

**Experiment Number:** 20614 - 01

**Test Type:** CHRONIC

**Route:** DOSED FEED

**Species/Strain:** RATS/HSD

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

Perfluorooctanoic Acid

**CAS Number:** 335-67-1

**Date Report Requested:** 07/25/2018

**Time Report Requested:** 12:58:26

**First Dose M/F:** 10/27/08 / 10/28/08

**Lab:** BAT

Final 1\_Core Only

**NTP Study Number:** C20614

**Lock Date:** 01/10/2012

**Cage Range:** ALL

**Date Range:** ALL

**Reasons For Removal:** 25021 TSAC 25020 NATD 25019 MSAC

**Removal Date Range:** ALL

**Treatment Groups:** Include ALL

**Study Gender:** Both

**TDMSE Version:** 3.0.2.3\_002

**PWG Approval Date:** 07/25/2018

Note: Animals arranged according to days on test.

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Lab: BAT

HARLAN SPRAGUE DAWLEY RATS FEMALE 0/0 ppm	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	0	
	2	3	3	3	4	4	4	5	5	5	5	5	5	6	6	6	6	6	6	6	6	6	6	6	7	
	7	1	2	8	1	3	5	3	4	7	4	9	2	2	5	8	5	4	6	6	6	7	7	8	9	
	4	2	3	2	1	5	2	3	3	7	4	9	2	1	5	8	5	4	7	1	7	3	6	8	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	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	3	3	3	3	3	3	3	3	3	3	3	3	3	3	
		4	4	4	4	5	0	3	1	1	2	2	2	2	3	3	3	5	1	2	5	4	5	0	6	
		7	5	3	8	9	4	0	1	8	9	0	6	4	1	3	4	6	8	5	4	1	3	0	8	0

females  
(cont...)

## ALIMENTARY SYSTEM

Esophagus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Adenocarcinoma																	X									
Liver	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Cholangioma, Multiple																	X									
Hepatocellular Adenoma																										
Hepatocellular Carcinoma																										
Mesentery															+			+								
Pancreas	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Salivary Glands	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Glandular	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	

\* .. 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

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 Perfluorooctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
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 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

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	0	0
HARLAN SPRAGUE DAWLEY RATS FEMALE	2	3	3	3	4	4	4	5	5	5	5	5	6	6	6	6	6	6	6	6	6	6	6	6	6
0/0 ppm	7	1	2	8	1	3	5	3	4	7	4	9	2	2	5	8	5	4	6	6	6	7	6	7	0
ANIMAL ID	4	2	3	2	1	5	2	3	3	7	4	9	2	1	5	8	5	4	7	1	7	3	6	8	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	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	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
	4	4	4	4	5	0	3	1	1	2	2	2	2	3	3	3	5	1	2	5	4	5	0	6	3
	7	5	3	8	9	4	0	1	8	9	0	6	4	1	3	4	6	8	5	4	1	3	0	8	0

females  
(cont...)

## CARDIOVASCULAR SYSTEM

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

## ENDOCRINE SYSTEM

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Adenoma																							X	
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Pheochromocytoma Benign																								
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Adenoma																								
Parathyroid Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+
Pituitary Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Pars Distalis, Adenoma																	X	X	X	X	X	X	X	X
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Bilateral, C-cell, Adenoma																								X
C-cell, Adenoma																								
C-cell, Adenoma, Multiple																								
C-cell, Carcinoma																								

## GENERAL BODY SYSTEM

NONE

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

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

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HARLAN SPRAGUE DAWLEY RATS FEMALE 0/0 ppm	DAY ON TEST 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
	2	3	3	3	4	4	4	5	5	5	5	5	5	6	6	6	6	6	6	6	6	6	6	6	6	6	7
	7	1	2	8	1	3	5	3	4	7	4	7	9	2	2	5	8	5	4	6	6	6	7	6	7	8	9
	4	2	3	2	1	5	2	3	3	7	4	2	9	2	1	5	8	5	7	1	7	3	6	7	8	2	5
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	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	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
	4	4	4	4	5	0	3	1	1	2	2	2	2	3	3	3	5	1	2	5	4	5	0	6	3	4	4
	7	5	3	8	9	4	0	1	8	9	0	6	4	1	3	4	6	8	5	4	1	3	0	8	0	0	0

females  
(cont...)

## GENITAL SYSTEM

Clitoral Gland  
Carcinoma

+

Ovary  
Granulosa Cell Tumor Benign

+

Uterus  
Polyp Stromal  
Polyp Stromal, Multiple

+

X

## HEMATOPOIETIC SYSTEM

Bone Marrow  
Carcinoma, Metastatic, Nose

+

X

Lymph Node

+

Lymph Node, Mandibular

M

+

Lymph Node, Mesenteric

A

+

Spleen

+

Thymus

+

+

## INTEGUMENTARY SYSTEM

Mammary Gland  
Adenocarcinoma  
Adenoma

+

X

\* .. 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

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Lab: BAT

HARLAN SPRAGUE DAWLEY RATS FEMALE 0/0 ppm	DAY ON TEST ANIMAL ID	females (cont...)																								
		0 2 7 4	0 3 1 2	0 3 2 8	0 4 1 1	0 4 3 5	0 5 3 2	0 5 4 3	0 5 7 4	0 5 8 9	0 5 2 1	0 6 2 5	0 6 3 8	0 6 4 5	0 6 7 1	0 6 7 1	0 6 6 7	0 6 6 7	0 6 6 8	0 6 6 8	0 6 6 9	0 7 0 5				
Fibroadenoma		X		X												X	X	X	X	X	X	X	X	X		
Fibroadenoma, Multiple																										
Skin		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Subcutaneous Tissue, Sarcoma																X										
MUSCULOSKELETAL SYSTEM																										
Bone		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Femur, Osteosarcoma							X																			
NERVOUS SYSTEM																										
Brain		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Spinal Cord																										
Astrocytoma Malignant																		+								
RESPIRATORY SYSTEM																										
Lung		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Adenocarcinoma, Metastatic, Mammary Gland							X																			
Astrocytoma Malignant, Metastatic, Spinal Cord																	X									
Nose		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Glands, Carcinoma							X																			
Trachea		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
SPECIAL SENSES SYSTEM																										
Eye		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	

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Perfluorooctanoic Acid

Time Report Requested: 12:58:26

Route: DOSED FEED

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First Dose M/F: 10/27/08 / 10/28/08

Species/Strain: RATS/HSD

Lab: BAT

HARLAN SPRAGUE DAWLEY RATS FEMALE 0/0 ppm	DAY ON TEST ANIMAL ID	females (cont...)																								
		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	3	3	3	4	4	4	5	5	5	5	5	5	6	6	6	6	6	6	6	6	6	6	6	
		7	1	2	8	1	3	5	3	4	7	4	9	2	2	5	8	5	4	6	6	7	7	8	9	
		4	2	3	2	1	5	2	3	3	7	4	9	2	1	5	8	5	4	7	1	7	3	6	5	
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		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	3	3	3	3	3	3	3	3	3	3	3	3	3	3	
		4	4	4	4	5	0	3	1	1	2	2	2	2	3	3	3	5	1	2	5	4	5	0	6	
		7	5	3	8	9	4	0	1	8	9	0	6	4	1	3	4	6	8	5	4	1	3	0	8	0

Harderian Gland

+ +

## URINARY SYSTEM

Kidney

+ +

Adenocarcinoma, Metastatic, Mammary Gland

Urinary Bladder

+ +

## SYSTEMIC LESIONS

Multiple Organ

+ +

Leukemia Mononuclear

X

Lymphoma Malignant

X

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| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/0 ppm | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|
|   |                       | 0<br>7<br>1<br>2      | 0<br>7<br>2<br>2      | 0<br>7<br>4<br>4      |                       |          |
| ANIMAL ID                                       | 0<br>0<br>3<br>2<br>5 | 0<br>0<br>3<br>1<br>4 | 0<br>0<br>3<br>2<br>5 | 0<br>0<br>3<br>2<br>6 | 0<br>0<br>3<br>3<br>7 | 0<br>0<br>3<br>3<br>6 | 0<br>0<br>3<br>3<br>7 |          |
|   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |

### ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|
| Esophagus                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Large, Cecum                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Large, Colon                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Large, Rectum                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Small, Duodenum                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Small, Ileum                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Small, Jejunum<br>Adenocarcinoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>1 |
| Liver                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Cholangioma, Multiple                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1       |
| Hepatocellular Adenoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2       |
| Hepatocellular Carcinoma                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1       |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |         |
| Mesentery                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2       |
| Pancreas                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Salivary Glands                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49      |
| Stomach, Forestomach                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Stomach, Glandular                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |

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| DAY ON TEST                          |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |        |
|--------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|--------|
|                                      | 0<br>7 |          |        |
| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE | 1<br>2 | 2<br>2 | 4<br>4 | 4<br>5 | 4<br>5 | 4<br>5 | 4<br>6   |        |
| 0/0 ppm                              | 0<br>0   |        |
| ANIMAL ID                            | 3<br>3   |        |
|                                      | 2<br>5 | 1<br>4 | 1<br>0 | 1<br>5 | 1<br>1 | 2<br>3 | 2<br>3 | 3<br>3 | 3<br>5 | 5<br>0 | 2<br>7 | 3<br>6 | 4<br>7 | 5<br>9 | 0<br>3 | 0<br>1 | 1<br>7 | 9<br>9 | 3<br>3 | 7<br>7 | 2<br>2   | 0<br>2 |
|                                      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 8        |        |

### CARDIOVASCULAR SYSTEM

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Heart        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

### ENDOCRINE SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex<br>Adenoma  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Adrenal Medulla<br>Pheochromocytoma Benign   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Islets, Pancreatic<br>Adenoma  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Parathyroid Gland  | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | M | + | + | 47 |
| Pituitary Gland<br>Pars Distalis, Adenoma  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|  | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 22 |
| Thyroid Gland<br>Bilateral, C-cell, Adenoma<br>C-cell, Adenoma<br>C-cell, Adenoma, Multiple<br>C-cell, Carcinoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 6  |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

### GENERAL BODY SYSTEM

NONE

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

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 Perfluoroctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/0 ppm | DAY ON TEST                |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |          | * TOTALS |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------|----------|
|   |                            | 0<br>7<br>1<br>2           | 0<br>7<br>2<br>2           | 0<br>7<br>4<br>4           |                            |          |          |
| ANIMAL ID                                       | 0<br>0<br>0<br>3<br>2<br>5 | 0<br>0<br>0<br>3<br>1<br>4 | 0<br>0<br>0<br>3<br>1<br>0 | 0<br>0<br>0<br>3<br>2<br>5 | 0<br>0<br>0<br>3<br>3<br>6 | 0<br>0<br>0<br>3<br>3<br>7 | * TOTALS |          |
|   | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0        | 0        |
|   | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0        | 0        |
|   | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0        | 0        |
|   | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0        | 0        |
|   | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0        | 0        |
|   | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0                          | 0        | 0        |

### GENITAL SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |              |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------|
| Clitoral Gland<br>Carcinoma                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>1      |
| Ovary<br>Granulosa Cell Tumor Benign               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>1      |
| Uterus<br>Polyp Stromal<br>Polyp Stromal, Multiple | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>5<br>1 |

### HEMATOPOIETIC SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|
| Bone Marrow<br>Carcinoma, Metastatic, Nose | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>1 |
| Lymph Node                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1       |
| Lymph Node, Mandibular                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48      |
| Lymph Node, Mesenteric                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49      |
| Spleen                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Thymus                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | 49      |

### INTEGUMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |              |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------|
| Mammary Gland<br>Adenocarcinoma<br>Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>3<br>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: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 Perfluorooctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/0 ppm | DAY ON TEST<br>ANIMAL ID |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | * TOTALS |    |
|---|--------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|----------|----|
|   |                          | 0<br>7<br>1<br>2 | 0<br>7<br>2<br>2 | 0<br>7<br>4<br>4 |   |          |    |
| Fibroadenoma                                    |                          |                  |                  | X                | X                |                  | X                | X                |                  | X                | X                |                  | X                | X                | X                |                  | X                | X                |                  | X                | X                |                  | X                | X                | X | 12       |    |
| Fibroadenoma, Multiple                          |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 9  |
| Skin  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |    |
| Subcutaneous Tissue, Sarcoma                    |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| <b>MUSCULOSKELETAL SYSTEM</b>                   |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          |    |
| Bone  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +        | 50 |
| Femur, Osteosarcoma                             |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| <b>NERVOUS SYSTEM</b>                           |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          |    |
| Brain   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +        | 50 |
| Spinal Cord                                     |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Astrocytoma Malignant                           |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| <b>RESPIRATORY SYSTEM</b>                       |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          |    |
| Lung  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +        | 50 |
| Adenocarcinoma, Metastatic, Mammary Gland       |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Astrocytoma Malignant, Metastatic, Spinal Cord  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Nose  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +        | 50 |
| Glands, Carcinoma                               |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Trachea   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +        | 50 |
| <b>SPECIAL SENSES SYSTEM</b>                    |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          |    |
| Eye   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +        | 50 |

\* .. 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: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
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**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**  
 Perfluorooctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/0 ppm | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |   |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|---|
|   |                       | 0<br>7<br>1<br>2      | 0<br>7<br>2<br>2      | 0<br>7<br>4<br>4      |                       |          |   |
| ANIMAL ID                                       | 0<br>0<br>3<br>2<br>5 | 0<br>0<br>3<br>1<br>4 | 0<br>0<br>3<br>2<br>0 | 0<br>0<br>3<br>3<br>6 | 0<br>0<br>3<br>3<br>7 |          |   |
| Harderian Gland                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| <b>URINARY SYSTEM</b>                           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |
| Kidney  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Adenocarcinoma, Metastatic, Mammary Gland       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |          | 1 |
| Urinary Bladder                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| <b>SYSTEMIC LESIONS</b>                         |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |
| Multiple Organ                                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Leukemia Mononuclear                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1 |
| Lymphoma Malignant                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 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

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 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
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 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/300 ppm | 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 | 0 |
| ANIMAL ID   | 2           | 4 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 |
|   | 5           | 7 | 7 | 8 | 3 | 7 | 7 | 8 | 3 | 4 | 5 | 7 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 1 | 3 | 3 | 4 |
|   | 0           | 0 | 0 | 4 | 3 | 4 | 4 | 9 | 8 | 3 | 9 | 6 | 7 | 7 | 0 | 5 | 5 | 5 | 5 | 5 | 7 | 8 | 7 | 4 | 4 |
|   | 0           | 0 | 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 | 4 | 3 | 3 | 4 | 3 | 3 | 4 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 3 | 4 | 4 | 3 | 3 |
|   | 9           | 7 | 8 | 7 | 0 | 7 | 8 | 0 | 9 | 6 | 1 | 8 | 9 | 9 | 6 | 7 | 1 | 1 | 7 | 1 | 1 | 1 | 7 | 8 | 8 |
|   | 0           | 4 | 3 | 9 | 2 | 7 | 4 | 1 | 5 | 3 | 4 | 0 | 6 | 2 | 2 | 8 | 2 | 8 | 3 | 9 | 3 | 6 | 2 | 1 | 8 |

females  
(cont...)

## ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Cholangiocarcinoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Hepatocellular Carcinoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

## CARDIOVASCULAR SYSTEM

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

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

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

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Experiment Number: 20614 - 01  
Test Type: CHRONIC  
Route: DOSED FEED  
Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
Perfluorooctanoic Acid  
CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
Time Report Requested: 12:58:26  
First Dose M/F: 10/27/08 / 10/28/08  
Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/300 ppm | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |   |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|
|   |             | 0 | 0 | 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   | 2           | 4 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7                    | 7 |
|   | 5           | 7 | 7 | 8 | 3 | 7 | 7 | 8 | 3 | 4 | 5 | 7 | 8 | 9 | 9 | 5 | 5 | 5 | 5 | 7 | 1 | 3 | 3 | 4 | 4 | 4                    |   |
|   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    |   |
|   | 0           | 0 | 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 | 4 | 3 | 3 | 4 | 3 | 3 | 4 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 3 | 4 | 4 | 4 | 3 | 3                    |   |
|   | 9           | 7 | 8 | 7 | 0 | 7 | 8 | 0 | 9 | 6 | 1 | 8 | 9 | 9 | 6 | 7 | 1 | 1 | 7 | 1 | 1 | 1 | 7 | 8 | 8 | 8                    |   |
|   | 0           | 4 | 3 | 9 | 2 | 7 | 4 | 1 | 5 | 3 | 4 | 0 | 6 | 2 | 2 | 8 | 2 | 8 | 3 | 9 | 3 | 6 | 2 | 1 | 8 | 8                    |   |
| Heart   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| <b>ENDOCRINE SYSTEM</b>                           |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Adrenal Cortex                                    |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| Adenoma   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Adrenal Medulla                                   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X                    |   |
| Pheochromocytoma Benign                           |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Islets, Pancreatic                                |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| Adenoma   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Parathyroid Gland                                 |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | +                    |   |
| Pituitary Gland                                   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X                    |   |
| Pars Distalis, Adenoma                            |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Thyroid Gland                                     |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| Bilateral, C-cell, Adenoma                        |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| C-cell, Adenoma                                   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
|   |             | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      | X |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Clitoral Gland

+

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Ovary  
Granulosa Cell Tumor Malignant

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+

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+

+

+

X

\* .. 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: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
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 Perfluorooctanoic Acid  
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| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/300 ppm | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |  |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|--|
|   |             | 0 | 0 | 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   | 2           | 4 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7                    |  |
|   | 5           | 7 | 7 | 8 | 3 | 7 | 7 | 8 | 3 | 4 | 5 | 7 | 8 | 9 | 9 | 9 | 9 | 9 | 0 | 1 | 3 | 3 | 4 | 4 | 4 | 4                    |  |
| Oviduct   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |                      |  |
| Uterus  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |  |
| Polyp Stromal                                     |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |                      |  |
| Endometrium, Adenocarcinoma                       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |  |
| Endometrium, Adenoma                              |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |  |

## HEMATOPOIETIC SYSTEM

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bone Marrow                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymph Node                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |  |
| Axillary, Adenocarcinoma, Metastatic, |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |  |
| Mammary Gland                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymph Node, Mandibular                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymph Node, Mesenteric                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + |  |
| Spleen                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Thymus                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | M | + | + | + |  |

## INTEGUMENTARY SYSTEM

|                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Adenocarcinoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   | X |   |   |   |   |
| Adenocarcinoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Adenoma                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibroadenoma             | X | X | X | X | X | X |   |   |   |   |   |   |   |   |   |   |   |   | X |   | X | X |   |   |   |   | X |
| Fibroadenoma, Multiple   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |

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

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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Route: DOSED FEED

Species/Strain: RATS/HSD

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

Perfluorooctanoic Acid

CAS Number: 335-67-1

Date Report Requested: 07/25/2018

Time Report Requested: 12:58:26

First Dose M/F: 10/27/08 / 10/28/08

Lab: BAT

| DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS FEMALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|             | 0/300 ppm                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 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 |
|             | 2                                 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |
|             | 5                                 | 7 | 7 | 8 | 3 | 7 | 7 | 8 | 3 | 4 | 5 | 7 | 8 | 9 | 0 | 5 | 5 | 5 | 5 | 7 | 1 | 3 | 3 | 4 | 4 |
|             | 0                                 | 0 | 0 | 4 | 3 | 4 | 4 | 9 | 8 | 3 | 9 | 6 | 7 | 7 | 0 | 5 | 5 | 5 | 5 | 7 | 8 | 7 | 9 | 4 | 4 |
|             | 0                                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0                                 | 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 | 4 | 3 | 3 | 4 | 3 | 3 | 4 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 3 | 4 | 4 | 3 | 3 |
|             | 9                                 | 7 | 8 | 7 | 0 | 7 | 8 | 0 | 9 | 6 | 1 | 8 | 9 | 9 | 6 | 7 | 1 | 1 | 7 | 1 | 1 | 1 | 7 | 8 | 8 |
|             | 0                                 | 4 | 3 | 9 | 2 | 7 | 4 | 1 | 5 | 3 | 4 | 0 | 6 | 2 | 2 | 8 | 2 | 8 | 3 | 9 | 3 | 6 | 2 | 1 | 8 |

females  
(cont...)

Skin +

Subcutaneous Tissue, Fibroma X

**MUSCULOSKELETAL SYSTEM**

Bone +

Skeletal Muscle  
Hemangiosarcoma

**NERVOUS SYSTEM**

Brain +

**RESPIRATORY SYSTEM**

Lung +

Nose

Trachea +

**SPECIAL SENSES SYSTEM**

Eye +

Harderian Gland

+ +

**URINARY SYSTEM**

Kidney +

Renal Tubule, Adenoma

X

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

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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Test Type: CHRONIC

Perfluorooctanoic Acid

Time Report Requested: 12:58:26

Route: DOSED FEED

CAS Number: 335-67-1

First Dose M/F: 10/27/08 / 10/28/08

Species/Strain: RATS/HSD

Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/300 ppm | DAY ON TEST<br>ANIMAL ID |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | females<br>(cont...) |
|---|--------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------------------|
|   |                          | 0<br>2<br>5<br>0 | 0<br>4<br>7<br>0 | 0<br>4<br>8<br>0 | 0<br>5<br>3<br>3 | 0<br>5<br>7<br>4 | 0<br>5<br>8<br>9 | 0<br>6<br>3<br>8 | 0<br>6<br>3<br>9 | 0<br>6<br>7<br>6 | 0<br>6<br>8<br>7 | 0<br>6<br>9<br>0 | 0<br>6<br>9<br>5 | 0<br>6<br>9<br>5 | 0<br>6<br>9<br>5 | 0<br>7<br>0<br>7 | 0<br>7<br>1<br>8 | 0<br>7<br>3<br>8 | 0<br>7<br>3<br>7 | 0<br>7<br>4<br>9 | 0<br>7<br>4<br>4 | 0<br>7<br>4<br>4 | 0<br>7<br>4<br>4 |                  |                  |                      |
|   |                          | 0<br>0<br>3<br>9 | 0<br>0<br>3<br>0 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 |                      |

Urinary Bladder

+ +

**SYSTEMIC LESIONS**Multiple Organ  
Lymphoma Malignant

+ X

\* .. 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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 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/300 ppm | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |  |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|--|
|   |                       | 0<br>7<br>4<br>4      |                       |          |  |
| ANIMAL ID   | 0<br>0<br>3<br>9<br>1 | 0<br>0<br>3<br>9<br>4 | 0<br>0<br>4<br>0<br>3 | 0<br>0<br>4<br>1<br>0 | 0<br>0<br>4<br>1<br>7 | 0<br>0<br>4<br>6<br>6 | 0<br>0<br>3<br>7<br>5 | 0<br>0<br>3<br>7<br>6 | 0<br>0<br>3<br>8<br>6 | 0<br>0<br>3<br>8<br>9 | 0<br>0<br>3<br>9<br>1 | 0<br>0<br>3<br>9<br>1 | 0<br>0<br>3<br>9<br>2 | 0<br>0<br>3<br>9<br>2 | 0<br>0<br>3<br>9<br>6 | 0<br>0<br>3<br>9<br>7 | 0<br>0<br>3<br>9<br>7 | 0<br>0<br>3<br>9<br>7 | 0<br>0<br>3<br>9<br>7 | 0<br>0<br>3<br>9<br>7 | 0<br>0<br>3<br>9<br>7 |          |  |
|   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  |

### ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M  | 49 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M  | 49 |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M  | 49 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M  | 49 |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M  | 49 |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Cholangiocarcinoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  | 1  |
| Hepatocellular Carcinoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  | 1  |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |

### CARDIOVASCULAR SYSTEM

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

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

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X .. Lesion present

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 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/300 ppm              | DAY ON TEST<br>ANIMAL ID | * TOTALS         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    |    |
|--|--------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----|----|
|  |                          | 0<br>7<br>4<br>4 | 0<br>7<br>4<br>4 | 0<br>7<br>4<br>4 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>6 |    |    |
| Heart  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50 |    |
| <b>ENDOCRINE SYSTEM</b>  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    |    |
| Adrenal Cortex<br>Adenoma                                      |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50 |    |
|  |                          | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 2  |
| Adrenal Medulla<br>Pheochromocytoma Benign                     |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50 |    |
|  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 3  |
| Islets, Pancreatic<br>Adenoma                                  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50 |    |
|  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 1  |
| Parathyroid Gland  |                          | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | M                | +                | +                | +                | 47 |    |
| Pituitary Gland<br>Pars Distalis, Adenoma                      |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50 |    |
|  |                          | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 11 |
| Thyroid Gland<br>Bilateral, C-cell, Adenoma<br>C-cell, Adenoma |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50 |    |
|  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 1  |
|  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 10 |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Clitoral Gland

Ovary  
Granulosa Cell Tumor Malignant

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | 49 |
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | 49 |

\* .. 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: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 Perfluorooctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/300 ppm | DAY ON TEST |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          | * TOTALS |    |
|---|-------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|----------|----------|----|
|   |             | 0<br>7<br>4<br>4                |                                 |          |          |    |
| ANIMAL ID   |             | 0<br>0<br>0<br>0<br>3<br>9<br>1 | 0<br>0<br>0<br>0<br>3<br>0<br>4 | 0<br>0<br>0<br>0<br>4<br>1<br>7 | 0<br>0<br>0<br>0<br>3<br>6<br>0 | 0<br>0<br>0<br>0<br>3<br>6<br>7 | 0<br>0<br>0<br>0<br>3<br>8<br>8 | 0<br>0<br>0<br>0<br>3<br>9<br>9 | 0<br>0<br>0<br>0<br>3<br>9<br>9 | 0<br>0<br>0<br>0<br>3<br>1<br>1 | 0<br>0<br>0<br>0<br>3<br>1<br>2 | 0<br>0<br>0<br>0<br>3<br>2<br>5 | 0<br>0<br>0<br>0<br>3<br>6<br>9 | 0<br>0<br>0<br>0<br>3<br>7<br>9 | 0<br>0<br>0<br>0<br>3<br>8<br>8 | 0<br>0<br>0<br>0<br>3<br>8<br>1 | 0<br>0<br>0<br>0<br>3<br>9<br>5 | 0<br>0<br>0<br>0<br>3<br>9<br>0 | * TOTALS |          |    |
| Oviduct   |             |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          | 1        |    |
| Uterus  |             | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | M        | 49       |    |
| Polyp Stromal                                     |             | X                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          | X        | 4  |
| Endometrium, Adenocarcinoma                       |             |                                 | X                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          |          | 1  |
| Endometrium, Adenoma                              |             |                                 |                                 | X                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          |          | 1  |
| <b>HEMATOPOIETIC SYSTEM</b>                       |             |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          |          |    |
| Bone Marrow                                       |             | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +        | 50       |    |
| Lymph Node  |             |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          |          | 3  |
| Axillary, Adenocarcinoma, Metastatic,             |             |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          |          | 1  |
| Mammary Gland                                     |             |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          |          |    |
| Lymph Node, Mandibular                            |             | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +        | 49       |    |
| Lymph Node, Mesenteric                            |             | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | M        | 48       |    |
| Spleen  |             | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +        | 50       |    |
| Thymus  |             | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +        | 48       |    |
| <b>INTEGUMENTARY SYSTEM</b>                       |             |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          |          |    |
| Mammary Gland                                     |             | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +                               | +        | 50       |    |
| Adenocarcinoma                                    |             |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          |          | 3  |
| Adenocarcinoma, Multiple                          |             |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          |          | 1  |
| Adenoma   |             |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          |          | 1  |
| Fibroadenoma                                      |             |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          |          | 14 |
| Fibroadenoma, Multiple                            |             |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          |          | 5  |
|   |             | X                               | X                               | X                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |          |          |    |

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

+ .. Tissue examined microscopically

X .. Lesion present

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M .. Missing tissue

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| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/300 ppm | DAY ON TEST<br>ANIMAL ID |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | * TOTALS |   |
|---|--------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|----------|---|
|   |                          | 0<br>7<br>4<br>4 |   |          |   |
| Skin  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |   |
| Subcutaneous Tissue, Fibroma                      |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 1        |   |
| <b>MUSCULOSKELETAL SYSTEM</b>                     |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          |   |
| Bone  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |   |
| Skeletal Muscle                                   |                          | +                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1 |
| Hemangiosarcoma                                   |                          | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1 |
| <b>NERVOUS SYSTEM</b>                             |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          |   |
| Brain   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |   |
| <b>RESPIRATORY SYSTEM</b>                         |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          |   |
| Lung  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |   |
| Nose  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |   |
| Trachea   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |   |
| <b>SPECIAL SENSES SYSTEM</b>                      |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          |   |
| Eye   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |   |
| Harderian Gland                                   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |   |
| <b>URINARY SYSTEM</b>                             |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          |   |
| Kidney  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50       |   |
| Renal Tubule, Adenoma                             |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | 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

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 Perfluorooctanoic Acid  
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| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/300 ppm | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | * TOTALS |   |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|----------|---|
|   |                       | 0<br>7<br>4<br>4      |                       |          |          |   |
| ANIMAL ID   | 0<br>0<br>3<br>9<br>1 | 0<br>0<br>3<br>9<br>4 | 0<br>0<br>4<br>0<br>3 | 0<br>0<br>4<br>0<br>4 | 0<br>0<br>3<br>6<br>0 | 0<br>0<br>3<br>6<br>7 | 0<br>0<br>3<br>6<br>6 | 0<br>0<br>3<br>8<br>6 | 0<br>0<br>3<br>8<br>9 | 0<br>0<br>3<br>9<br>9 | 0<br>0<br>1<br>1<br>1 | 0<br>0<br>2<br>2<br>5 | 0<br>0<br>2<br>2<br>0 | 0<br>0<br>2<br>2<br>9 | 0<br>0<br>3<br>7<br>0 | 0<br>0<br>3<br>7<br>7 | 0<br>0<br>3<br>8<br>9 | 0<br>0<br>3<br>8<br>9 | 0<br>0<br>3<br>9<br>9 | 0<br>0<br>3<br>9<br>9 | 0<br>0<br>3<br>9<br>9 | 0<br>0<br>3<br>9<br>9 | 0<br>0<br>3<br>9<br>9 | 0<br>0<br>3<br>9<br>9 | * TOTALS |          |   |
|   | Urinary Bladder       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M        | 49       |   |
| Multiple Organ<br>Lymphoma Malignant              | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       | 1 |

## SYSTEMIC LESIONS

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

M .. Missing tissue  
 A .. Autolysis precludes evaluation  
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 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
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 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>150/300 ppm |  | 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 | 0 | 0 |   |
|   |  | ANIMAL ID   | 0 | 2 | 3 | 4 | 5 | 6 | 3 | 3 | 6 | 8 | 3 | 3 | 4 | 9 | 2 | 2 | 3 | 3 | 9 | 1 | 1 | 8 | 7 | 9 | 2 | 4 |
|   |  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |  |             | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
|   |  |             | 3 | 2 | 7 | 5 | 7 | 2 | 4 | 7 | 5 | 6 | 2 | 3 | 7 | 6 | 2 | 4 | 3 | 5 | 2 | 3 | 3 | 4 | 5 | 5 | 6 | 6 |
|   |  |             | 2 | 1 | 4 | 9 | 3 | 5 | 7 | 0 | 2 | 7 | 6 | 0 | 2 | 1 | 2 | 8 | 8 | 8 | 4 | 4 | 7 | 3 | 0 | 5 | 0 | 0 |

females  
(cont...)

## ALIMENTARY SYSTEM

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Esophagus                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Cecum       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Colon       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Rectum      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Duodenum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Ileum       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Jejunum     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Liver                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Carcinoma, Metastatic, Ovary |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Cholangioma                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

X

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Pancreas             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Salivary Glands      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Glandular   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

## CARDIOVASCULAR SYSTEM

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

\* .. 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: 20614 - 01

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

**Test Type:** CHRONIC

**Route:** DOSED FEED

**Species/Strain:** RATS/HSD

## Perfluorooctanoic Acid

**CAS Number:** 335-67-1

Date Report Requested: 07/25/2018

Time Report Requested: 12:58:26

**First Dose M/E:** 10/27/08 / 10/28/08

Lab BAT

Heart

# **ENDOCRINE SYSTEM**

## Adrenal Cortex Adenoma

Adrenal Medulla  
Pheochromocytoma Benign

## Islets, Pancreatic Adenoma

## Parathyroid Gland

Pituitary Gland  
Pars Distalis Adenoma

Thyroid Gland  
C-cell, Adenoma  
C-cell, Adenoma, Multiple  
C-cell, Carcinoma

## **GENERAL BODY SYSTEM**

NONE

## **GENITAL SYSTEM**

### **Clitoral Gland**

Ovary

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

± = Tissue examined microscopically

Y Lesion present

X .. Lesion present

## M Missing tissue

#### A - Autolysis precludes evaluation

**BLANK** Not examined microscopically.

Experiment Number: 20614 - 01

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

Date Report Requested: 07/25/2018

Test Type: CHRONIC

Perfluoroctanoic Acid

Time Report Requested: 12:58:26

Route: DOSED FEED

CAS Number: 335-67-1

First Dose M/F: 10/27/08 / 10/28/08

Species/Strain: RATS/HSD

Lab: BAT

|   | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                      |
| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>150/300 ppm | ANIMAL ID   | 2 | 3 | 3 | 3 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7                    |
|   |             | 9 | 2 | 4 | 5 | 6 | 3 | 3 | 6 | 8 | 2 | 3 | 3 | 9 | 1 | 1 | 1 | 3 | 9 | 2 | 4 | 4 | 4 | 4 | 4 | 4 | 4                    |
|   |             | 5 | 2 | 9 | 1 | 8 | 3 | 3 | 4 | 9 | 2 | 2 | 4 | 8 | 5 | 4 | 8 | 1 | 8 | 9 | 2 | 4 | 4 | 4 | 4 | 4 | 4                    |
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    |
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    |
|   |             | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4                    |
|   |             | 3 | 2 | 7 | 5 | 7 | 2 | 4 | 7 | 5 | 6 | 2 | 3 | 7 | 6 | 2 | 4 | 3 | 5 | 2 | 3 | 3 | 4 | 5 | 5 | 6 |                      |
|   |             | 2 | 1 | 4 | 9 | 3 | 5 | 7 | 0 | 2 | 7 | 6 | 0 | 2 | 1 | 2 | 8 | 8 | 8 | 4 | 4 | 7 | 3 | 0 | 5 | 0 |                      |

Carcinoma

X

Uterus

+ +

Polyp Stromal

X

Bilateral, Endometrium, Adenocarcinoma

X

Endometrium, Adenocarcinoma

**HEMATOPOIETIC SYSTEM**

Bone Marrow

+ +

Lymph Node, Mandibular

+ +

Lymph Node, Mesenteric

+ +

Carcinoma, Metastatic, Ovary

X

Spleen

+ +

Carcinoma, Metastatic, Ovary

X

Thymus

+ +

Adenocarcinoma, Metastatic, Mammary Gland

X

**INTEGUMENTARY SYSTEM**

Mammary Gland

+ +

Adenocarcinoma

X

Adenoma

X

Fibroadenoma

X X

Fibroadenoma, Multiple

X

Skin

+ +

Subcutaneous Tissue, Fibroma

X

\* .. 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: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 Perfluoroctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| 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 | 0 | 0 |
| HARLAN SPRAGUE DAWLEY RATS | 2 | 3 | 3 | 3 | 3 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| FEMALE                     | 9 | 2 | 4 | 5 | 6 | 3 | 3 | 6 | 8 | 2 | 3 | 3 | 9 | 1 | 1 | 1 | 3 | 9 | 2 | 4 | 4 | 4 | 4 | 4 | 4 |
| 150/300 ppm                | 5 | 2 | 9 | 1 | 8 | 3 | 3 | 4 | 9 | 2 | 4 | 8 | 5 | 4 | 8 | 1 | 8 | 9 | 2 | 4 | 4 | 4 | 4 | 4 | 4 |
| 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 | 0 | 0 | 0 | 0 |
|                            | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
|                            | 3 | 2 | 7 | 5 | 7 | 2 | 4 | 7 | 5 | 6 | 2 | 3 | 7 | 6 | 2 | 4 | 3 | 5 | 2 | 3 | 3 | 4 | 5 | 5 | 6 |
|                            | 2 | 1 | 4 | 9 | 3 | 5 | 7 | 0 | 2 | 7 | 6 | 0 | 2 | 1 | 2 | 8 | 8 | 8 | 4 | 4 | 7 | 3 | 0 | 5 | 0 |

females  
(cont...)

### MUSCULOSKELETAL SYSTEM

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Skeletal Muscle |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

Carcinoma, Metastatic, Ovary

+  
X

### NERVOUS SYSTEM

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

### RESPIRATORY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenocarcinoma, Metastatic, Mammary Gland |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Adenocarcinoma, Metastatic, Uterus        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Carcinoma, Metastatic, Ovary              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

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

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

### SPECIAL SENSES SYSTEM

|     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Eye | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

### URINARY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney                                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenocarcinoma, Metastatic, Mammary Gland |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Carcinoma, Metastatic, Ovary              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. 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

Experiment Number: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**  
 Perfluorooctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>150/300 ppm | 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 | 0 |   |
| ANIMAL ID   | 2           | 3 | 3 | 3 | 3 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|   | 9           | 2 | 4 | 5 | 6 | 3 | 3 | 6 | 8 | 2 | 3 | 3 | 9 | 1 | 1 | 1 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
|   | 5           | 2 | 9 | 1 | 8 | 3 | 3 | 4 | 9 | 2 | 4 | 8 | 5 | 4 | 8 | 9 | 2 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
|   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Lipoma  |             | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
| Urinary Bladder                                     |             | 3 | 2 | 7 | 5 | 7 | 2 | 4 | 7 | 5 | 6 | 2 | 3 | 7 | 6 | 2 | 4 | 3 | 5 | 2 | 3 | 3 | 4 | 5 | 5 | 6 |
| Multiple Organ                                      |             | 2 | 1 | 4 | 9 | 3 | 5 | 7 | 0 | 2 | 7 | 6 | 0 | 2 | 1 | 2 | 8 | 8 | 8 | 4 | 4 | 7 | 3 | 0 | 5 | 0 |

females  
(cont...)

**SYSTEMIC LESIONS**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

\* .. 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: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 Perfluoroctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>150/300 ppm | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|
|   |                       | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>5      | 0<br>7<br>4<br>6      |                       |          |
| ANIMAL ID   | 0<br>0<br>4<br>6<br>2 | 0<br>0<br>4<br>7<br>9 | 0<br>0<br>4<br>3<br>1 | 0<br>0<br>4<br>3<br>9 | 0<br>0<br>4<br>3<br>1 | 0<br>0<br>4<br>5<br>3 |          |
|   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |

### ALIMENTARY SYSTEM

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Cecum       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Colon       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Rectum      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Duodenum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Ileum       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Jejunum     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Liver                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Carcinoma, Metastatic, Ovary |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Cholangioma                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  |
| Pancreas                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Salivary Glands              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Stomach, Forestomach         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Stomach, Glandular           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

### CARDIOVASCULAR SYSTEM

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

\* .. 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

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Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>150/300 ppm | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | * TOTALS |  |   |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|----------|--|---|
|   |                       | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>5      |          |          |  |   |
| ANIMAL ID   | 0<br>0<br>4<br>6<br>2 | 0<br>0<br>4<br>7<br>9 | 0<br>0<br>4<br>7<br>8 | 0<br>0<br>4<br>7<br>8 | 0<br>0<br>4<br>7<br>1 | * TOTALS |          |  |   |
|   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |  |   |
| <b>ENDOCRINE SYSTEM</b>                             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          |  |   |
| Adrenal Cortex                                      | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |  |   |
| Adenoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          |  | 1 |
| Adrenal Medulla                                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |  |   |
| Pheochromocytoma Benign                             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          |  | 4 |
| Islets, Pancreatic                                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |  |   |
| Adenoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          |  | 1 |
| Parathyroid Gland                                   | +                     | M                     | M                     | +                     | +                     | +                     | +                     | M                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 42       |  |   |
| Pituitary Gland                                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |  |   |
| Pars Distalis, Adenoma                              | X                     | X                     |                       |                       |                       |                       |                       | X                     |                       | X                     |                       |                       |                       |                       |                       |                       |                       | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X        | 13       |  |   |
| Thyroid Gland                                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |  |   |
| C-cell, Adenoma                                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          |  | 7 |
| C-cell, Adenoma, Multiple                           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          |  | 1 |
| C-cell, Carcinoma                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          |  | 1 |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Clitoral Gland

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\* .. 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: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**  
 Perfluoroctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>150/300 ppm | DAY ON TEST           |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   | * TOTALS |
|---|-----------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------|---|----------|
|   |                       | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>5      | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 |          |   |          |
| ANIMAL ID   | 0<br>0<br>4<br>6<br>2 | 0<br>0<br>4<br>7<br>9 | 0<br>0<br>4<br>7<br>8 | 0<br>0<br>4<br>7<br>1 | 0<br>0<br>4<br>5 | * TOTALS |   |          |
| Carcinoma   |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   | 1        |
| Uterus  | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +        | + | 50       |
| Polyp Stromal                                       | X                     |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   | 4        |
| Bilateral, Endometrium, Adenocarcinoma              | X                     |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   | 1        |
| Endometrium, Adenocarcinoma                         | X                     |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   | 1        |
| <b>HEMATOPOIETIC SYSTEM</b>                         |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   |          |
| Bone Marrow   | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +        | + | 50       |
| Lymph Node, Mandibular                              | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +        | + | 49       |
| Lymph Node, Mesenteric                              | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +        | + | 50       |
| Carcinoma, Metastatic, Ovary                        | M                     |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   | 1        |
| Spleen  | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +        | + | 50       |
| Carcinoma, Metastatic, Ovary                        | +                     |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   | 1        |
| Thymus  | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +        | + | 50       |
| Adenocarcinoma, Metastatic, Mammary Gland           | +                     |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   | 1        |
| <b>INTEGUMENTARY SYSTEM</b>                         |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   |          |
| Mammary Gland                                       | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +        | + | 50       |
| Adenocarcinoma                                      | X                     |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   | 5        |
| Adenoma   | X                     |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   | 1        |
| Fibroadenoma  | X                     |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   | 19       |
| Fibroadenoma, Multiple                              | X                     |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   | 8        |
| Skin  | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +        | + | 50       |
| Subcutaneous Tissue, Fibroma                        | +                     |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |   | 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: 20614 - 01

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

Date Report Requested: 07/25/2018

Test Type: CHRONIC

Perfluorooctanoic Acid

Time Report Requested: 12:58:26

Route: DOSED FEED

CAS Number: 335-67-1

First Dose M/F: 10/27/08 / 10/28/08

Species/Strain: RATS/HSD

Lab: BAT

|  |                       | DAY ON TEST           |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |
|--|-----------------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------|
| <b>HARLAN SPRAGUE DAWLEY RATS<br/>FEMALE<br/>150/300 ppm</b> |                       | ANIMAL ID             |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | * TOTALS         |          |
|  |                       | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>6 |                  |          |
| 0<br>0<br>4<br>6<br>2  | 0<br>0<br>4<br>6<br>9 | 0<br>0<br>4<br>7<br>8 | 0<br>0<br>4<br>7<br>9 | 0<br>0<br>5<br>1 | 0<br>0<br>5<br>9 | 0<br>0<br>3<br>3 | 0<br>0<br>4<br>4 | 0<br>0<br>3<br>3 | 0<br>0<br>4<br>4 | 0<br>0<br>4<br>4 | 0<br>0<br>4<br>4 | 0<br>0<br>4<br>4 | 0<br>0<br>4<br>5 | 0<br>0<br>5<br>6 | 0<br>0<br>7<br>6 | * TOTALS |

**MUSCULOSKELETAL SYSTEM**

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Skeletal Muscle              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Carcinoma, Metastatic, Ovary |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

**NERVOUS SYSTEM**

|       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**RESPIRATORY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenocarcinoma, Metastatic, Mammary Gland |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Adenocarcinoma, Metastatic, Uterus        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Carcinoma, Metastatic, Ovary              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Nose | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**SPECIAL SENSES SYSTEM**

|     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**URINARY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney                                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenocarcinoma, Metastatic, Mammary Gland |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Carcinoma, Metastatic, Ovary              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 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: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**  
 Perfluorooctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>150/300 ppm | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |    |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|----|
|   |                       | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>5      |                       |          |    |
| ANIMAL ID   | 0<br>0<br>4<br>6<br>2 | 0<br>0<br>4<br>7<br>9 | 0<br>0<br>4<br>3<br>1 | 0<br>0<br>4<br>3<br>9 | 0<br>0<br>4<br>4<br>1 | 0<br>0<br>4<br>4<br>5 | 0<br>0<br>4<br>4<br>3 | 0<br>0<br>4<br>4<br>7 | 0<br>0<br>4<br>5<br>6 | 0<br>0<br>4<br>5<br>7 | 0<br>0<br>4<br>5<br>7 | 0<br>0<br>4<br>5<br>6 | 0<br>0<br>4<br>5<br>7 |          |    |
| Lipoma  | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1  |
| Urinary Bladder                                     | +                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 50 |
| <b>SYSTEMIC LESIONS</b>                             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    |
| Multiple Organ                                      | +                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 50 |

\* .. 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: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 Perfluoroctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/1000 ppm | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|
|  |             | 0 | 0 | 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 | 0 | 0 | 0 | 0 | 0 | 0                    |

## ALIMENTARY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                                 | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Large, Cecum                    | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Large, Colon                    | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Large, Rectum                   | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Small, Duodenum                 | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Small, Ileum                    | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Small, Jejunum                  | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Adenocarcinoma, Metastatic, Uterus        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Liver                                     | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Adenocarcinoma, Metastatic, Uterus        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |
| Carcinoma, Metastatic, Stomach, Glandular |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Hepatocellular Adenoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatocellular Carcinoma                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mesentery                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |
| Pancreas                                  | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Adenocarcinoma, Metastatic, Uterus        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |
| Acinus, Adenoma                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Acinus, Carcinoma                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Salivary Glands                           | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |

\* .. 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: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 Perfluoroctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/1000 ppm | DAY ON TEST<br>ANIMAL ID | females<br>(cont...) |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   |   |
|--|--------------------------|----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|---|---|
|  |                          | 0<br>0<br>6<br>6     | 0<br>2<br>2<br>5 | 0<br>2<br>8<br>3 | 0<br>3<br>5<br>1 | 0<br>3<br>7<br>9 | 0<br>4<br>8<br>8 | 0<br>4<br>0<br>4 | 0<br>5<br>5<br>5 | 0<br>5<br>4<br>2 | 0<br>5<br>7<br>0 | 0<br>6<br>2<br>4 | 0<br>6<br>2<br>4 | 0<br>6<br>5<br>2 | 0<br>6<br>6<br>9 | 0<br>6<br>6<br>9 | 0<br>6<br>6<br>9 | 0<br>7<br>1<br>4 | 0<br>7<br>1<br>8 | 0<br>7<br>2<br>1 | 0<br>7<br>2<br>2 | 0<br>7<br>3<br>6 |   |   |   |
| Stomach, Forestomach<br>Squamous Cell Papilloma    | M                        | +                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |   |
| Stomach, Glandular<br>Carcinoma                    | M                        | +                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |   |
| <b>CARDIOVASCULAR SYSTEM</b>                       |                          |                      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   |   |
| Blood Vessel                                       | M                        | +                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |   |
| Heart  | M                        | +                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |   |
| <b>ENDOCRINE SYSTEM</b>                            |                          |                      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   |   |
| Adrenal Cortex                                     | M                        | +                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |   |
| Adrenal Medulla<br>Pheochromocytoma Benign         | M                        | +                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |   |
| Islets, Pancreatic<br>Adenoma                      | M                        | +                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |   |
| Parathyroid Gland<br>Adenoma                       | M                        | +                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |   |
| Pituitary Gland<br>Pars Distalis, Adenoma          | M                        | +                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | + |   |
| Thyroid Gland<br>Carcinoma, Metastatic, Pancreas   | M                        | +                    | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | X |   |
| C-cell, Adenoma                                    |                          |                      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | X |
| C-cell, Carcinoma                                  |                          |                      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |   | X |

\* .. 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: 20614 - 01

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

Date Report Requested: 07/25/2018

Test Type: CHRONIC

Perfluoroctanoic Acid

Time Report Requested: 12:58:26

Route: DOSED FEED

CAS Number: 335-67-1

First Dose M/F: 10/27/08 / 10/28/08

Species/Strain: RATS/HSD

Lab: BAT

|  |  | DAY ON TEST                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|--|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  |  | HARLAN SPRAGUE DAWLEY RATS<br>FEMALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|  |  | 0/1000 ppm                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|  |  | 0                                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|  |  | 0                                    | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 |   |
|  |  | 6                                    | 6 | 2 | 5 | 3 | 4 | 8 | 1 | 9 | 8 | 4 | 5 | 2 | 0 | 5 | 2 | 4 | 2 | 4 | 2 | 9 | 5 | 5 | 1 | 2 | 2 | 3 |   |
|  |  | 6                                    | 6 | 5 | 3 | 4 | 8 | 1 | 9 | 8 | 4 | 5 | 2 | 0 | 5 | 2 | 4 | 2 | 4 | 2 | 9 | 5 | 5 | 1 | 8 | 1 | 2 | 6 |   |
|  |  | 0                                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  |  | 0                                    | 0 | 0 | 0 | 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                                    | 5 | 4 | 5 | 4 | 5 | 5 | 4 | 5 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 4 | 5 | 4 | 5 | 5 | 5 | 4 | 5 | 5 |
|  |  | 8                                    | 3 | 9 | 2 | 8 | 1 | 0 | 9 | 1 | 8 | 2 | 3 | 2 | 2 | 4 | 0 | 9 | 2 | 8 | 0 | 0 | 2 | 1 | 9 | 1 | 1 | 9 | 8 |
|  |  | 4                                    | 2 | 2 | 0 | 8 | 7 | 7 | 7 | 0 | 6 | 7 | 3 | 4 | 5 | 0 | 6 | 0 | 6 | 9 | 9 | 2 | 9 | 6 | 8 | 8 | 8 | 8 |   |

females  
(cont...)

## GENERAL BODY SYSTEM

NONE

## GENITAL SYSTEM

Clitoral Gland

M + M +

Ovary

Adenocarcinoma, Metastatic, Uterus

M +

Uterus

Polyp Stromal

Sarcoma Stromal

Cervix, Adenocarcinoma

Endometrium, Adenocarcinoma

M +

X

X

X

X

Vagina

Squamous Cell Carcinoma

+

X

## HEMATOPOIETIC SYSTEM

Bone Marrow

+ +

Lymph Node

Adenocarcinoma, Metastatic, Uterus

+ +

Mediastinal, Adenocarcinoma, Metastatic,  
UterusPancreatic, Adenocarcinoma, Metastatic,  
Uterus

+ +

Lymph Node, Mandibular

M + + + M + M +

\* .. 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: 20614 - 01

Test Type: CHRONIC

Route: DOSED FEED

Species/Strain: RATS/HSD

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

Perfluorooctanoic Acid

CAS Number: 335-67-1

Date Report Requested: 07/25/2018

Time Report Requested: 12:58:26

First Dose M/F: 10/27/08 / 10/28/08

Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/1000 ppm | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |  |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|--|
|  |             | 0 | 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                    |  |
|  | 4           | 5 | 4 | 5 | 4 | 5 | 5 | 4 | 5 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 4 | 5 | 4 | 5 | 5 | 5 | 5 | 4 | 5                    |  |
| Lymph Node, Mesenteric                             | M           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X                    |  |
| Adenocarcinoma, Metastatic, Uterus                 |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |  |
| Spleen   | M           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |                      |  |
| Thymus   | M           | + | + | + | + | M | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + |                      |  |
| Adenocarcinoma, Metastatic, Uterus                 |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |  |
| Neural Crest Tumor                                 |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |  |

## INTEGUMENTARY SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland          | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + |   |
| Adenocarcinoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Fibroadenoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Fibroadenoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |

## MUSCULOSKELETAL SYSTEM

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|
| Bone                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |   |
| Vertebra, Osteosarcoma             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  | X |
| Skeletal Muscle                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  | + |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  | X |

## NERVOUS SYSTEM

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|
| Brain            | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |   |
| Peripheral Nerve |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  | + |

\* .. 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: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 Perfluoroctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/1000 ppm | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | * TOTALS |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----|----------|
|  |                       | 0<br>7<br>3<br>7      | 0<br>7<br>4<br>1      | 0<br>7<br>4<br>4      |                       |    |          |
| ANIMAL ID  | 0<br>0<br>5<br>0<br>0 | 0<br>0<br>4<br>9<br>5 | 0<br>0<br>4<br>8<br>5 | * TOTALS              |    |          |
|  | 0<br>0<br>5<br>0<br>0 | 0<br>0<br>4<br>9<br>5 | 0<br>0<br>4<br>8<br>5 |    |          |
| Esophagus  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 48 |          |
| Intestine Large, Cecum                             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49 |          |
| Intestine Large, Colon                             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49 |          |
| Intestine Large, Rectum                            | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49 |          |
| Intestine Small, Duodenum                          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49 |          |
| Intestine Small, Ileum                             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49 |          |
| Intestine Small, Jejunum                           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49 |          |
| Adenocarcinoma, Metastatic, Uterus                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| Liver  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49 |          |
| Adenocarcinoma, Metastatic, Uterus                 | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 3        |
| Carcinoma, Metastatic, Stomach, Glandular          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| Hepatocellular Adenoma                             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| Hepatocellular Carcinoma                           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 3        |
| Mesentery  | +                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 2        |
| Pancreas   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49 |          |
| Adenocarcinoma, Metastatic, Uterus                 | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 3        |
| Acinus, Adenoma                                    |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| Acinus, Carcinoma                                  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| Salivary Glands                                    | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 48 |          |

\* .. 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: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 Perfluoroctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/1000 ppm | DAY ON TEST                                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   | * TOTALS |   |
|--|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|---|----------|---|
|  |   | 0<br>7<br>3<br>7      | 0<br>7<br>4<br>1      | 0<br>7<br>4<br>4      |          |   |          |   |
| ANIMAL ID  | 0<br>0<br>5<br>0<br>0                           | 0<br>0<br>4<br>9<br>5 | 0<br>0<br>4<br>8<br>5 | * TOTALS |   |          |   |
|  | Stomach, Forestomach<br>Squamous Cell Papilloma | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | + | 49       |   |
| Stomach, Glandular<br>Carcinoma                    |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | X | 1        |   |
| <b>CARDIOVASCULAR SYSTEM</b>                       |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |          |   |
| Blood Vessel                                       | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | + | 49       |   |
| Heart  | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | + | 48       |   |
| <b>ENDOCRINE SYSTEM</b>                            |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |          |   |
| Adrenal Cortex                                     | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | + | 49       |   |
| Adrenal Medulla<br>Pheochromocytoma Benign         | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | + | 49       |   |
|  |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | X | 2        |   |
| Islets, Pancreatic<br>Adenoma                      | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | + | 49       |   |
|  |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1 |          |   |
| Parathyroid Gland<br>Adenoma                       | +   | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | M | 46       |   |
|  |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | X | 1        |   |
| Pituitary Gland<br>Pars Distalis, Adenoma          | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | + | 49       |   |
|  |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | X | 8        |   |
| Thyroid Gland<br>Carcinoma, Metastatic, Pancreas   | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | + | 48       |   |
|  |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | X | 1        |   |
| C-cell, Adenoma                                    |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |          | 3 |
| C-cell, Carcinoma                                  |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |          | 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:** 20614 - 01

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

**Test Type: CHRONIC**

**Route: DOSED FEED**

**Species/Strain:** RATS/HSD

## Perfluorooctanoic Acid

CAS Number: 335-67-1

**Date Report Requested:** 07/25/2018

**Time Report Requested:** 12:58:26

**First Dose M/F:** 10/27/08 / 10/28/08

## Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/1000 ppm | ANIMAL ID | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |          |
|--|-----------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|
|  |           | 0<br>7<br>3<br>7      | 0<br>7<br>4<br>1      | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>5      | 0<br>7<br>4<br>6      | 0<br>7<br>4<br>6      | 0<br>7<br>4<br>6      |                       |          |
|  |           | 0<br>0<br>5<br>0<br>0 | 0<br>0<br>4<br>9<br>5 | 0<br>0<br>4<br>8<br>1 | 0<br>0<br>4<br>8<br>2 | 0<br>0<br>4<br>8<br>3 | 0<br>0<br>4<br>8<br>3 | 0<br>0<br>4<br>9<br>7 | 0<br>0<br>4<br>9<br>3 | 0<br>0<br>4<br>9<br>6 | 0<br>0<br>4<br>9<br>3 | 0<br>0<br>4<br>9<br>6 | 0<br>0<br>4<br>9<br>3 | 0<br>0<br>4<br>9<br>6 | 0<br>0<br>4<br>9<br>3 | 0<br>0<br>4<br>9<br>6 | 0<br>0<br>4<br>9<br>2 | 0<br>0<br>4<br>9<br>1 | 0<br>0<br>4<br>9<br>3 | 0<br>0<br>4<br>9<br>5 | * TOTALS |

## **GENERAL BODY SYSTEM**

NONE

## **GENITAL SYSTEM**

## HEMATOPOIETIC SYSTEM

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

+ .. Tissue examined microscopically

X .. Lesion present

#### I. Insufficient tissue

#### M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20614 - 01

Test Type: CHRONIC

Route: DOSED FEED

Species/Strain: RATS/HSD

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

Perfluoroctanoic Acid

CAS Number: 335-67-1

Date Report Requested: 07/25/2018

Time Report Requested: 12:58:26

First Dose M/F: 10/27/08 / 10/28/08

Lab: BAT

|  | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |   |  |
|--|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|---|--|
|  |             | 0<br>7 |          |   |  |
| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/1000 ppm | ANIMAL ID   | 3<br>7 | 4<br>1 | 4<br>4 | 4<br>5 | 4<br>6 | 4<br>6 | 4<br>6 | 4<br>6 | * TOTALS |   |  |
|  |             | 0<br>0 |          |   |  |
|  |             | 5<br>0 | 4<br>9 | 4<br>8 | 4<br>9 | 5<br>0 | 5<br>0 | 5<br>0 | 5<br>0 |          |   |  |
|  |             | 0<br>0 | 5<br>5 | 1<br>5 | 2<br>1 | 2<br>2 | 3<br>3 | 3<br>5 | 7<br>7 | 3<br>3 | 6<br>6 | 8<br>8 | 6<br>6 | 3<br>3 | 4<br>4 | 5<br>5 | 8<br>8 | 2<br>2 | 5<br>5 | 1<br>1 | 2<br>2 | 1<br>1   |   |  |
|  |             | 0<br>0   |   |  |
| Lymph Node, Mesenteric                             |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 48       |   |  |
| Adenocarcinoma, Metastatic, Uterus                 |             | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 2 |  |
| Spleen   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 49       |   |  |
| Thymus   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 47       |   |  |
| Adenocarcinoma, Metastatic, Uterus                 |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |   |  |
| Neural Crest Tumor                                 |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |   |  |
| <b>INTEGUMENTARY SYSTEM</b>                        |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |   |  |
| Mammary Gland                                      |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 48       |   |  |
| Adenocarcinoma                                     |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |   |  |
| Fibroadenoma                                       |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 17       |   |  |
| Fibroadenoma, Multiple                             |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 3        |   |  |
| Skin   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 49       |   |  |
| Subcutaneous Tissue, Fibrosarcoma                  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |   |  |
| <b>MUSCULOSKELETAL SYSTEM</b>                      |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |   |  |
| Bone   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |   |  |
| Vertebra, Osteosarcoma                             |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |   |  |
| Skeletal Muscle                                    |             | +      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2        |   |  |
| Adenocarcinoma, Metastatic, Uterus                 |             | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2        |   |  |
| <b>NERVOUS SYSTEM</b>                              |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |   |  |
| Brain  |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 49       |   |  |
| Peripheral Nerve                                   |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 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

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 Perfluoroctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
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 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0/1000 ppm | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | * TOTALS |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----|----------|
|  |                       | 0<br>7<br>3<br>7      | 0<br>7<br>4<br>1      | 0<br>7<br>4<br>4      |                       |    |          |
| ANIMAL ID  | 0<br>0<br>5<br>0<br>0 | 0<br>0<br>4<br>9<br>5 | 0<br>0<br>4<br>8<br>5 | * TOTALS              |    |          |
|  | 0<br>0<br>5<br>0<br>0 | 0<br>0<br>4<br>9<br>5 | 0<br>0<br>4<br>8<br>5 |    |          |
| Lung   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 48 |          |
| Adenocarcinoma, Metastatic, Uterus                 | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 2        |
| Osteosarcoma, Metastatic, Bone                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| Nose   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Trachea  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 48 |          |
| SPECIAL SENSES SYSTEM                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |          |
| Eye  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Harderian Gland                                    | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49 |          |
| URINARY SYSTEM                                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |          |
| Kidney   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49 |          |
| Urinary Bladder                                    | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 48 |          |
| Adenocarcinoma, Metastatic, Uterus                 | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| SYSTEMIC LESIONS                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |          |
| Multiple Organ                                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Leukemia Mononuclear                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| Lymphoma Malignant                                 | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |

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

+ .. Tissue examined microscopically

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**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**  
 Perfluorooctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>300/1000 ppm | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |   |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|
|  |             | 0 | 0 | 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  | 1           | 3 | 3 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6                    | 6 |
|  | 8           | 9 | 9 | 4 | 5 | 5 | 7 | 9 | 0 | 7 | 8 | 1 | 2 | 2 | 3 | 3 | 4 | 7 | 3 | 3 | 3 | 6 | 7 | 7 | 8 | 9                    |   |
| 3  | 1           | 3 | 0 | 4 | 4 | 7 | 2 | 1 | 8 | 4 | 9 | 7 | 4 | 2 | 4 | 4 | 8 | 7 | 3 | 3 | 3 | 6 | 7 | 7 | 8 | 9                    |   |
|  | 4           | 5 | 5 | 8 | 7 | 6 | 1 | 1 | 2 | 2 | 6 | 7 | 5 | 6 | 9 | 7 | 8 | 0 | 1 | 7 | 7 | 8 | 3 | 5 | 0 |                      |   |

## ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Large, Cecum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Large, Colon   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Large, Rectum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Small, Duodenum<br>Adenocarcinoma, Metastatic, Pancreas  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Small, Ileum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Small, Jejunum<br>Adenocarcinoma, Metastatic, Pancreas   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Liver<br>Adenocarcinoma, Metastatic, Pancreas<br>Adenocarcinoma, Metastatic, Uterus<br>Cholangioma<br>Hepatocellular Adenoma<br>Hepatocellular Carcinoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Oral Mucosa<br>Squamous Cell Carcinoma   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |
| Pancreas<br>Acinus, Adenoma<br>Acinus, Carcinoma   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X |   |

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+ .. Tissue examined microscopically

X .. Lesion present

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BLANK .. Not examined microscopically

Experiment Number: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 Perfluorooctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>300/1000 ppm | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |   |                      |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|----------------------|
|  |             | 0 | 0 | 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  | 1           | 3 | 3 | 4 | 4 | 4 | 4 | 5 | 5 | 7 | 8 | 9 | 1 | 2 | 1 | 8 | 4 | 9 | 7 | 1 | 2 | 4 | 2 | 3 | 3 | 4                    | 7 | females<br>(cont...) |
|  | 5           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5                    | 5 |                      |

Duct, Adenocarcinoma

X

Salivary Glands

+

Stomach, Forestomach

+

Adenocarcinoma, Metastatic, Pancreas

X

Leiomyosarcoma

X

Squamous Cell Papilloma

X

Stomach, Glandular

+

Leiomyosarcoma, Metastatic, Stomach,  
Forestomach

X

## CARDIOVASCULAR SYSTEM

Blood Vessel

+

Heart

+

## ENDOCRINE SYSTEM

Adrenal Cortex

+

Adrenal Medulla

+

Pheochromocytoma Benign  
Pheochromocytoma Malignant

X

Islets, Pancreatic  
Adenoma

+

Parathyroid Gland

+

Pituitary Gland

+

\* .. 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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|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
|  |             | 0 | 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  | 1           | 3 | 3 | 4 | 4 | 4 | 4 | 5 | 5 | 7 | 8 | 9 | 1 | 2 | 4 | 7 | 9 | 1 | 2 | 4 | 7 | 8 | 9 | 1 | 2 |  |
|  | 8           | 9 | 9 | 4 | 5 | 5 | 7 | 9 | 0 | 7 | 8 | 9 | 1 | 2 | 4 | 7 | 9 | 1 | 2 | 4 | 7 | 8 | 9 | 1 | 2 |  |
|  | 3           | 1 | 3 | 0 | 4 | 4 | 7 | 2 | 1 | 8 | 4 | 9 | 7 | 4 | 2 | 4 | 7 | 9 | 1 | 2 | 4 | 7 | 8 | 9 | 0 |  |
|  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
|  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
| Pars Distalis, Adenoma                               |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | X |   |   |   |   |  |
| Thyroid Gland  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Bilateral, C-cell, Adenoma                           |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| C-cell, Adenoma                                      |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

females  
(cont...)

## GENERAL BODY SYSTEM

NONE

## GENITAL SYSTEM

Clitoral Gland

Ovary

Adenocarcinoma, Metastatic, Pancreas

Uterus

Adenocarcinoma, Metastatic, Pancreas

Polyp Stromal

Endometrium, Adenocarcinoma

+

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## HEMATOPOIETIC SYSTEM

Bone Marrow

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Lymph Node

Pancreatic, Sarcoma, Metastatic, Stomach,  
Forestomach

+

X

Lymph Node, Mandibular

M

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

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  |             | 0 | 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  | 1           | 3 | 3 | 4 | 4 | 4 | 4 | 5 | 5 | 7 | 8 | 9 | 1 | 2 | 4 | 7 | 9 | 1 | 2 | 4 | 7 | 3 | 7 | 6 | 7 |
|  | 8           | 9 | 9 | 4 | 5 | 5 | 7 | 9 | 0 | 7 | 8 | 1 | 2 | 2 | 3 | 3 | 4 | 7 | 3 | 7 | 3 | 7 | 6 | 7 | 8 |
|  | 3           | 1 | 3 | 0 | 4 | 4 | 7 | 2 | 1 | 8 | 4 | 9 | 7 | 4 | 2 | 4 | 8 | 7 | 3 | 7 | 3 | 7 | 6 | 7 | 8 |
|  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Trachea  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

### SPECIAL SENSES SYSTEM

|                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Eye                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Harderian Gland             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Zymbal's Gland<br>Carcinoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

### URINARY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney<br>Adenocarcinoma, Metastatic, Pancreas<br>Renal Tubule, Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Urinary Bladder<br>Adenocarcinoma, Metastatic, Pancreas                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

### SYSTEMIC LESIONS

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Multiple Organ<br>Leukemia Mononuclear | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

\* .. 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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Experiment Number: 20614 - 01

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**Test Type:** CHRONIC

**Route:** DOSED FEED

**Species/Strain:** RATS/HSD

## Perfluorooctanoic Acid

**CAS Number:** 335-67-1

Time Report Requested: 12:58:26

**First Dose M/E:** 10/27/08 / 10/28/08

## Lab: BAT

## Lab: BAI

## **ALIMENTARY 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

X .. Lesion present

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|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|----|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |    |
| ANIMAL ID  | 6           | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        |    |
|  | 9           | 1 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4        |    |
|  | 5           | 8 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4        |    |
|  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 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 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5        |    |
|  | 8           | 5 | 5 | 5 | 5 | 6 | 6 | 8 | 8 | 9 | 9 | 9 | 9 | 4 | 4 | 5 | 6 | 6 | 8 | 9 | 4 | 4        |    |
|  | 2           | 9 | 2 | 8 | 3 | 4 | 6 | 9 | 0 | 2 | 4 | 6 | 8 | 9 | 4 | 4 | 6 | 9 | 4 | 9 | 3 | 4        |    |
|  | 2           | 9 | 2 | 8 | 3 | 4 | 6 | 9 | 0 | 2 | 4 | 6 | 8 | 9 | 4 | 4 | 6 | 9 | 4 | 9 | 3 | 4        |    |
| Duct, Adenocarcinoma                                 |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 1  |
| Salivary Glands                                      |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +        | 50 |
| Stomach, Forestomach                                 |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +        | 50 |
| Adenocarcinoma, Metastatic, Pancreas                 |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 1  |
| Leiomyosarcoma                                       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 1  |
| Squamous Cell Papilloma                              |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 1  |
| Stomach, Glandular                                   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +        | 50 |
| Leiomyosarcoma, Metastatic, Stomach,<br>Forestomach  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 1  |
| <b>CARDIOVASCULAR SYSTEM</b>                         |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |    |
| Blood Vessel   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +        | 50 |
| Heart  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +        | 50 |
| <b>ENDOCRINE SYSTEM</b>                              |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |    |
| Adrenal Cortex                                       |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +        | 50 |
| Adrenal Medulla                                      |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +        | 50 |
| Pheochromocytoma Benign                              |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 1  |
| Pheochromocytoma Malignant                           |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 1  |
| X  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |    |
| Islets, Pancreatic<br>Adenoma                        |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +        | 50 |
| X  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 2  |
| Parathyroid Gland                                    |             | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +        | 48 |
| Pituitary Gland                                      |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +        | 50 |

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

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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

|                            |   |   |   |    |
|----------------------------|---|---|---|----|
| Pars Distalis, Adenoma     | X | X | X | 5  |
| Thyroid Gland              | + | + | + | 50 |
| Bilateral, C-cell, Adenoma |   |   |   | 1  |
| C-cell, Adenoma            |   |   | X | 3  |

## GENERAL BODY SYSTEM

NONE

## GENITAL SYSTEM

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Clitoral Gland                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Ovary                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenocarcinoma, Metastatic, Pancreas |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Uterus                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenocarcinoma, Metastatic, Pancreas |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Polyp Stromal                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Endometrium, Adenocarcinoma          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

## HEMATOPOIETIC SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Pancreatic, Sarcoma, Metastatic, Stomach,<br>Forestomach |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymph Node, Mandibular                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |

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

+ .. Tissue examined microscopically

X .. Lesion present

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|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----|
|  |                       | 0<br>6<br>9<br>5      | 0<br>7<br>1<br>8      | 0<br>7<br>4<br>4      |                       |                       |    |
| ANIMAL ID  | 0<br>0<br>5<br>8<br>2 | 0<br>0<br>5<br>5<br>9 | 0<br>0<br>5<br>5<br>2 | 0<br>0<br>5<br>5<br>8 | 0<br>0<br>5<br>6<br>3 | 0<br>0<br>8<br>8<br>4 | 0<br>0<br>8<br>9<br>9 | 0<br>0<br>9<br>9<br>0 | 0<br>0<br>9<br>9<br>2 | 0<br>0<br>9<br>9<br>4 | 0<br>0<br>9<br>9<br>6 | 0<br>0<br>9<br>9<br>8 | 0<br>0<br>9<br>9<br>9 | 0<br>0<br>9<br>9<br>4 | 0<br>0<br>9<br>9<br>5 | 0<br>0<br>9<br>9<br>6 | 0<br>0<br>9<br>9<br>6 | 0<br>0<br>9<br>9<br>9 | 0<br>0<br>9<br>9<br>4 | 0<br>0<br>9<br>9<br>3 | 0<br>0<br>9<br>9<br>4 | 0<br>0<br>9<br>9<br>0 |    |
| Lymph Node, Mesenteric                                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 48                    |    |
| Spleen   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |    |
| Thymus   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | M                     | +                     | +                     | +                     | 47                    |    |
| <b>INTEGUMENTARY SYSTEM</b>                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Mammary Gland  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |    |
| Adenocarcinoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       | 4  |
| Adenoma  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Fibroadenoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 10 |
| Fibroadenoma, Multiple                                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2  |
| Skin   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |    |
| Subcutaneous Tissue, Fibrosarcoma                          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       | 1  |
| <b>MUSCULOSKELETAL SYSTEM</b>                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Bone   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |    |
| <b>NERVOUS SYSTEM</b>                                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Brain  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |    |
| <b>RESPIRATORY SYSTEM</b>                                  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Lung   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |    |
| Pheochromocytoma Malignant, Metastatic,<br>Adrenal Medulla |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       | 1  |
| Nose   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |    |

\* .. 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: 20614 - 01  
 Test Type: CHRONIC  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 Perfluorooctanoic Acid  
 CAS Number: 335-67-1

Date Report Requested: 07/25/2018  
 Time Report Requested: 12:58:26  
 First Dose M/F: 10/27/08 / 10/28/08  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>300/1000 ppm | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |         |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|---------|
|  |                       | 0<br>6<br>9<br>5      | 0<br>7<br>1<br>8      | 0<br>7<br>4<br>4      |                       |          |         |
| ANIMAL ID  | 0<br>0<br>5<br>8<br>2 | 0<br>0<br>5<br>5<br>9 | 0<br>0<br>5<br>5<br>2 | 0<br>0<br>5<br>5<br>8 | 0<br>0<br>5<br>6<br>3 | 0<br>0<br>8<br>8<br>4 | 0<br>0<br>8<br>9<br>9 | 0<br>0<br>9<br>9<br>0 | 0<br>0<br>9<br>9<br>2 | 0<br>0<br>9<br>9<br>4 | 0<br>0<br>9<br>9<br>6 | 0<br>0<br>9<br>9<br>8 | 0<br>0<br>9<br>9<br>4 | 0<br>0<br>9<br>9<br>6 | 0<br>0<br>9<br>9<br>9 | 0<br>0<br>9<br>9<br>4 | 0<br>0<br>9<br>9<br>6 | 0<br>0<br>9<br>9<br>8 | 0<br>0<br>9<br>9<br>4 | 0<br>0<br>9<br>9<br>6 | 0<br>0<br>9<br>9<br>8 |          |         |
| Trachea  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |         |
| <b>SPECIAL SENSES SYSTEM</b>                         |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |         |
| Eye  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50      |
| Harderian Gland                                      | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50      |
| Zymbal's Gland<br>Carcinoma                          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1<br>1  |
| <b>URINARY SYSTEM</b>                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |         |
| Kidney   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50      |
| Adenocarcinoma, Metastatic, Pancreas                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1       |
| Renal Tubule, Adenoma                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1       |
| X  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |         |
| Urinary Bladder                                      | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50      |
| Adenocarcinoma, Metastatic, Pancreas                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1       |
| <b>SYSTEMIC LESIONS</b>                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |         |
| Multiple Organ<br>Leukemia Mononuclear               | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50<br>2 |
| X  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |         |

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

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

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