | 0 | 5 | 0 |                 |
|                           | ANIMAL ID   | 6 | 7 | 6 | 4 | 2 | 4 | 5 | 4 | 7 | 4 | 6 | 0 | 3 | 9 | 6 | 9 | 7 | 6 | 6 | 1 | 4 | 5 | 5 | 6 | 3 |                 |
|                           |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | <b>* TOTALS</b> |
|                           |             | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 |   |                 |
|                           |             | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 |                 |
|                           |             | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |                 |

**SPECIAL SENSES SYSTEM**

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Harderian Gland Adenoma | + | + | + | + | + | + | + | + | + | + | + | X | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

**URINARY SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**SYSTEMIC LESIONS**

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

\*\*\* 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