

**Experiment Number:** 99920-96

**Test Type:** SPECIAL STUDY

**Route:** DOSED FEED

**Species/Strain:** Rat/CD

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

**Test Compound:** ENDOCRINE DISRUPTOR(Ethiny Estradiol)

**CAS Number:** 57-63-6

**Date Report Requested:** 10/23/2014

**Time Report Requested:** 11:59:34

**First Dose M/F:** NA / NA

**Lab:** NCTR

**C Number:** MG96006  
**Lock Date:** Not Entered.  
**Cage Range:** All  
**Date Range:** All  
**Reasons For Removal:** All  
**Removal Date Range:** All  
**Treatment Groups:** All  
**Study Gender:** Both  
**PWG Approval Date** NONE





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CAS Number: 57-63-6

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**First Dose M/F:** NA / NA

## **Lab: NCTR**

DAY ON TEST	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	7	7	7	7	7	7	7	7	8	8	8	8	8	8	8	8	8	7	7	7	8	8	8
	3	3	3	3	4	4	8	8	8	2	2	2	7	7	7	7	8	8	8	2	2	7	2
	6	7	8	9	0	1	3	4	5	6	7	8	1	2	4	5	6	1	2	6	4	9	3

## Alimentary System

NONE

## **Cardiovascular System**

NONE

## **Endocrine System**

NONE

## General Body System

NONE

## **Genital System**

## Hematopoietic System

NONE

## **Integumentary System**

\* ..Total animals with tissue examined microscopically: Total animals with tumor

± ..Tissue examined microscopically

X ..Lesion present

| ..Insufficient tissue

### M ..Missing tissue

A ..Autolysis precludes evaluation

BLANK ..Not examined microscopically



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**Time Report Requested:** 11:59:34

**First Dose M/F:** NA / NA

Lab: NCTR

## Alimentary System

Liver

+

1

## **Cardiovascular System**

NONE

## **Endocrine System**

NONE

## **General Body System**

NONE

## **Genital System**

## Hematopoietic 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

#### | Insufficient tissue





Experiment Number: 99920-96

Test Type: SPECIAL STUDY

Route: DOSED FEED

Species/Strain: Rat/CD

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

Test Compound: ENDOCRINE DISRUPTOR(Ethynodiol Estradiol)

CAS Number: 57-63-6

Date Report Requested: 10/23/2014

Time Report Requested: 11:59:35

First Dose M/F: NA / NA

Lab: NCTR

**CD Rat Male  
F3/50PPB TO CTRL**

	DAY ON TEST	ANIMAL ID																				*TOTALS	
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	
	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2	3	
Testes	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	25	
<b>Hematopoietic System</b>																							
Bone Marrow	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	25	
Spleen	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	25	
Thymus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	25	
<b>Integumentary System</b>																							
Mammary Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	24	
<b>Musculoskeletal System</b>																							
Bone	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	25	
<b>Nervous System</b>																							
NONE																							
<b>Respiratory System</b>																							
NONE																							
<b>Special Senses System</b>																							
NONE																							
<b>Urinary System</b>																							
Kidney	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	25	
<b>SYSTEMIC LESIONS</b>																							

\* ..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: 99920-96

Test Type: SPECIAL STUDY

Route: DOSED FEED

Species/Strain: Rat/CD

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

Test Compound: ENDOCRINE DISRUPTOR(Ethynodiol Diacetate)

CAS Number: 57-63-6

Date Report Requested: 10/23/2014

Time Report Requested: 11:59:35

First Dose M/F: NA / NA

Lab: NCTR

CD Rat Male  
F3/50PPB TO CTRL

DAY ON TEST	CD Rat Male F3/50PPB TO CTRL																									
	Multiple Organ																									
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
1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2	2	2	3
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	7	7	7	7	7	7	7	7	7	7	7	8	8	8	8	8	8	8	7	7	8	8	8	8	8	8
4	4	4	4	4	5	5	5	5	9	9	9	9	3	3	4	8	8	8	9	9	3	3	4	8	8	8
6	7	8	9	0	1	2	3	4	5	6	8	9	0	5	7	8	1	2	6	7	1	4	6	9		

\*TOTALS

25

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

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

+ ..Tissue examined microscopically

X ..Lesion present

I ..Insufficient tissue

M ..Missing tissue

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BLANK ..Not examined microscopically



**Experiment Number:** 99920-96

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

**Date Report Requested:** 10/23/2014

**Test Type:** SPECIAL STUDY

### **Test Compound: ENDOCRINE DISRUPTOR(Ethinyl Estradiol)**

**Time Report Requested:** 11:59:35

## **Route: DOSED FEED**

**CAS Number:** 57-63-6

**First Dose M/F:** NA / NA

**Species/Strain:** Rat/CD

Lab: NCTR

\* ..Total animals with tissue examined microscopically: Total animals with tumor

M ..Missing tissue

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#### A ..Autolysis precludes evaluation

X - Lesion present

BLANK - Not examined microscopically

#### I Insufficient tissue



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**First Dose M/F:** NA / NA

Lab: NCTR

## **Musculoskeletal System**

NONE

## **Nervous System**

**NONE**

## Respiratory System

NONE

## Special Senses System

NONE

## Urinary System

Kidney

## **SYSTEMIC LESIONS**

## Multiple Organ

\* 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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Test Type: SPECIAL STUDY

Route: DOSED FEED

Species/Strain: Rat/CD

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

Test Compound: ENDOCRINE DISRUPTOR(Ethynodiol Diacetate)

CAS Number: 57-63-6

Date Report Requested: 10/23/2014

Time Report Requested: 11:59:35

First Dose M/F: NA / NA

Lab: NCTR

**CD Rat Female**  
**F3/10PPB TO CTRL**

DAY ON TEST																				
	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
5	5	5	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
9	9	9	0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	5	5
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	7	7	7	7	7	7	8	8	8	8	7	7	7	8	8	8	8	8	8	8
2	2	2	6	6	6	6	0	1	1	1	1	2	2	0	5	5	5	5	9	9
2	3	5	6	7	8	9	9	0	1	2	9	0	1	8	3	4	5	6	7	8

\*TOTALS

**Alimentary System**

NONE

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

Ovary

+ + + + + + + + + + + + + + + + + + M + + + + + + 24

Oviduct

+ + + + + + + + + + + + + + + + + + M + + + + + + 24

Uterus

+ 25

Vagina

+ 25

**Hematopoietic System**

NONE

**Integumentary System**

Mammary Gland

+ 25

**Musculoskeletal System**

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

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Route: DOSED FEED

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CAS Number: 57-63-6

Date Report Requested: 10/23/2014

Time Report Requested: 11:59:36

First Dose M/F: NA / NA

Lab: NCTR

**CD Rat Female**  
**F3/50PPB TO CTRL**

|                               | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | *TOTALS |   |
|-------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|---|
|                               |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 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 | 1 | 1 | 1       |   |
|                               | 6           | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6       |   |
|                               | 0           | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2       | 5 |
| Thymus                        | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 25      |   |
| <b>Integumentary System</b>   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |   |
| Mammary Gland                 | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 25      |   |
| Skin                          |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         | 1 |
| <b>Musculoskeletal System</b> |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |   |
| Bone                          | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 25      |   |
| <b>Nervous System</b>         |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |   |
| NONE                          |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |   |
| <b>Respiratory System</b>     |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |   |
| NONE                          |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |   |
| <b>Special Senses System</b>  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |   |
| NONE                          |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |   |
| <b>Urinary System</b>         |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |   |
| Kidney                        | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 25      |   |
| <b>SYSTEMIC LESIONS</b>       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |   |
| Multiple Organ                | +           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 25      |   |

\*\* 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