

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

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

o-Chloropyridine  
**CAS Number:** 109-09-1

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

F2\_R2

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

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

**ALIMENTARY SYSTEM**

Esophagus	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Liver	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Pancreas	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Salivary Glands	+	I	+	+	+	+	+	+	+	+	<b>9</b>
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	<b>10</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

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

**CARDIOVASCULAR SYSTEM**

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

**ENDOCRINE SYSTEM**

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

**GENERAL BODY SYSTEM**

NONE

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

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

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

**GENITAL SYSTEM**

Epididymis	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Preputial Gland	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Prostate	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Testes	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**HEMATOPOIETIC SYSTEM**

Bone Marrow	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Lymph Node, Mandibular	M	M	M	M	M	M	M	M	M	M	<b>0</b>
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Spleen	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Thymus	+	+	+	+	+	+	+	+	+	+	<b>10</b>

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

**INTEGUMENTARY SYSTEM**

Mammary Gland	+	M	+	+	+	M	+	+	+	+	<b>8</b>
Skin	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**MUSCULOSKELETAL SYSTEM**

Bone	+	+	+	+	+	+	+	+	+	+	<b>10</b>
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**NERVOUS SYSTEM**

Brain	+	+	+	+	+	+	+	+	+	+	<b>10</b>
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**RESPIRATORY SYSTEM**

Lung	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Nose	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Trachea	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**SPECIAL SENSES SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
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 BLANK .. Not examined microscopically

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

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

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

**URINARY SYSTEM**

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

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

**SYSTEMIC LESIONS**

Multiple Organ + + + + + + + + + + **10**

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 Species/Strain: RATS/F 344/N

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

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

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

**ALIMENTARY SYSTEM**

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

**CARDIOVASCULAR SYSTEM**

NONE

**ENDOCRINE SYSTEM**

NONE

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

NONE

**HEMATOPOIETIC SYSTEM**

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

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

**INTEGUMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
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Lab: MBA

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
<b>FISCHER 344 RATS MALE</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
<b>10 PPM</b>	0	0	0	0	0	0	0	0	0	0
	1	1	1	1	1	1	1	1	1	2
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

NONE

**MUSCULOSKELETAL SYSTEM**

NONE

**NERVOUS SYSTEM**

NONE

**RESPIRATORY SYSTEM**

NONE

**SPECIAL SENSES SYSTEM**

NONE

**URINARY SYSTEM**

Kidney	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

**SYSTEMIC LESIONS**

Multiple Organ	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

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DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
30 PPM	0	0	0	0	0	0	0	0	0	0
	2	2	2	2	2	2	2	2	2	3
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

**ALIMENTARY SYSTEM**

Liver ..... **10**

**CARDIOVASCULAR SYSTEM**

NONE

**ENDOCRINE SYSTEM**

NONE

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

NONE

**HEMATOPOIETIC SYSTEM**

Bone Marrow ..... **10**

Spleen ..... **10**

**INTEGUMENTARY SYSTEM**

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

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DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
<b>FISCHER 344 RATS MALE</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
<b>30 PPM</b>	0	0	0	0	0	0	0	0	0	0
	2	2	2	2	2	2	2	2	2	3
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

NONE

**MUSCULOSKELETAL SYSTEM**

NONE

**NERVOUS SYSTEM**

NONE

**RESPIRATORY SYSTEM**

NONE

**SPECIAL SENSES SYSTEM**

NONE

**URINARY SYSTEM**

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

**SYSTEMIC LESIONS**

Multiple Organ + + + + + + + + + + **10**

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 Species/Strain: RATS/F 344/N

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DAY ON TEST	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	
	9	9	9	9	9	9	9	9	9	9	
	2	2	2	2	2	2	2	2	2	2	
.....											
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0	
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
100 PPM	0	0	0	0	0	0	0	0	0	0	
	3	3	3	3	3	3	3	3	3	4	
	1	2	3	4	5	6	7	8	9	0	
											<b>* TOTALS</b>

**ALIMENTARY SYSTEM**

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

**CARDIOVASCULAR SYSTEM**

NONE

**ENDOCRINE SYSTEM**

NONE

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

NONE

**HEMATOPOIETIC SYSTEM**

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

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

**INTEGUMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
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DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
<b>FISCHER 344 RATS MALE</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
<b>100 PPM</b>	0	0	0	0	0	0	0	0	0	0
	3	3	3	3	3	3	3	3	3	4
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

NONE

**MUSCULOSKELETAL SYSTEM**

NONE

**NERVOUS SYSTEM**

NONE

**RESPIRATORY SYSTEM**

NONE

**SPECIAL SENSES SYSTEM**

NONE

**URINARY SYSTEM**

Kidney	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

**SYSTEMIC LESIONS**

Multiple Organ	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

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DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
<b>FISCHER 344 RATS MALE</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
<b>300 PPM</b>	0	0	0	0	0	0	0	0	0	0
	4	4	4	4	4	4	4	4	4	5
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

**ALIMENTARY SYSTEM**

Liver	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

**CARDIOVASCULAR SYSTEM**

NONE

**ENDOCRINE SYSTEM**

NONE

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

NONE

**HEMATOPOIETIC SYSTEM**

Bone Marrow	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

Spleen	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

**INTEGUMENTARY SYSTEM**

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DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
FISCHER 344 RATS MALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
300 PPM	0	0	0	0	0	0	0	0	0	0
	4	4	4	4	4	4	4	4	4	5
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

SYSTEMIC LESIONS

Multiple Organ	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

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DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
<b>FISCHER 344 RATS MALE</b>	0	0	0	0	0	0	0	0	0	0
<b>1000 PPM</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
	5	5	5	5	5	5	5	5	5	6
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

**ALIMENTARY SYSTEM**

Esophagus	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Liver	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Pancreas	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Salivary Glands	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	<b>10</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. 99002 - 03  
 Test Type: 90-DAY  
 Route: DOSED WATER  
 Species/Strain: RATS/F 344/N

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

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

DAY ON TEST	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	
	9	9	9	9	9	9	9	9	9	9	
	2	2	2	2	2	2	2	2	2	2	
.....											
<b>FISCHER 344 RATS MALE</b>	0	0	0	0	0	0	0	0	0	0	
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
<b>1000 PPM</b>	0	0	0	0	0	0	0	0	0	0	
	5	5	5	5	5	5	5	5	5	6	
	1	2	3	4	5	6	7	8	9	0	<b>* TOTALS</b>

**CARDIOVASCULAR SYSTEM**

Blood Vessel	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Heart	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**ENDOCRINE SYSTEM**

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

**GENERAL BODY SYSTEM**

NONE

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

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



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

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

o-Chloropyridine  
 CAS Number: 109-09-1

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

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
<b>FISCHER 344 RATS MALE</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
<b>1000 PPM</b>	0	0	0	0	0	0	0	0	0	0
	5	5	5	5	5	5	5	5	5	6
	1	2	3	4	5	6	7	8	9	0
	<b>* TOTALS</b>									

**GENITAL SYSTEM**

Epididymis	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Preputial Gland	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Prostate	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Testes	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**HEMATOPOIETIC SYSTEM**

Bone Marrow	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Lymph Node, Mandibular	M	M	M	+	M	M	M	M	M	M	<b>1</b>
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Spleen	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Thymus	+	+	+	+	+	+	+	+	+	+	<b>10</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

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
<b>FISCHER 344 RATS MALE</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
<b>1000 PPM</b>	0	0	0	0	0	0	0	0	0	0
	5	5	5	5	5	5	5	5	5	6
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

**INTEGUMENTARY SYSTEM**

Mammary Gland	+	+	+	+	+	+	M	+	+	+	<b>9</b>
Skin	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**MUSCULOSKELETAL SYSTEM**

Bone	+	+	+	+	+	+	+	+	+	+	<b>10</b>
------	---	---	---	---	---	---	---	---	---	---	-----------

**NERVOUS SYSTEM**

Brain	+	+	+	+	+	+	+	+	+	+	<b>10</b>
-------	---	---	---	---	---	---	---	---	---	---	-----------

**RESPIRATORY SYSTEM**

Lung	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Nose	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Trachea	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**SPECIAL SENSES SYSTEM**

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

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

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

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

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

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
<b>FISCHER 344 RATS MALE</b>	0	0	0	0	0	0	0	0	0	0
<b>1000 PPM</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
	5	5	5	5	5	5	5	5	5	6
	1	2	3	4	5	6	7	8	9	0
	<b>* TOTALS</b>									

Eye	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Harderian Gland	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**URINARY SYSTEM**

Kidney	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Urinary Bladder	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**SYSTEMIC LESIONS**

Multiple Organ	+	+	+	+	+	+	+	+	+	+	<b>10</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

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

**ALIMENTARY SYSTEM**

Esophagus	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Liver	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Pancreas	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Salivary Glands	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	<b>10</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. 99002 - 03  
 Test Type: 90-DAY  
 Route: DOSED WATER  
 Species/Strain: RATS/F 344/N

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

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

DAY ON TEST	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	
	9	9	9	9	9	9	9	9	9	9	
	2	2	2	2	2	2	2	2	2	2	
.....											
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0	
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
VEHICLE CONTROL	0	0	0	0	0	0	0	0	0	0	
	6	6	6	6	6	6	6	6	6	7	
	1	2	3	4	5	6	7	8	9	0	
											<b>* TOTALS</b>

**CARDIOVASCULAR SYSTEM**

Blood Vessel	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Heart	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**ENDOCRINE SYSTEM**

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Parathyroid Gland	+	+	M	+	+	+	+	+	+	+	<b>9</b>
Pituitary Gland	+	+	+	+	+	+	I	+	+	+	<b>9</b>
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**GENERAL BODY SYSTEM**

NONE

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

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

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

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

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

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

**GENITAL SYSTEM**

Clitoral Gland	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Ovary	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Uterus	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**HEMATOPOIETIC SYSTEM**

Bone Marrow	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Lymph Node, Mandibular	M	M	M	M	M	M	M	M	M	M	<b>0</b>
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Spleen	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Thymus	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**INTEGUMENTARY SYSTEM**

Mammary Gland	+	+	+	+	+	+	+	I	+	+	<b>9</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. 99002 - 03  
 Test Type: 90-DAY  
 Route: DOSED WATER  
 Species/Strain: RATS/F 344/N

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

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

DAY ON TEST	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	
	9	9	9	9	9	9	9	9	9	9	
	2	2	2	2	2	2	2	2	2	2	
<b>FISCHER 344 RATS FEMALE</b>	0	0	0	0	0	0	0	0	0	0	
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	
<b>VEHICLE CONTROL</b>	0	0	0	0	0	0	0	0	0	0	
	6	6	6	6	6	6	6	6	6	7	
	1	2	3	4	5	6	7	8	9	0	
	<b>* TOTALS</b>										
Skin	+	+	+	+	+	+	+	+	+	+	<b>10</b>
<b>MUSCULOSKELETAL SYSTEM</b>											
Bone	+	+	+	+	+	+	+	+	+	+	<b>10</b>
<b>NERVOUS SYSTEM</b>											
Brain	+	+	+	+	+	+	+	+	+	+	<b>10</b>
<b>RESPIRATORY SYSTEM</b>											
Lung	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Nose	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Trachea	+	+	+	+	+	+	+	+	+	+	<b>10</b>
<b>SPECIAL SENSES SYSTEM</b>											
Eye	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Harderian Gland	+	+	+	+	+	+	+	+	+	+	<b>10</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

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

**URINARY SYSTEM**

Kidney	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Urinary Bladder	+	+	+	+	+	+	+	+	+	M	<b>9</b>

**SYSTEMIC LESIONS**

Multiple Organ	+	+	+	+	+	+	+	+	+	+	<b>10</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. 99002 - 03  
 Test Type: 90-DAY  
 Route: DOSED WATER  
 Species/Strain: RATS/F 344/N

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

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

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
10 PPM	0	0	0	0	0	0	0	0	0	0
	7	7	7	7	7	7	7	7	7	8
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

**ALIMENTARY SYSTEM**

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

**CARDIOVASCULAR SYSTEM**

NONE

**ENDOCRINE SYSTEM**

NONE

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

NONE

**HEMATOPOIETIC SYSTEM**

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

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

**INTEGUMENTARY SYSTEM**

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

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

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

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

Lab: MBA

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
<b>FISCHER 344 RATS FEMALE</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
<b>10 PPM</b>	0	0	0	0	0	0	0	0	0	0
	7	7	7	7	7	7	7	7	7	8
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

NONE

**MUSCULOSKELETAL SYSTEM**

NONE

**NERVOUS SYSTEM**

NONE

**RESPIRATORY SYSTEM**

NONE

**SPECIAL SENSES SYSTEM**

NONE

**URINARY SYSTEM**

Kidney	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

**SYSTEMIC LESIONS**

Multiple Organ	+	+	+	+	+	+	+	+	+	+
										<b>10</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

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
<b>FISCHER 344 RATS FEMALE</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
<b>30 PPM</b>	0	0	0	0	0	0	0	0	0	0
	8	8	8	8	8	8	8	8	8	9
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

**ALIMENTARY SYSTEM**

Liver	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

**CARDIOVASCULAR SYSTEM**

NONE

**ENDOCRINE SYSTEM**

NONE

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

NONE

**HEMATOPOIETIC SYSTEM**

Bone Marrow	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

Spleen	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

**INTEGUMENTARY SYSTEM**

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

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

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

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

Lab: MBA

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
<b>FISCHER 344 RATS FEMALE</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
<b>30 PPM</b>	0	0	0	0	0	0	0	0	0	0
	8	8	8	8	8	8	8	8	8	9
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

NONE

**MUSCULOSKELETAL SYSTEM**

NONE

**NERVOUS SYSTEM**

NONE

**RESPIRATORY SYSTEM**

NONE

**SPECIAL SENSES SYSTEM**

NONE

**URINARY SYSTEM**

Kidney	+	+	+	+	+	+	+	+	+	+	<b>10</b>
--------	---	---	---	---	---	---	---	---	---	---	-----------

**SYSTEMIC LESIONS**

Multiple Organ	+	+	+	+	+	+	+	+	+	+	<b>10</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. 99002 - 03  
 Test Type: 90-DAY  
 Route: DOSED WATER  
 Species/Strain: RATS/F 344/N

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

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

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
<b>FISCHER 344 RATS FEMALE</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
<b>100 PPM</b>	0	0	0	0	0	0	0	0	0	1
	9	9	9	9	9	9	9	9	9	0
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

**ALIMENTARY SYSTEM**

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

**CARDIOVASCULAR SYSTEM**

NONE

**ENDOCRINE SYSTEM**

NONE

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

NONE

**HEMATOPOIETIC SYSTEM**

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

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

**INTEGUMENTARY SYSTEM**

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

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

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

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

Lab: MBA

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
<b>FISCHER 344 RATS FEMALE</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
<b>100 PPM</b>	0	0	0	0	0	0	0	0	0	1
	9	9	9	9	9	9	9	9	9	0
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

NONE

**MUSCULOSKELETAL SYSTEM**

NONE

**NERVOUS SYSTEM**

NONE

**RESPIRATORY SYSTEM**

NONE

**SPECIAL SENSES SYSTEM**

NONE

**URINARY SYSTEM**

Kidney	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

**SYSTEMIC LESIONS**

Multiple Organ	+	+	+	+	+	+	+	+	+	+
										<b>10</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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TDMS No. 99002 - 03  
 Test Type: 90-DAY  
 Route: DOSED WATER  
 Species/Strain: RATS/F 344/N

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

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

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
300 PPM	1	1	1	1	1	1	1	1	1	1
	0	0	0	0	0	0	0	0	0	1
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

**ALIMENTARY SYSTEM**

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

**CARDIOVASCULAR SYSTEM**

NONE

**ENDOCRINE SYSTEM**

NONE

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

NONE

**HEMATOPOIETIC SYSTEM**

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

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

**INTEGUMENTARY SYSTEM**

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

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

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

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

Lab: MBA

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
300 PPM	1	1	1	1	1	1	1	1	1	1
	0	0	0	0	0	0	0	0	0	1
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

SYSTEMIC LESIONS

Multiple Organ	+	+	+	+	+	+	+	+	+	+
										<b>10</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



DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
<b>FISCHER 344 RATS FEMALE</b>	0	0	0	0	0	0	0	0	0	0
<b>1000 PPM</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	1	1	1	1	1	1	1	1	1	1
	1	1	1	1	1	1	1	1	1	2
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

**ALIMENTARY SYSTEM**

Esophagus	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Liver	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Pancreas	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Salivary Glands	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	<b>10</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. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

o-Chloropyridine

CAS Number: 109-09-1

Date Report Requested: 01/15/2009

Time Report Requested: 08:39:57

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

Lab: MBA

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
<b>FISCHER 344 RATS FEMALE</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
<b>1000 PPM</b>	1	1	1	1	1	1	1	1	1	1
	1	1	1	1	1	1	1	1	1	2
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

**CARDIOVASCULAR SYSTEM**

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

**ENDOCRINE SYSTEM**

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

**GENERAL BODY SYSTEM**

NONE

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

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

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

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

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

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
<b>FISCHER 344 RATS FEMALE</b>	0	0	0	0	0	0	0	0	0	0
<b>1000 PPM</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	1	1	1	1	1	1	1	1	1	1
	1	1	1	1	1	1	1	1	1	2
	1	2	3	4	5	6	7	8	9	0
	<b>* TOTALS</b>									

**GENITAL SYSTEM**

Clitoral Gland	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Ovary	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Uterus	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**HEMATOPOIETIC SYSTEM**

Bone Marrow	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Lymph Node, Mandibular	M	M	M	M	M	M	M	M	M	M	<b>0</b>
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Spleen	+	+	+	+	+	+	+	+	+	+	<b>10</b>
Thymus	+	+	+	+	+	+	+	+	+	+	<b>10</b>

**INTEGUMENTARY SYSTEM**

Mammary Gland	+	+	+	+	+	+	+	+	+	+	<b>10</b>
---------------	---	---	---	---	---	---	---	---	---	---	-----------

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

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

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

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
<b>FISCHER 344 RATS FEMALE</b>	0	0	0	0	0	0	0	0	0	0
<b>1000 PPM</b>	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	1	1	1	1	1	1	1	1	1	1
	1	1	1	1	1	1	1	1	1	2
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>
Skin	+	+	+	+	+	+	+	+	+	+
										<b>10</b>
<b>MUSCULOSKELETAL SYSTEM</b>										
Bone	+	+	+	+	+	+	+	+	+	+
										<b>10</b>
<b>NERVOUS SYSTEM</b>										
Brain	+	+	+	+	+	+	+	+	+	+
										<b>10</b>
<b>RESPIRATORY SYSTEM</b>										
Lung	+	+	+	+	+	+	+	+	+	+
										<b>10</b>
Nose	+	+	+	+	+	+	+	+	+	+
										<b>10</b>
Trachea	+	+	+	+	+	+	+	+	+	+
										<b>10</b>
<b>SPECIAL SENSES SYSTEM</b>										
Eye	+	+	+	+	+	+	+	+	+	+
										<b>10</b>
Harderian Gland	+	+	+	+	+	+	+	+	+	+
										<b>10</b>

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

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

DAY ON TEST	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0
	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2
.....										
FISCHER 344 RATS FEMALE	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
1000 PPM	1	1	1	1	1	1	1	1	1	1
	1	1	1	1	1	1	1	1	1	2
	1	2	3	4	5	6	7	8	9	0
										<b>* TOTALS</b>

**URINARY SYSTEM**

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

**SYSTEMIC LESIONS**

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

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

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

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