

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

P09: NON-NEOPLASTIC LESIONS 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
FISCHER 344 RATS MALE	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	0
	0	0	0	0	0	0	0	0	0	1
	1	2	3	4	5	6	7	8	9	0
	* TOTALS									

ALIMENTARY SYSTEM

Esophagus	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	10
Liver	+	+	+	+	+	+	+	+	+	+	10
Bile Duct, Hyperplasia								1			1 1.0
Pancreas	+	+	+	+	+	+	+	+	+	+	10
Salivary Glands	+		+	+	+	+	+	+	+	+	9
Parotid Gland, Basophilic Focus							X		X		2
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	10

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Page 2

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

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	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
VEHICLE CONTROL	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
	* TOTALS									

Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	10
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CARDIOVASCULAR SYSTEM

Blood Vessel	+	+	+	+	+	+	+	+	+	+	10
Heart	+	+	+	+	+	+	+	+	+	+	10
Cardiomyopathy			2					1	1	1	4 1.3
Inflammation, Chronic						2					1 2.0

ENDOCRINE SYSTEM

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	10
Zona Fasciculata, Vacuolization	1	1	1	1	1	1		1	1		9 1.0
Cytoplasmic											
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	10
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	10
Parathyroid Gland	+	+	+	+	M	+	+	+	+	+	9
Pituitary Gland	+	+	+	+	+	+	+	+	+	+	10
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	10
Cyst									X		1

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	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
Ectopic Thymus				X							1

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

Epididymis	+	+	+	+	+	+	+	+	+	+	10
Preputial Gland	+	+	+	+	+	+	+	+	+	+	10
Prostate	+	+	+	+	+	+	+	+	+	+	10
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	10
Testes	+	+	+	+	+	+	+	+	+	+	10

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+	10
Hyperplasia							1				1 1.0
Lymph Node, Mandibular	M	M	M	M	M	M	M	M	M	M	0
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	10

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	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									

Spleen	+	+	+	+	+	+	+	+	+	+	10
Congestion							1	1	1	1	4 1.0
Hematopoietic Cell Proliferation							2	1	2	2	4 1.8
Pigmentation	1	1	1	1	1	1	1	1	1	1	10 1.0
Thymus	+	+	+	+	+	+	+	+	+	+	10

INTEGUMENTARY SYSTEM

Mammary Gland	+	M	+	+	+	M	+	+	+	+	8
Skin	+	+	+	+	+	+	+	+	+	+	10

MUSCULOSKELETAL SYSTEM

Bone	+	+	+	+	+	+	+	+	+	+	10
------	---	---	---	---	---	---	---	---	---	---	-----------

NERVOUS SYSTEM

Brain	+	+	+	+	+	+	+	+	+	+	10
-------	---	---	---	---	---	---	---	---	---	---	-----------

RESPIRATORY SYSTEM

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DAY ON TEST	0	0	0	0	0	0	0	0	0	0	* TOTALS
	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	
<hr/>											
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	
<hr/>											
Lung	+	+	+	+	+	+	+	+	+	+	10
Infiltration Cellular, Mononuclear Cell, Focal										1	1 1.0
Metaplasia, Osseous							1		1		2 1.0
Alveolus, Hemorrhage, Focal						1					1 1.0
<hr/>											
Nose	+	+	+	+	+	+	+	+	+	+	10
<hr/>											
Trachea	+	+	+	+	+	+	+	+	+	+	10
<hr/>											
SPECIAL SENSES SYSTEM											
<hr/>											
Eye	+	+	+	+	+	+	+	+	+	+	10
Posterior Chamber, Developmental Malformation							X				1
<hr/>											
Harderian Gland	+	+	+	+	+	+	+	+	+	+	10
<hr/>											
URINARY SYSTEM											
<hr/>											
Kidney	+	+	+	+	+	+	+	+	+	+	10
Nephropathy			1		1		1				3 1.0
Renal Tubule, Accumulation, Hyaline Droplet	1	2	2	2	2	2	2	3	2	3	10 2.1
<hr/>											
Urinary Bladder	+	+	+	+	+	+	+	+	+	+	10
<hr/>											

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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	
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
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CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

NONE

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+	10
Spleen	+	+	+	+	+	+	+	+	+	+	10
Congestion									1		1 1.0
Hematopoietic Cell Proliferation	2	2			2	2	2	2	2		8 2.0
Pigmentation	1	1	1	1	1	1	1	1	1	1	10 1.0

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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	
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

INTEGUMENTARY SYSTEM

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+	10
Mineralization						1					1 1.0
Nephropathy				1	1						2 1.0
Renal Tubule, Accumulation, Hyaline Droplet	3	2	1	1	2	3	3	3	3	3	10 2.4

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Time Report Requested: 08:39:57

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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

FISCHER 344 RATS MALE

ANIMAL ID

30 PPM

0	0	0	0	0	0	0	0	0	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	3
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
Hyperplasia		1		1							2 1.0
Spleen	+	+	+	+	+	+	+	+	+	+	10
Congestion		1					1				2 1.0
Hematopoietic Cell Proliferation		2		2	1	2	2	2			6 1.8

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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

ANIMAL ID

30 PPM

0	0	0	0	0	0	0	0	0	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	3
1	2	3	4	5	6	7	8	9	0	

* TOTALS

Pigmentation	1	2	1	2	1	1	2	1	1	1
--------------	---	---	---	---	---	---	---	---	---	---

10 1.3

INTEGUMENTARY SYSTEM

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+
Nephropathy	1	1	1	1					1	
Renal Tubule, Accumulation, Hyaline Droplet	3	2	1	2	2	3	3	2	3	2

10

5 1.0

10 2.3

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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

ANIMAL ID

100 PPM

0	0	0	0	0	0	0	0	0	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	4
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
Hyperplasia				1							1 1.0
Spleen	+	+	+	+	+	+	+	+	+	+	10
Hematopoietic Cell Proliferation		1	2	2				2	1	2	6 1.7
Pigmentation	1	1	1	1	1	1	1	1	1	1	10 1.0

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	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

ANIMAL ID

100 PPM

0	0	0	0	0	0	0	0	0	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	4
1	2	3	4	5	6	7	8	9	0	

* TOTALS

INTEGUMENTARY SYSTEM

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+	10
Nephropathy	1			1		1	1	1		1	6 1.0
Renal Tubule, Accumulation, Hyaline Droplet	1	2	2	1		2	2	1	2	3	9 1.8

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	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

ANIMAL ID

300 PPM

0	0	0	0	0	0	0	0	0	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	5
1	2	3	4	5	6	7	8	9	0	

* TOTALS

ALIMENTARY SYSTEM

Liver	+	+	+	+	+	+	+	+	+	+
Hepatodiaphragmatic Nodule							X			
Hepatocyte, Vacuolization Cytoplasmic	1	1	1		1			1		1

10
1
6 1.0

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

NONE

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+
Hyperplasia	1	1	1		1	1	1	1	1	1
Spleen	+	+	+	+	+	+	+	+	+	+

10
9 1.0
10

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

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS 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	
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	* TOTALS
Congestion	1	1	1	1	1			1	1		7 1.0
Hematopoietic Cell Proliferation	2	2	2	2	2	2	2	2	2	2	10 2.0
Pigmentation	2	2	2	2	2	2	2	2	2	2	10 2.0

INTEGUMENTARY SYSTEM

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+	10
Nephropathy		1		1					1		3 1.0
Renal Tubule, Accumulation, Hyaline Droplet		1	1		1		1	2			5 1.2

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TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

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o-Chloropyridine

CAS Number: 109-09-1

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Lab: MBA

	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
.....										
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
										* TOTALS

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

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1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

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
1000 PPM	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
	* TOTALS									

ALIMENTARY SYSTEM

Esophagus	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	10
Liver	+	+	+	+	+	+	+	+	+	+	10
Basophilic Focus		X					X				2
Clear Cell Focus		X	X	X	X		X			X	6
Eosinophilic Focus	X										1
Hepatocyte, Vacuolization Cytoplasmic	1	2	2	2		2	1	2	2	2	9 1.8
Pancreas	+	+	+	+	+	+	+	+	+	+	10
Salivary Glands	+	+	+	+	+	+	+	+	+	+	10
Parotid Gland, Basophilic Focus	X		X	X	X		X				5

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1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

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
1000 PPM	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
	* TOTALS									

Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	10
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	10

CARDIOVASCULAR SYSTEM

Blood Vessel	+	+	+	+	+	+	+	+	+	+	10
Heart	+	+	+	+	+	+	+	+	+	+	10
Cardiomyopathy	1		1								2 1.0

ENDOCRINE SYSTEM

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	10
Zona Fasciculata, Vacuolization											5 1.0
Cytoplasmic		1		1			1			1	
Zona Reticularis, Vacuolization											2 1.0
Cytoplasmic			1		1						
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	10
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	10
Parathyroid Gland	+	+	+	M	+	+	M	+	+	M	7

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Page 17

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS 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	
1000 PPM	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	* TOTALS

Pituitary Gland	+	M	+	I	+	+	+	+	+	+	8
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	10
Ectopic Thymus	X										1

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

Epididymis	+	+	+	+	+	+	+	+	+	+	10
Preputial Gland	+	+	+	+	+	+	+	+	+	+	10
Prostate	+	+	+	+	+	+	+	+	+	+	10
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	10
Testes	+	+	+	+	+	+	+	+	+	+	10

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+	10
Hyperplasia	2	2	2	2	2	2	2	2	1	2	10 1.9

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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		
<hr/>												
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		
1000 PPM	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		
												* TOTALS
Lymph Node, Mandibular	M	M	M	+	M	M	M	M	M	M		1
Lymph Node, Mesenteric Sinus, Histiocytosis	+	+	+	+	+	+	+	+	+	+		10
				1	1							2 1.0
Spleen	+	+	+	+	+	+	+	+	+	+		10
Congestion	1	1	1	1	1	1	1	1	1	1		10 1.0
Hematopoietic Cell Proliferation	2	2	2	2	2	2	2	2	2	2		10 2.0
Pigmentation	2	2	2	2	2	2	2	2	2	2		10 2.0
Thymus	+	+	+	+	+	+	+	+	+	+		10
<hr/>												
INTEGUMENTARY SYSTEM												
Mammary Gland	+	+	+	+	+	+	M	+	+	+		9
Skin	+	+	+	+	+	+	+	+	+	+		10
<hr/>												
MUSCULOSKELETAL SYSTEM												
Bone	+	+	+	+	+	+	+	+	+	+		10
<hr/>												
NERVOUS SYSTEM												
Brain	+	+	+	+	+	+	+	+	+	+		10

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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
1000 PPM	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
										* TOTALS

RESPIRATORY SYSTEM

Lung	+	+	+	+	+	+	+	+	+	+	10
Alveolus, Hemorrhage, Focal									1		1 1.0
Nose	+	+	+	+	+	+	+	+	+	+	10
Trachea	+	+	+	+	+	+	+	+	+	+	10

SPECIAL SENSES SYSTEM

Eye	+	+	+	+	+	+	+	+	+	+	10
Harderian Gland	+	+	+	+	+	+	+	+	+	+	10

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+	10
Nephropathy		1		1				1	1		4 1.0
Urinary Bladder	+	+	+	+	+	+	+	+	+	+	10

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Page 20

1-4 .. Lesion qualified as:

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TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

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o-Chloropyridine

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

Lab: MBA

	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
.....										
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
1000 PPM	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
										* TOTALS

*** END OF MALE DATA ***

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Page 21

1-4 .. Lesion qualified as:

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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 FEMALE	0	0	0	0	0	0	0	0	0	0
VEHICLE CONTROL	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0
	6	6	6	6	6	6	6	6	7	
	1	2	3	4	5	6	7	8	9	0
										* TOTALS

ALIMENTARY SYSTEM

Esophagus	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	10
Liver	+	+	+	+	+	+	+	+	+	+	10
Pancreas	+	+	+	+	+	+	+	+	+	+	10
Duct, Hyperplasia	1										1 1.0
Salivary Glands	+	+	+	+	+	+	+	+	+	+	10
Parotid Gland, Basophilic Focus					X		X		X		3
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	10

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TDMS No. 99002 - 03
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 Route: DOSED WATER
 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	
<hr/>											
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	* TOTALS
<hr/>											
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	10
<hr/>											
CARDIOVASCULAR SYSTEM											
<hr/>											
Blood Vessel	+	+	+	+	+	+	+	+	+	+	10
<hr/>											
Heart	+	+	+	+	+	+	+	+	+	+	10
Cardiomyopathy							1				1 1.0
<hr/>											
ENDOCRINE SYSTEM											
<hr/>											
Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	10
<hr/>											
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	10
<hr/>											
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	10
<hr/>											
Parathyroid Gland	+	+	M	+	+	+	+	+	+	+	9
<hr/>											
Pituitary Gland	+	+	+	+	+	+	I	+	+	+	9
Pars Distalis, Cyst				X							1
<hr/>											
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	10
Cyst	X						X				2
Ectopic Thymus						1					1 1.0
<hr/>											

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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 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	
											* TOTALS

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

Clitoral Gland	+	+	+	+	+	+	+	+	+	+	10
Ovary	+	+	+	+	+	+	+	+	+	+	10
Uterus	+	+	+	+	+	+	+	+	+	+	10
Dilatation							2				1 2.0
Hydrometra								2			1 2.0

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+	10
Lymph Node, Mandibular	M	M	M	M	M	M	M	M	M	M	0
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	10
Sinus, Histiocytosis	1			1	1		1	1	1		6 1.0
Spleen	+	+	+	+	+	+	+	+	+	+	10
Congestion			2								1 2.0
Hematopoietic Cell Proliferation	2	2		2							3 2.0

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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 FEMALE	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	
VEHICLE CONTROL	6	6	6	6	6	6	6	6	6	7	
	1	2	3	4	5	6	7	8	9	0	* TOTALS
Pigmentation	2	2	2	2	2	2	2	2	2	2	10 2.0
Thymus	+	+	+	+	+	+	+	+	+	+	10
Thymocyte, Atrophy			1								1 1.0
INTEGUMENTARY SYSTEM											
Mammary Gland	+	+	+	+	+	+	+	I	+	+	9
Skin	+	+	+	+	+	+	+	+	+	+	10
MUSCULOSKELETAL SYSTEM											
Bone	+	+	+	+	+	+	+	+	+	+	10
NERVOUS SYSTEM											
Brain	+	+	+	+	+	+	+	+	+	+	10
RESPIRATORY SYSTEM											
Lung	+	+	+	+	+	+	+	+	+	+	10
Infiltration Cellular, Mononuclear Cell, Focal		1	1	1						1	4 1.0
Alveolus, Hemorrhage, Focal				1							1 1.0

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

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

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
VEHICLE CONTROL	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	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
	* TOTALS									

Nose	+	+	+	+	+	+	+	+	+	+	10
Trachea	+	+	+	+	+	+	+	+	+	+	10

SPECIAL SENSES SYSTEM

Eye	+	+	+	+	+	+	+	+	+	+	10
Harderian Gland	+	+	+	+	+	+	+	+	+	+	10

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+	10
Nephropathy		1	1								2 1.0
Urinary Bladder	+	+	+	+	+	+	+	+	+	M	9

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

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS 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	* 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
Congestion	1	1			1	1		2	1	2	7 1.3
Hematopoietic Cell Proliferation	1						1		2		3 1.3
Pigmentation	2	2	2	3	2	2	3	2	2	2	10 2.2

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

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Page 27

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS 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
										* TOTALS

INTEGUMENTARY SYSTEM

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney

+ + + + + + + + + +

10

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

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Page 28

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS 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	
30 PPM	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	* 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
Congestion	2	1			2	2			1		5 1.6
Hematopoietic Cell Proliferation	2		2	2			1	1		1	6 1.5
Pigmentation	2	2	3	3	2	2	2	2	2	3	10 2.3

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

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Page 29

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS 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

ANIMAL ID

30 PPM

0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0
8	8	8	8	8	8	8	8	8	8	9
1	2	3	4	5	6	7	8	9	0	

* TOTALS

INTEGUMENTARY SYSTEM

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+	10	
Mineralization			1									1 1.0
Nephropathy					1							1 1.0

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

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Page 30

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS 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	
100 PPM	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	* 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
Congestion	1		2		1	1	2	1			6 1.3
Hematopoietic Cell Proliferation			2		1			2			3 1.7
Pigmentation	2	3	2	2	2	3	3	2	2	3	10 2.4

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

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Page 31

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS 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	
100 PPM	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	* TOTALS

INTEGUMENTARY SYSTEM

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+	10
Nephropathy		1									1 1.0

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

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Page 32

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS 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	* TOTALS

ALIMENTARY SYSTEM

Liver	+	+	+	+	+	+	+	+	+	+	10
-------	---	---	---	---	---	---	---	---	---	---	-----------

CARDIOVASCULAR SYSTEM

NONE

ENDOCRINE SYSTEM

NONE

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

NONE

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+	10
Hyperplasia	1			1						1	3 1.0
Spleen	+	+	+	+	+	+	+	+	+	+	10
Congestion		1	1	1		1		1	1		6 1.0
Hematopoietic Cell Proliferation	2			2	2	2	1	1		2	7 1.7

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

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Page 33

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS 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
										* TOTALS

Pigmentation	3	2	2	2	2	2	2	2	2	3	10 2.2
--------------	---	---	---	---	---	---	---	---	---	---	---------------

INTEGUMENTARY SYSTEM

NONE

MUSCULOSKELETAL SYSTEM

NONE

NERVOUS SYSTEM

NONE

RESPIRATORY SYSTEM

NONE

SPECIAL SENSES SYSTEM

NONE

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+	10
Nephropathy				1				1			2 1.0

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

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Page 34

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

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
1000 PPM	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
										* TOTALS

ALIMENTARY SYSTEM

Esophagus	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	10
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	10
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	10
Liver	+	+	+	+	+	+	+	+	+	+	10
Clear Cell Focus							X		X		2
Hepatocyte, Vacuolization Cytoplasmic	2		2	1	1	2	1	1	1	1	9 1.3
Pancreas	+	+	+	+	+	+	+	+	+	+	10
Salivary Glands	+	+	+	+	+	+	+	+	+	+	10
Parotid Gland, Basophilic Focus		X						X			2
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	10

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

+ .. Tissue examined microscopically

x .. Lesion present

l .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

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
1000 PPM	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
										* TOTALS

Stomach, Glandular + + + + + + + + + + **10**

CARDIOVASCULAR SYSTEM

Blood Vessel + + + + + + + + + + **10**

Heart + + + + + + + + + + **10**

Epicardium, Inflammation 1 **1 1.0**

ENDOCRINE SYSTEM

Adrenal Cortex + + + + + + + + + + **10**

Infiltration Cellular, Mononuclear Cell, Focal 1 **1 1.0**

Adrenal Medulla + + + + + + + + + + **10**

Islets, Pancreatic + + + + + + + + + + **10**

Parathyroid Gland M I + + + + + + + + **8**

Pituitary Gland + + + + + + + + + + **10**

Thyroid Gland + + + + + + + + + + **10**

Cyst X **1**

* .. Total animals with tissue examined microscopically; Total animals with lesion and mean severity grade
 + .. Tissue examined microscopically
 x .. Lesion present
 I .. Insufficient tissue
 M .. Missing tissue
 A .. Autolysis precludes evaluation
 BLANK .. Not examined microscopically
 Page 36
 1-4 .. Lesion qualified as:
 1) Minimal 3) Moderate
 2) Mild 4) Marked

TDMS No. 99002 - 03

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: RATS/F 344/N

P09: NON-NEOPLASTIC LESIONS 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
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
										* TOTALS

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

Clitoral Gland	+	+	+	+	+	+	+	+	+	+	10
Ovary	+	+	+	+	+	+	+	+	+	+	10
Uterus	+	+	+	+	+	+	+	+	+	+	10
Dilatation		1		3	3						3 2.3
Hydrometra	2							1			2 1.5

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+	10
Hyperplasia	1	2	1	1	1		1	1	1	1	9 1.1
Lymph Node, Mandibular	M	M	M	M	M	M	M	M	M	M	0
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	10
Sinus, Histiocytosis			1	1					1	1	4 1.0
Spleen	+	+	+	+	+	+	+	+	+	+	10

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

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Page 37

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

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	
<hr/>											
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	* TOTALS
<hr/>											
Congestion	2	2	2	2	2	1	1	2	2	2	10 1.8
Hematopoietic Cell Proliferation	2	2	2	2	1	2	2	2	2	2	10 1.9
Pigmentation	3	3	3	3	3	3	3	3	3	3	10 3.0
<hr/>											
Thymus	+	+	+	+	+	+	+	+	+	+	10
<hr/>											
INTEGUMENTARY SYSTEM											
<hr/>											
Mammary Gland	+	+	+	+	+	+	+	+	+	+	10
<hr/>											
Skin	+	+	+	+	+	+	+	+	+	+	10
<hr/>											
MUSCULOSKELETAL SYSTEM											
<hr/>											
Bone	+	+	+	+	+	+	+	+	+	+	10
<hr/>											
NERVOUS SYSTEM											
<hr/>											
Brain	+	+	+	+	+	+	+	+	+	+	10
<hr/>											
RESPIRATORY SYSTEM											
<hr/>											
Lung	+	+	+	+	+	+	+	+	+	+	10
Infiltration Cellular, Mononuclear Cell, Focal	1	1					1				3 1.0

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

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
										* TOTALS

Nose	+	+	+	+	+	+	+	+	+	+	10
Trachea	+	+	+	+	+	+	+	+	+	+	10

SPECIAL SENSES SYSTEM

Eye	+	+	+	+	+	+	+	+	+	+	10	
Cornea, Inflammation					1							1 1.0
Sclera, Inflammation					1			1				2 1.0
Harderian Gland	+	+	+	+	+	+	+	+	+	+	10	
Infiltration Cellular, Mononuclear Cell, Focal									3			1 3.0

URINARY SYSTEM

Kidney	+	+	+	+	+	+	+	+	+	+	10	
Nephropathy			1			1		1	1	1		5 1.0
Urinary Bladder	+	+	+	+	+	+	+	+	+	+	10	

*** END OF REPORT ***

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

+ .. Tissue examined microscopically

x .. Lesion present

l .. Insufficient tissue

M .. Missing tissue

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BLANK .. Not examined microscopically

1-4 .. Lesion qualified as:

1) Minimal 3) Moderate

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