

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:38

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

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First Dose M/F: NA / NA

Lab: TSI MASON

**F 344/N Rat Male
UNTREATD**

DAY ON TEST										
	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	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
Acinus, Atrophy					2						1 2.0
Salivary Glands	+	+	+	+	+	+	+	+	+	+	10
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	10
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	10

Cardiovascular System

Heart	+	+	+	+	+	+	+	+	+	+	10
Cardiomyopathy	1	1	1	1	1	1	1	1	1	1	9 1.0

Endocrine System

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	10
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	10
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	10

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

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Lab: TSI MASON

F 344/N Rat Male
UNTREATD

	DAY ON TEST										
		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	1
	1	2	3	4	5	6	7	8	9	0	*TOTALS
Parathyroid Gland	+	+	+	+	+	+	+	+	+	+	10
Pituitary Gland	+	+	+	+	+	+	+	+	+	+	10
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

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

*TOTALS

Musculoskeletal System

Bone + + + + + + + + + + 10

Nervous System

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

Respiratory System

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

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

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

Special Senses System

NONE

Urinary System

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

Cortex, Mineralization + + + + + + + + + + 1 1 2 1.0

Renal Tubule, Regeneration 1 1 1 1 1 1 1 1 1 1 10 1.0

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

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

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Lab: TSI MASON

F 344/N Rat Male
VEHICLE

DAY ON TEST										
	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	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
	0	0	0	0	0	0	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
Hepatodiaphragmatic Nodule	X										1
Pancreas	+	+	+	+	+	+	+	+	+	+	10
Acinus, Atrophy											1
Salivary Glands	+	+	+	+	+	+	+	+	+	+	10
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	10
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	10

Cardiovascular System

Heart	+	+	+	+	+	+	+	+	+	+	10
Cardiomyopathy	1	1	1	1	1	1	2	1	2	2	9 1.3

Endocrine System

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	10
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	10

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

+ ..Tissue examined microscopically

M ..Missing tissue

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CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:39

First Dose M/F: NA / NA

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										
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 0											
	1 1 1 1 1 1 1 1 1 2											
	1 2 3 4 5 6 7 8 9 0											
		*TOTALS										
Islets, Pancreatic		+	+	+	+	+	+	+	+	+	+	10
Parathyroid Gland		M	+	+	+	+	+	+	+	+	+	9
Pituitary Gland		+	+	+	+	+	+	+	+	+	+	10
Thyroid Gland		M	+	+	+	+	+	+	+	+	+	9
General Body System												
NONE												
Genital System												
Epididymis		+	+	+	+	+	+	+	+	+	+	10
Preputial Gland		+	+	+	+	+	+	+	+	+	+	10
Inflammation, Acute								2		1	2.0	
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

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

+ ..Tissue examined microscopically

M ..Missing tissue

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First Dose M/F: NA / NA

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																			
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 0																				
	1 1 1 1 1 1 1 1 1 2																				
	1 2 3 4 5 6 7 8 9 0																				
		*TOTALS																			
	Mammary Gland	+ + M M M M + + M M																			
	Skin	+ + + + + + + + + +																			
Musculoskeletal System																					
Bone	+ + + + + + + + + +																				
		10																			
Nervous System																					
Brain	+ + + + + + + + + +																				
		10																			
Hemorrhage		1																			
		1 1.0																			
Respiratory System																					
Lung	+ + + + + + + + + +																				
		10																			
Nose	+ + + + + + + + + +																				
		10																			
Trachea	+ + + + + + + + + +																				
		10																			
Special Senses System																					
NONE																					
Urinary System																					
Kidney	+ + + + + + + + + +																				
		10																			
Cortex, Mineralization		1 1																			
		2 1.0																			
Renal Tubule, Regeneration	1 1 2 1 1 1 1 1 1 2																				
		10 1.2																			
Urinary Bladder	+ + + + + + + + + +																				
		10																			
Calculus Gross Observation	X																				
		2																			
Calculus Micro Observation Only	X																				
		1																			

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

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Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:39

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

*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

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M ..Missing tissue

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Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Time Report Requested: 16:24:39

First Dose M/F: NA / NA

Lab: TSI MASON

F 344/N Rat Male

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney

Renal Tubule, Regeneration

Urinary Bladder

Calculus Gross Observation

Calculus Micro Observation Only

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

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M ..Missing tissue

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CAS Number: 71-55-6

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Time Report Requested: 16:24:39

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
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
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	+	+	2
Cytoplasmic Alteration	1	1	1.0
Hepatodiaphragmatic Nodule	X	1	

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
------	---	---	---	---	---

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F 344/N Rat Male
1.0%

DAY ON TEST										
	0	0	0	0	0	0	0	0	0	0
ANIMAL ID	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
	0	0	0	0	0	0	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

Nervous System

NONE

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney

+ + + + + + + + + + 10

Inflammation, Chronic

1 1 1.0

Renal Tubule, Regeneration

1 1 1 1 2 2 2 2 2 1 10 1.5

Urinary Bladder

+ 1

Calculus Gross Observation

X 1

Calculus Micro Observation Only

X 1

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Time Report Requested: 16:24:39

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 |
| | 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 |
| Fat, Hemorrhage | 4 | 1 4.0 |

Cardiovascular System

NONE

Endocrine System

NONE

General Body System

NONE

Genital System

NONE

Hematopoietic System

NONE

Integumentary System

NONE

Musculoskeletal System

NONE

Nervous System

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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 |
| ANIMAL ID | 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 |
| | 0 | 0 | 0 | 0 | 0 | 0 | 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

NONE

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney

+ + + + + + + + + + 10

Inflammation, Chronic

1 1 1 1 1 1 1 1 1 7 1.0

Renal Tubule, Casts

1 1 1 1 1 1 1 1 1 1 1.0

Renal Tubule, Degeneration, Hyaline

1 1 1 1 1 1 2 1 2 1 10 1.2

Renal Tubule, Regeneration

2 2 2 2 1 2 2 1 2 2 10 1.8

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:39

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 |
| ANIMAL ID | 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 |
| | 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 lesion and mean severity grade

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

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Experiment Number: 04626-01

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Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

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Time Report Requested: 16:24:39

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 |
| 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 |
| 5 | 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

Inflammation, Chronic

 1 1 1 1 1 1 1 2 1 1 10 1.1

Renal Tubule, Casts

 1 1 1 1 1 1 1 1 1 1 5 1.0

Renal Tubule, Degeneration, Hyaline

 1 1 1 1 2 1 1 1 1 1 10 1.1

Renal Tubule, Regeneration

 2 2 2 2 2 1 1 2 2 2 10 1.8

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

- 1) Minimal
- 3) Moderate
- 2) Mild
- 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:39

First Dose M/F: NA / NA

Lab: TSI MASON

**F 344/N Rat Male
8.0%**

| DAY ON TEST | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|
| | 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 |
| | 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 |
| Dilatation | | | | | | | | | | | 2 |
| Intestine Large, Colon | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Large, Rectum | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Small, Ileum | + | + | + | + | + | + | + | + | + | + | 10 |
| Intestine Small, Jejunum | + | + | + | + | + | + | + | + | + | + | 10 |
| Liver | + | + | + | + | + | + | + | + | + | + | 10 |
| Pancreas | + | + | + | + | + | + | + | + | + | + | 10 |
| Acinus, Atrophy | | | | | | | | | | | 1 |
| Salivary Glands | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Glandular | + | + | + | + | + | + | + | + | + | + | 10 |

Cardiovascular System

| | | | | | | | | | | | |
|----------------|---|---|---|---|---|---|---|---|---|---|----|
| Heart | + | + | + | + | + | + | + | + | + | + | 10 |
| Cardiomyopathy | 2 | 1 | 2 | 2 | 2 | 2 | 1 | 2 | 1 | 1 | 10 |

Endocrine System

| | | | | | | | | | | | |
|-----------------|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex | + | + | + | + | + | + | + | + | + | + | 10 |
| Adrenal Medulla | + | + | + | + | + | + | + | + | + | + | 10 |

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:39

First Dose M/F: NA / NA

Lab: TSI MASON

**F 344/N Rat Male
8.0%**

| DAY ON TEST | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|
| | 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 |
| | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |

***TOTALS**

| | | | | | | | | | | | |
|--------------------|---|---|---|---|---|---|---|---|---|---|----|
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | 10 |
| Parathyroid Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Pituitary Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Thyroid Gland | + | + | + | + | + | + | + | + | + | + | 10 |

General Body System

NONE

Genital System

| | | | | | | | | | | | |
|-----------------|---|---|---|---|---|---|---|---|---|---|----|
| Epididymis | + | + | + | + | + | + | + | + | + | + | 10 |
| Preputial Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Abscess | | | | | | | | | | | 2 |
| Prostate | + | + | + | + | + | + | + | + | + | + | 10 |
| Seminal Vesicle | + | + | + | + | + | + | + | + | + | + | 10 |
| Testes | + | + | + | + | + | + | + | + | + | + | 10 |

1 2.0

Hematopoietic System

| | | | | | | | | | | | |
|------------------------|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow | + | + | + | + | + | + | + | + | + | + | 10 |
| Lymph Node, Mandibular | + | + | + | + | + | + | + | + | + | + | 10 |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | 10 |
| Spleen | + | + | + | + | + | + | + | + | + | + | 10 |
| Congestion | | | | | | | | | | | 3 |
| Thymus | + | + | + | + | + | + | + | + | + | + | 10 |

1 3.0

Integumentary System

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:39

First Dose M/F: NA / NA

Lab: TSI MASON

**F 344/N Rat Male
8.0%**

| DAY ON TEST | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|
| | 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 |
| | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |

TOTALS*Integumentary System**

| | | | | | | | | | | | |
|---------------|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland | + | M | M | M | + | + | + | + | M | + | 6 |
| Skin | + | + | + | + | + | + | + | + | + | + | 10 |

Musculoskeletal System

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

Nervous System

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

Respiratory System

| | | | | | | | | | | | |
|------------|---|---|---|---|---|---|---|---|---|---|----|
| Lung | + | + | + | + | + | + | + | + | + | + | 10 |
| Hemorrhage | | | | | | | | | | | 2 |
| Nose | + | + | + | + | + | + | + | + | + | + | 10 |
| Trachea | + | + | + | + | + | + | + | + | + | + | 10 |

Special Senses System

NONE

Urinary System

| | | | | | | | | | | | |
|------------------------|---|---|---|---|---|---|---|---|---|---|-----|
| Kidney | + | + | + | + | + | + | + | + | + | + | 10 |
| Cortex, Mineralization | | | | | | | | | | | 1 |
| Inflammation, Chronic | 1 | 1 | 2 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 10 |
| Renal Tubule, Casts | 2 | 1 | 3 | 2 | 3 | 2 | 1 | 1 | 2 | 3 | 10 |
| | | | | | | | | | | | 1.0 |
| | | | | | | | | | | | 1.2 |
| | | | | | | | | | | | 2.0 |

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:39

First Dose M/F: NA / NA

Lab: TSI MASON

F 344/N Rat Male

8.0%

| DAY ON TEST | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|
| | 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 |
| 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 |
| 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |

*TOTALS

| | | | | | | | | | | | | |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|----|-----|
| Renal Tubule, Degeneration, Hyaline | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 10 | 2.0 |
| Renal Tubule, Regeneration | 2 | 2 | 3 | 2 | 3 | 2 | 2 | 2 | 1 | 3 | 10 | 2.2 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | 10 | |

END OF MALE DATA

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

- 1) Minimal 3) Moderate
- 2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:39

First Dose M/F: NA / NA

Lab: TSI MASON

**F 344/N Rat Female
UNTREATD**

| DAY ON TEST | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|
| | 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 |
| | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 |
| | 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 |
| Cardiomyopathy | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 7 1.0 |

Endocrine System

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

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

First Dose M/F: NA / NA

Lab: TSI MASON

**F 344/N Rat Female
UNTREATD**

| DAY ON TEST | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|
| | 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 |
| 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | |

*TOTALS

Pituitary Gland

+ + + + + + + + + +

10

Thyroid Gland

+ + + + + + + + + +

10

General Body System

NONE

Genital System

Clitoral Gland

+ + + + + + + + + +

10

Ovary

+ + + + + + + + + +

10

Uterus

+ + + + + + + + + +

10

Dilatation

1

1 1.0

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

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

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Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

First Dose M/F: NA / NA

Lab: TSI MASON

F 344/N Rat Female
UNTREATD

| DAY ON TEST | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|
| | 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 |
| 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 |
| 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

Cortex, Mineralization

1 1 1 1 1 1 1 1 1 1 10 1.0

Renal Tubule, Regeneration

1 1 1 1 1 1 1 1 1 1 8 1.0

Urinary Bladder

+ + + + + + + + + M 9

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

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Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

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 |
| 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 |
| | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 |
| | 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 |
| Acinus, Atrophy | 1 | | | | | | | | | | 1 1.0 |
| Salivary Glands | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Glandular | + | + | + | + | + | + | + | + | + | + | 10 |

Cardiovascular System

| | | | | | | | | | | | |
|----------------|---|---|---|---|---|---|---|---|---|---|-------|
| Heart | + | + | + | + | + | + | + | + | + | + | 10 |
| Cardiomyopathy | 1 | | | | | | | | | | 6 1.0 |

Endocrine System

| | | | | | | | | | | | |
|--------------------|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex | + | + | + | + | + | + | + | + | + | + | 10 |
| Adrenal Medulla | + | + | + | + | + | + | + | + | + | + | 10 |
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | 10 |

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

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 |
| 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 | 0 |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | *TOTALS |
| Parathyroid Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Pituitary Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Thyroid Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| General Body System | | | | | | | | | | | |
| NONE | | | | | | | | | | | |
| Genital System | | | | | | | | | | | |
| Clitoral Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Dilatation | | | | | | 2 | | | | | 1 2.0 |
| Ovary | + | + | + | + | + | + | + | + | + | + | 10 |
| Cyst | X | | | | | | | | | | 1 |
| 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 |

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

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

TOTALS*Musculoskeletal System**

Bone + + + + + + + + + + 10

Nervous System

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

Respiratory System

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

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

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

Special Senses System

NONE

Urinary System

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

Cortex, Mineralization 1 1 1 1 1 1 1 1 1 1 10 1.0

Inflammation, Chronic 1 1 1 1 1 1 1 1 1 1 3 1.0

Renal Tubule, Regeneration 1 1 1 1 1 1 1 1 1 1 7 1.0

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

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

- 1) Minimal 3) Moderate
2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

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

*TOTALS

Alimentary System

| | | |
|----------------------------|---|---|
| Liver | + | 1 |
| Hepatodiaphragmatic Nodule | X | 1 |

Cardiovascular System

NONE

Endocrine System

NONE

General Body System

NONE

Genital System

| | | |
|----------------|---|-------|
| Clitoral Gland | + | 1 |
| Dilatation | 2 | 1 2.0 |
| Uterus | + | 1 |
| Dilatation | 2 | 1 2.0 |

Hematopoietic System

NONE

Integumentary System

NONE

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

First Dose M/F: NA / NA

Lab: TSI MASON

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

Musculoskeletal System

NONE

Nervous System

NONE

Respiratory System

NONE

Special Senses System

NONE

Urinary System

| | | | | | | | | | | | |
|----------------------------|---|---|---|---|---|---|---|---|---|---|----|
| Kidney | + | + | + | + | + | + | + | + | + | + | 10 |
| Cortex, Mineralization | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 10 |
| Inflammation, Chronic | 1 | | | | | | | | | | 1 |
| Renal Tubule, Regeneration | 1 | 1 | 1 | 1 | | | | 1 | | | 5 |

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

± ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

| - Insufficient tissue

BLANK - Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

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 |
| ANIMAL ID | 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 |
| | 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 |
| | 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

Mediastinal, Angiectasis

1 1 1.0

Integumentary System

NONE

Musculoskeletal System

NONE

Nervous System

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

- 1) Minimal 3) Moderate
- 2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

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

*TOTALS

NONE

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney

+ + + + + + + + + + 10

Cortex, Mineralization

1 1 1 1 1 1 1 1 1 1 10 1.0

Renal Tubule, Regeneration

1 1 1 1 1 1 1 1 1 6 1.0

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

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 |
| ANIMAL ID | 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 |
| | 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

Hepatodiaphragmatic Nodule

X 1

Cardiovascular System

NONE

Endocrine System

NONE

General Body System

NONE

Genital System

NONE

Hematopoietic System

Lymph Node, Mandibular

+ 1 1 1.0

Hyperplasia, Lymphoid

Integumentary System

NONE

Musculoskeletal System

NONE

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

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 |
| ANIMAL ID | 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 |
| | 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

Nervous System

NONE

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney

+ + + + + + + + + + 10

Cortex, Mineralization

1 1 1 1 1 2 1 1 1 2 10 1.2

Renal Tubule, Regeneration

1 1 1 1 1 1 1 1 1 1 5 1.0

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

- 1) Minimal 3) Moderate
- 2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

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

*TOTALS

Alimentary System

| | | | |
|------------------------|--|---|-------|
| Intestine Large, Cecum | | + | 1 |
| Dilatation | | 2 | 1 2.0 |

Cardiovascular System

NONE

Endocrine System

NONE

General Body System

NONE

Genital System

| | | | | |
|--------|---|---|---|---|
| Uterus | + | + | + | 3 |
|--------|---|---|---|---|

Hematopoietic System

| | | | | |
|------------|---|--|---|-----|
| Spleen | + | | 1 | |
| Congestion | 2 | | 1 | 2.0 |

Integumentary System

NONE

Musculoskeletal System

NONE

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

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

*TOTALS

Nervous System

NONE

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney

+ + + + + + + + + + 10

Cortex, Mineralization

1 1 1 1 1 1 1 2 1 1 10 1.1

Inflammation, Chronic

1 1 2 1.0

Renal Tubule, Regeneration

1 1 1 1 1 1 1 1 1 9 1.0

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

First Dose M/F: NA / NA

Lab: TSI MASON

**F 344/N Rat Female
8.0%**

| DAY ON TEST | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID | 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 |
| | 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 |
| Inflammation, Chronic | | 1 | | | | | | | | | 1 1.0 |
| Necrosis | | 1 | | | | | | | | | 1 1.0 |
| Pancreas | + | + | + | + | + | + | + | + | + | + | 10 |
| Salivary Glands | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | 10 |
| Stomach, Glandular | + | + | + | + | + | + | + | + | + | + | 10 |

Cardiovascular System

| | | | | | | | | | | | |
|----------------|---|---|---|---|---|---|---|---|---|---|-------|
| Heart | + | + | + | + | + | + | + | + | + | + | 10 |
| Cardiomyopathy | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 9 1.0 |

Endocrine System

| | | | | | | | | | | | |
|-----------------|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex | + | + | + | + | + | + | + | + | + | + | 10 |
| Adrenal Medulla | + | + | + | + | + | + | + | + | + | + | 10 |

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

+ ..Tissue examined microscopically

M ..Missing tissue

X ..Lesion present

A ..Autolysis precludes evaluation

I ..Insufficient tissue

BLANK ..Not examined microscopically

1-4 ..Lesion qualified as:

1) Minimal 3) Moderate

2) Mild 4) Marked

Experiment Number: 04626-01

Test Type: 90-DAY

Route: DOSED FEED

Species/Strain: Rat/F 344/N

P09: NON-NEOPLASTIC LESIONS BY INDIVIDUAL ANIMAL

Test Compound: 1,1,1-Trichloroethane

CAS Number: 71-55-6

Date Report Requested: 10/18/2014

Time Report Requested: 16:24:40

First Dose M/F: NA / NA

Lab: TSI MASON

**F 344/N Rat Female
8.0%**

| DAY ON TEST | | | | | | | | | | |
|-------------|---|---|---|---|---|---|---|---|---|---|
| | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID | 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 |
| | 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**

| | | | | | | | | | | | |
|--------------------|---|---|---|---|---|---|---|---|---|---|----|
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | 10 |
| Parathyroid Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Pituitary Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Thyroid Gland | + | + | + | + | + | + | + | + | + | + | 10 |

General Body System

NONE

Genital System

| | | | | | | | | | | | |
|----------------|---|---|---|---|---|---|---|---|---|---|----|
| Clitoral Gland | + | + | + | + | + | + | + | + | + | + | 10 |
| Ovary | + | + | + | + | + | + | + | + | + | + | 10 |
| Cyst | X | | | | | | | | | | 1 |
| 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 |

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First Dose M/F: NA / NA

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 | | | | | | | | | | |
| 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 | | | | | | | | | | |
| | 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*Musculoskeletal System**

| | | | | | | | | | | | |
|-----------------|---|---|---|---|---|---|---|---|---|---|-------|
| Bone | + | + | + | + | + | + | + | + | + | + | 10 |
| Skeletal Muscle | | | | | | | | | | + | 1 |
| Atrophy | | | | | | | | | | 1 | 1 1.0 |

Nervous System

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

Respiratory System

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

Special Senses System

NONE

Urinary System

| | | | | | | | | | | | |
|----------------------------|---|---|---|---|---|---|---|---|---|---|--------|
| Kidney | + | + | + | + | + | + | + | + | + | + | 10 |
| Cortex, Mineralization | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 10 1.0 |
| Inflammation, Chronic | 1 | 1 | | | | | | 1 | 1 | | 4 1.0 |
| Renal Tubule, Regeneration | | 1 | | 1 | 1 | 1 | | 1 | 1 | 1 | 7 1.0 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | 10 |

**** END OF REPORT ****

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