

Experiment Number: 04626-01
Test Type: 90-DAY
Route: DOSED FEED
Species/Strain: Rat/F 344/N

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Test Compound: 1,1,1-Trichloroethane
CAS Number: 71-55-6

Date Report Requested: 10/18/2014
Time Report Requested: 16:23:04
First Dose M/F: NA / NA
Lab: TSI MASON

C Number:	C04626C
Lock Date:	03/17/1992
Cage Range:	All
Date Range:	All
Reasons For Removal:	All
Removal Date Range:	All
Treatment Groups:	All
Study Gender:	Both
PWG Approval Date	NONE

Experiment Number: 04626-01

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Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:04

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Male
UNTREATD

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
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	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
Pancreas	+	+	+	+	+	+	+	+	+	+	10
Salivary Glands	+	+	+	+	+	+	+	+	+	+	10
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	10
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	10

Cardiovascular System

Heart	+	+	+	+	+	+	+	+	+	+	10
-------	---	---	---	---	---	---	---	---	---	---	----

Endocrine System

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	10
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	10
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	10
Parathyroid Gland	+	+	+	+	+	+	+	+	+	+	10
Pituitary Gland	+	+	+	+	+	+	+	+	+	+	10

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

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Test Compound: 1,1,1-Trichloroethane

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Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Male
UNTREATD

DAY ON TEST	0	0	0	0	0	0	0	0	0	0	*TOTALS
	0	0	0	0	0	0	0	0	0	0	
ANIMAL ID	9	9	9	9	9	9	9	9	9	9	
	2	2	2	2	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	1	
	1	2	3	4	5	6	7	8	9	0	
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	10
General Body System											
NONE											
Genital System											
Epididymis	+	+	+	+	+	+	+	+	+	+	10
Preputial Gland	+	+	+	+	+	+	+	+	+	+	10
Prostate	+	+	+	+	+	+	+	+	+	+	10
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	10
Testes	+	+	+	+	+	+	+	+	+	+	10
Hematopoietic System											
Bone Marrow	+	+	+	+	+	+	+	+	+	+	10
Lymph Node, Mandibular	+	+	+	+	+	+	+	+	+	+	10
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	10
Spleen	+	+	+	+	+	+	+	+	+	+	10
Thymus	+	+	+	+	+	+	+	+	+	+	10
Integumentary System											
Mammary Gland	+	+	+	+	+	+	M	M	+	+	8
Skin	+	+	+	+	+	+	+	+	+	+	10
Musculoskeletal System											
Bone	+	+	+	+	+	+	+	+	+	+	10

* ..Total animals with tissue examined microscopically; Total animals with tumor

M ..Missing tissue

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Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Male
UNTREATD

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

Nervous System

Brain + + + + + + + + + + 10

Respiratory System

Lung + + + + + + + + + + 10

Nose + + + + + + + + + + 10

Trachea + + + + + + + + + + 10

Special Senses System

NONE

Urinary System

Kidney + + + + + + + + + + 10

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

SYSTEMIC LESIONS

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

* ..Total animals with tissue examined microscopically; Total animals with tumor

+ ..Tissue examined microscopically

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First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Male
VEHICLE

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
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
	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
Pancreas	+	+	+	+	+	+	+	+	+	+	10
Salivary Glands	+	+	+	+	+	+	+	+	+	+	10
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	10
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	10

Cardiovascular System

Heart	+	+	+	+	+	+	+	+	+	+	10
-------	---	---	---	---	---	---	---	---	---	---	----

Endocrine System

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

* ..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

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P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:04

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Male
VEHICLE

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

Thyroid Gland M + + + + + + + + + 9

General Body System

NONE

Genital System

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

Hematopoietic System

Bone Marrow + + + + + + + + + 10
 Lymph Node, Mandibular + + + + + + + + + 10
 Lymph Node, Mesenteric + + + + + + + + + 10
 Spleen + + + + + + + + + 10
 Thymus + + + + + + + + + 10

Integumentary System

Mammary Gland + + M M M M + + M M 4
 Skin + + + + + + + + + 10

Musculoskeletal System

Bone + + + + + + + + + 10

* ..Total animals with tissue examined microscopically; Total animals with tumor

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Time Report Requested: 16:23:04

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Male
VEHICLE

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

Nervous System

Brain	+	+	+	+	+	+	+	+	+	+	10
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Respiratory System

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

Special Senses System

NONE

Urinary System

Kidney	+	+	+	+	+	+	+	+	+	+	10
Urinary Bladder	+	+	+	+	+	+	+	+	+	+	10

SYSTEMIC LESIONS

Multiple Organ	+	+	+	+	+	+	+	+	+	+	10
----------------	---	---	---	---	---	---	---	---	---	---	----

* ..Total animals with tissue examined microscopically; Total animals with tumor

+ ..Tissue examined microscopically

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P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:04

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Male
0.5%

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

Alimentary System

Liver + + 2

Cardiovascular System

NONE

Endocrine System

NONE

General Body System

NONE

Genital System

NONE

Hematopoietic System

NONE

Integumentary System

NONE

Musculoskeletal System

NONE

Nervous System

NONE

* ..Total animals with tissue examined microscopically; Total animals with tumor

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X ..Lesion present

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Experiment Number: 04626-01
 Test Type: 90-DAY
 Route: DOSED FEED
 Species/Strain: Rat/F 344/N

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)
 Test Compound: 1,1,1-Trichloroethane
 CAS Number: 71-55-6

Date Report Requested: 10/18/2014
 Time Report Requested: 16:23:04
 First Dose M/F: NA / NA
 Lab: TSI MASON

F 344/N Rat Male
 0.5%

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

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney	+	+	+	+	+	+	+	+	+	+	10
Urinary Bladder					+						1

SYSTEMIC LESIONS

Multiple Organ	+	+	+	+	+	+	+	+	+	+	10
----------------	---	---	---	---	---	---	---	---	---	---	----

* ..Total animals with tissue examined microscopically; Total animals with tumor
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Test Compound: 1,1,1-Trichloroethane

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Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Male
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
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
	3	3	3	3	3	3	3	3	3	4
	1	2	3	4	5	6	7	8	9	0
	*TOTALS									

Alimentary System

Liver + + 2

Cardiovascular System

NONE

Endocrine System

NONE

General Body System

NONE

Genital System

NONE

Hematopoietic System

Bone Marrow + + + + 4

Integumentary System

NONE

Musculoskeletal System

Bone + + + + 4

Nervous System

NONE

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 First Dose M/F: NA / NA
 Lab: TSI MASON

F 344/N Rat Male
 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	0	0
	9	9	9	9	9	9	9	9	9	9	9
	2	2	2	2	2	2	2	2	2	2	2
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
	3	3	3	3	3	3	3	3	3	3	4
	1	2	3	4	5	6	7	8	9	0	
	*TOTALS										

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney	+	+	+	+	+	+	+	+	+	+	10
Urinary Bladder								+			1

SYSTEMIC LESIONS

Multiple Organ	+	+	+	+	+	+	+	+	+	+	10
----------------	---	---	---	---	---	---	---	---	---	---	----

* ..Total animals with tissue examined microscopically; Total animals with tumor
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Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:04

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Male
2.0%

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

*TOTALS

Alimentary System

Mesentery + 1

Cardiovascular System

NONE

Endocrine System

NONE

General Body System

NONE

Genital System

NONE

Hematopoietic System

NONE

Integumentary System

NONE

Musculoskeletal System

NONE

Nervous System

NONE

* ..Total animals with tissue examined microscopically; Total animals with tumor

M ..Missing tissue

+ ..Tissue examined microscopically

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 First Dose M/F: NA / NA
 Lab: TSI MASON

F 344/N Rat Male
 2.0%

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

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney

+ + + + + + + + + + 10

SYSTEMIC LESIONS

Multiple Organ

+ + + + + + + + + + 10

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:04

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Male
4.0%

| | | | | | | | | | | |
|-------------|---------|---|---|---|---|---|---|---|---|---|
| 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 |
| 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 |
| | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |
| | *TOTALS | | | | | | | | | |

Alimentary System

NONE

Cardiovascular System

NONE

Endocrine System

NONE

General Body System

NONE

Genital System

NONE

Hematopoietic System

NONE

Integumentary System

NONE

Musculoskeletal System

NONE

Nervous System

NONE

* ..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

Experiment Number: 04626-01
 Test Type: 90-DAY
 Route: DOSED FEED
 Species/Strain: Rat/F 344/N

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)
 Test Compound: 1,1,1-Trichloroethane
 CAS Number: 71-55-6

Date Report Requested: 10/18/2014
 Time Report Requested: 16:23:04
 First Dose M/F: NA / NA
 Lab: TSI MASON

F 344/N Rat Male
 4.0%

| 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 |
| | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| 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 |
| | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | |
| | *TOTALS | | | | | | | | | | |

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney

+ + + + + + + + + + 10

SYSTEMIC LESIONS

Multiple Organ

+ + + + + + + + + + 10

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:04

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Male
8.0%

| 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 |
| 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 |
| | 6 | 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 |
| Salivary Glands | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Glandular | + | + | + | + | + | + | + | + | + | + | 10 |

Cardiovascular System

| | | | | | | | | | | | |
|-------|---|---|---|---|---|---|---|---|---|---|----|
| Heart | + | + | + | + | + | + | + | + | + | + | 10 |
|-------|---|---|---|---|---|---|---|---|---|---|----|

Endocrine System

| | | | | | | | | | | | |
|--------------------|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex | + | + | + | + | + | + | + | + | + | + | 10 |
| Adrenal Medulla | + | + | + | + | + | + | + | + | + | + | 10 |
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | 10 |
| Parathyroid Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Pituitary Gland | + | + | + | + | + | + | + | + | + | + | 10 |

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:05

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Male
8.0%

| DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *TOTALS |
|-------------------------------|---|---|---|---|---|---|---|---|---|---|---------|
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| ANIMAL ID | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | |
| | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | |
| Thyroid Gland | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 10 |
| General Body System | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| NONE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Genital System | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | |
| Epididymis | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 10 |
| Preputial Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Prostate | + | + | + | + | + | + | + | + | + | + | 10 |
| Seminal Vesicle | + | + | + | + | + | + | + | + | + | + | 10 |
| Testes | + | + | + | + | + | + | + | + | + | + | 10 |
| Hematopoietic System | | | | | | | | | | | |
| Bone Marrow | + | + | + | + | + | + | + | + | + | + | 10 |
| Lymph Node, Mandibular | + | + | + | + | + | + | + | + | + | + | 10 |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | 10 |
| Spleen | + | + | + | + | + | + | + | + | + | + | 10 |
| Thymus | + | + | + | + | + | + | + | + | + | + | 10 |
| Integumentary System | | | | | | | | | | | |
| Mammary Gland | + | M | M | M | + | + | + | + | M | + | 6 |
| Skin | + | + | + | + | + | + | + | + | + | + | 10 |
| Musculoskeletal System | | | | | | | | | | | |
| Bone | + | + | + | + | + | + | + | + | + | + | 10 |

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:05

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Male
8.0%

| 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 |
| 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 |
| | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |
| | *TOTALS | | | | | | | | | |

Nervous System

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

Respiratory System

| | | | | | | | | | | | |
|------|---|---|---|---|---|---|---|---|---|---|----|
| Lung | + | + | + | + | + | + | + | + | + | + | 10 |
|------|---|---|---|---|---|---|---|---|---|---|----|

| | | | | | | | | | | | |
|------|---|---|---|---|---|---|---|---|---|---|----|
| Nose | + | + | + | + | + | + | + | + | + | + | 10 |
|------|---|---|---|---|---|---|---|---|---|---|----|

| | | | | | | | | | | | |
|---------|---|---|---|---|---|---|---|---|---|---|----|
| Trachea | + | + | + | + | + | + | + | + | + | + | 10 |
|---------|---|---|---|---|---|---|---|---|---|---|----|

Special Senses System

NONE

Urinary System

| | | | | | | | | | | | |
|--------|---|---|---|---|---|---|---|---|---|---|----|
| Kidney | + | + | + | + | + | + | + | + | + | + | 10 |
|--------|---|---|---|---|---|---|---|---|---|---|----|

| | | | | | | | | | | | |
|-----------------|---|---|---|---|---|---|---|---|---|---|----|
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | 10 |
|-----------------|---|---|---|---|---|---|---|---|---|---|----|

SYSTEMIC LESIONS

| | | | | | | | | | | | |
|----------------|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ | + | + | + | + | + | + | + | + | + | + | 10 |
|----------------|---|---|---|---|---|---|---|---|---|---|----|

END OF MALE DATA

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:05

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

| | | | | | | | | | | | | |
|--------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---------|
| F 344/N Rat Female
UNTREATD | 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 | |
| | 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 | | |
| | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | | |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | | |

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 |
| Salivary Glands | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Glandular | + | + | + | + | + | + | + | + | + | + | 10 |

Cardiovascular System

| | | | | | | | | | | | |
|-------|---|---|---|---|---|---|---|---|---|---|----|
| Heart | + | + | + | + | + | + | + | + | + | + | 10 |
|-------|---|---|---|---|---|---|---|---|---|---|----|

Endocrine System

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

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:05

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Female
UNTREATD

| DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *TOTALS |
|-------------------------------|---|---|---|---|---|---|---|---|---|---|---------|
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| ANIMAL ID | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | |
| | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | |
| Thyroid Gland | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 10 |
| General Body System | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| NONE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Genital System | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Clitoral Gland | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | 10 |
| Ovary | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 10 |
| Uterus | | | | | | | | | | | 10 |
| Hematopoietic System | | | | | | | | | | | |
| Bone Marrow | + | + | + | + | + | + | + | + | + | + | 10 |
| Lymph Node, Mandibular | + | + | + | + | + | + | + | + | + | + | 10 |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | 10 |
| Spleen | + | + | + | + | + | + | + | + | + | + | 10 |
| Thymus | + | + | + | + | + | + | + | + | + | + | 10 |
| Integumentary System | | | | | | | | | | | |
| Mammary Gland | M | + | + | + | + | + | + | + | + | + | 9 |
| Skin | + | + | + | + | + | + | + | + | + | + | 10 |
| Musculoskeletal System | | | | | | | | | | | |
| Bone | + | + | + | + | + | + | + | + | + | + | 10 |
| Nervous System | | | | | | | | | | | |

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

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Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:05

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Female
UNTREATD

| | DAY ON TEST | | | | | | | | | | *TOTALS |
|------------------------------|-------------|---|---|---|---|---|---|---|---|---|---------|
| | 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 | |
| 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 | |
| | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | |
| Brain | + | + | + | + | + | + | + | + | + | + | 10 |
| Respiratory System | | | | | | | | | | | |
| Lung | + | + | + | + | + | + | + | + | + | + | 10 |
| Nose | + | + | + | + | + | + | + | + | + | + | 10 |
| Trachea | + | + | + | + | + | + | + | + | + | + | 10 |
| Special Senses System | | | | | | | | | | | |
| NONE | | | | | | | | | | | |
| Urinary System | | | | | | | | | | | |
| Kidney | + | + | + | + | + | + | + | + | + | + | 10 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | M | 9 |
| SYSTEMIC LESIONS | | | | | | | | | | | |
| Multiple Organ | + | + | + | + | + | + | + | + | + | + | 10 |

* ..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

Experiment Number: 04626-01

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Time Report Requested: 16:23:05

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

| F 344/N Rat Female
VEHICLE | 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 | 9 |
| | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| 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 |
| | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 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 |
| Salivary Glands | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Glandular | + | + | + | + | + | + | + | + | + | + | 10 |

Cardiovascular System

| | | | | | | | | | | | |
|-------|---|---|---|---|---|---|---|---|---|---|----|
| Heart | + | + | + | + | + | + | + | + | + | + | 10 |
|-------|---|---|---|---|---|---|---|---|---|---|----|

Endocrine System

| | | | | | | | | | | | |
|--------------------|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex | + | + | + | + | + | + | + | + | + | + | 10 |
| Adrenal Medulla | + | + | + | + | + | + | + | + | + | + | 10 |
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | 10 |
| Parathyroid Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Pituitary Gland | + | + | + | + | + | + | + | + | + | + | 10 |

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:05

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

| F 344/N Rat Female
VEHICLE | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *TOTALS |
|-------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---------|
| | ANIMAL ID | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Thyroid Gland | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 10 |
| General Body System | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| NONE | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Genital System | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Clitoral Gland | | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 10 |
| Ovary | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 10 |
| Uterus | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 10 |
| Hematopoietic System | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Bone Marrow | | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 10 |
| Lymph Node, Mandibular | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 10 |
| Lymph Node, Mesenteric | | + | + | + | + | + | + | + | + | + | + | 10 |
| Spleen | | + | + | + | + | + | + | + | + | + | + | 10 |
| Thymus | | + | + | + | + | + | + | + | + | + | + | 10 |
| Integumentary System | | + | + | + | + | + | + | + | + | + | + | |
| Mammary Gland | | + | + | + | + | + | M | + | + | + | | 9 |
| Skin | | + | + | + | + | + | + | + | + | + | | 10 |
| Musculoskeletal System | | + | + | + | + | + | + | + | + | + | | |
| Bone | | + | + | + | + | + | + | + | + | + | | 10 |
| Nervous System | | | | | | | | | | | | |

* ..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

Experiment Number: 04626-01
 Test Type: 90-DAY
 Route: DOSED FEED
 Species/Strain: Rat/F 344/N

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)
 Test Compound: 1,1,1-Trichloroethane
 CAS Number: 71-55-6

Date Report Requested: 10/18/2014
 Time Report Requested: 16:23:05
 First Dose M/F: NA / NA
 Lab: TSI MASON

**F 344/N Rat Female
 VEHICLE**

| 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 |
| | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| 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 |
| | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 8 | 9 | 0 |
| | *TOTALS | | | | | | | | | | |

| | | | | | | | | | | | |
|------------------------------|---|---|---|---|---|---|---|---|---|---|----|
| Brain | + | + | + | + | + | + | + | + | + | + | 10 |
| Respiratory System | | | | | | | | | | | |
| Lung | + | + | + | + | + | + | + | + | + | + | 10 |
| Nose | + | + | + | + | + | + | + | + | + | + | 10 |
| Trachea | + | + | + | + | + | + | + | + | + | + | 10 |
| Special Senses System | | | | | | | | | | | |
| NONE | | | | | | | | | | | |
| Urinary System | | | | | | | | | | | |
| Kidney | + | + | + | + | + | + | + | + | + | + | 10 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | 10 |
| SYSTEMIC LESIONS | | | | | | | | | | | |
| Multiple Organ | + | + | + | + | + | + | + | + | + | + | 10 |

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:05

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Female
0.5%

| | | | | | | | | | | |
|-------------|---------|---|---|---|---|---|---|---|---|---|
| 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 |
| 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 | 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 + 1

Cardiovascular System

NONE

Endocrine System

NONE

General Body System

NONE

Genital System

Clitoral Gland + 1

Uterus + 1

Hematopoietic System

NONE

Integumentary System

NONE

Musculoskeletal System

NONE

Nervous System

* ..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

Experiment Number: 04626-01
 Test Type: 90-DAY
 Route: DOSED FEED
 Species/Strain: Rat/F 344/N

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)
 Test Compound: 1,1,1-Trichloroethane
 CAS Number: 71-55-6

Date Report Requested: 10/18/2014
 Time Report Requested: 16:23:05
 First Dose M/F: NA / NA
 Lab: TSI MASON

F 344/N Rat Female
 0.5%

| 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 |
| | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| 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 | 1 |
| | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 9 | 0 |
| | *TOTALS | | | | | | | | | | |

NONE
Respiratory System

NONE
Special Senses System

NONE
Urinary System

Kidney + + + + + + + + + + 10
SYSTEMIC LESIONS

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

* ..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

Experiment Number: 04626-01
 Test Type: 90-DAY
 Route: DOSED FEED
 Species/Strain: Rat/F 344/N

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)
 Test Compound: 1,1,1-Trichloroethane
 CAS Number: 71-55-6

Date Report Requested: 10/18/2014
 Time Report Requested: 16:23:05
 First Dose M/F: NA / NA
 Lab: TSI MASON

F 344/N Rat Female
 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 | 0 | 0 |
| | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| ANIMAL ID | 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 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | |

*TOTALS

Alimentary System

NONE

Cardiovascular System

NONE

Endocrine System

NONE

General Body System

NONE

Genital System

NONE

Hematopoietic System

Lymph Node

+ 1

Integumentary System

NONE

Musculoskeletal System

NONE

Nervous 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

Experiment Number: 04626-01
 Test Type: 90-DAY
 Route: DOSED FEED
 Species/Strain: Rat/F 344/N

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)
 Test Compound: 1,1,1-Trichloroethane
 CAS Number: 71-55-6

Date Report Requested: 10/18/2014
 Time Report Requested: 16:23:05
 First Dose M/F: NA / NA
 Lab: TSI MASON

F 344/N Rat Female
 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 | 0 | 0 |
| | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| ANIMAL ID | 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 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | |

*TOTALS

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney

+ + + + + + + + + + 10

SYSTEMIC LESIONS

Multiple Organ

+ + + + + + + + + + 10

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:05

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Female
2.0%

| | | | | | | | | | | |
|-------------|---------|---|---|---|---|---|---|---|---|---|
| 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 |
| ANIMAL ID | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |
| | *TOTALS | | | | | | | | | |

Alimentary System

Liver + + 2

Cardiovascular System

NONE

Endocrine System

NONE

General Body System

NONE

Genital System

NONE

Hematopoietic System

Lymph Node, Mandibular + 1

Integumentary System

NONE

Musculoskeletal System

NONE

Nervous System

NONE

* ..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

Experiment Number: 04626-01
 Test Type: 90-DAY
 Route: DOSED FEED
 Species/Strain: Rat/F 344/N

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)
 Test Compound: 1,1,1-Trichloroethane
 CAS Number: 71-55-6

Date Report Requested: 10/18/2014
 Time Report Requested: 16:23:05
 First Dose M/F: NA / NA
 Lab: TSI MASON

**F 344/N Rat Female
 2.0%**

| 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 |
| | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| ANIMAL ID | 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 | 2 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | |
| | *TOTALS | | | | | | | | | | |

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney

+ + + + + + + + + + 10

SYSTEMIC LESIONS

Multiple Organ

+ + + + + + + + + + 10

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:05

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Female
4.0%

| | | | | | | | | | | |
|-------------|---------|---|---|---|---|---|---|---|---|---|
| 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 |
| ANIMAL ID | 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 |
| | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |
| | *TOTALS | | | | | | | | | |

Alimentary System

Intestine Large, Cecum + 1

Cardiovascular System

NONE

Endocrine System

NONE

General Body System

NONE

Genital System

Uterus + + + 3

Hematopoietic System

Spleen + 1

Integumentary System

NONE

Musculoskeletal System

NONE

Nervous System

NONE

* ..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

Experiment Number: 04626-01
 Test Type: 90-DAY
 Route: DOSED FEED
 Species/Strain: Rat/F 344/N

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)
 Test Compound: 1,1,1-Trichloroethane
 CAS Number: 71-55-6

Date Report Requested: 10/18/2014
 Time Report Requested: 16:23:05
 First Dose M/F: NA / NA
 Lab: TSI MASON

F 344/N Rat Female
 4.0%

| 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 |
| | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| ANIMAL ID | 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 |
| | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 |

*TOTALS

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney

+ + + + + + + + + + 10

SYSTEMIC LESIONS

Multiple Organ

+ + + + + + + + + + 10

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:05

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Female
8.0%

| 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 |
| ANIMAL ID | 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 |
| | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 |
| | 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 |
| Salivary Glands | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Glandular | + | + | + | + | + | + | + | + | + | + | 10 |

Cardiovascular System

| | | | | | | | | | | | |
|-------|---|---|---|---|---|---|---|---|---|---|----|
| Heart | + | + | + | + | + | + | + | + | + | + | 10 |
|-------|---|---|---|---|---|---|---|---|---|---|----|

Endocrine System

| | | | | | | | | | | | |
|--------------------|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex | + | + | + | + | + | + | + | + | + | + | 10 |
| Adrenal Medulla | + | + | + | + | + | + | + | + | + | + | 10 |
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | 10 |
| Parathyroid Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Pituitary Gland | + | + | + | + | + | + | + | + | + | + | 10 |

* ..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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:05

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Female
8.0%

| 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 | |
| ANIMAL ID | 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 | |
| | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | *TOTALS |
| Thyroid Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| General Body System | | | | | | | | | | | |
| NONE | | | | | | | | | | | |
| Genital System | | | | | | | | | | | |
| Clitoral Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Ovary | + | + | + | + | + | + | + | + | + | + | 10 |
| Uterus | + | + | + | + | + | + | + | + | + | + | 10 |
| Hematopoietic System | | | | | | | | | | | |
| Bone Marrow | + | + | + | + | + | + | + | + | + | + | 10 |
| Lymph Node, Mandibular | + | + | + | + | + | + | + | + | + | + | 10 |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | 10 |
| Spleen | + | + | + | + | + | + | + | + | + | + | 10 |
| Thymus | + | + | + | + | + | + | + | + | + | + | 10 |
| Integumentary System | | | | | | | | | | | |
| Mammary Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Skin | + | + | + | + | + | + | + | + | + | + | 10 |
| Musculoskeletal System | | | | | | | | | | | |
| Bone | + | + | + | + | + | + | + | + | + | + | 10 |
| Skeletal Muscle | | | | | | | | | | + | 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

Experiment Number: 04626-01

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/18/2014

Test Type: 90-DAY

Test Compound: 1,1,1-Trichloroethane

Time Report Requested: 16:23:06

Route: DOSED FEED

CAS Number: 71-55-6

First Dose M/F: NA / NA

Species/Strain: Rat/F 344/N

Lab: TSI MASON

F 344/N Rat Female
8.0%

| 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 |
| ANIMAL ID | 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 |
| | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |

*TOTALS

Nervous System

| | | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|----|
| Brain | + | + | + | + | + | + | + | + | + | + | 10 |
| Spinal Cord | | | | | | | | | | + | 1 |

Respiratory System

| | | | | | | | | | | | |
|---------|---|---|---|---|---|---|---|---|---|---|----|
| Lung | + | + | + | + | + | + | + | + | + | + | 10 |
| Nose | + | + | + | + | + | + | + | + | + | + | 10 |
| Trachea | + | + | + | + | + | + | + | + | + | + | 10 |

Special Senses System

NONE

Urinary System

| | | | | | | | | | | | |
|-----------------|---|---|---|---|---|---|---|---|---|---|----|
| Kidney | + | + | + | + | + | + | + | + | + | + | 10 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | 10 |

SYSTEMIC LESIONS

| | | | | | | | | | | | |
|----------------|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ | + | + | + | + | + | + | + | + | + | + | 10 |
|----------------|---|---|---|---|---|---|---|---|---|---|----|

** END OF REPORT **

* ..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