

## INSTRUCTIONS FOR TABLE 5.1

### NON-CANCER TOXICITY DATA - ORAL/DERMAL

<p><b>PURPOSE OF THE TABLE:</b></p> <ul style="list-style-type: none"> <li>• To provide information on RfDs, target organs, and adjustment factors for chemicals</li> <li>• To provide oral to dermal adjustment factors</li> <li>• To verify references for non-cancer toxicity data.</li> </ul>	
<p><b>INFORMATION DOCUMENTED:</b></p> <ul style="list-style-type: none"> <li>• The RfDs for each of the COPCs, as well as modifying factors and oral to dermal adjustments</li> <li>• The organ effects of each of the COPCs</li> <li>• References for RfDs and organ effects.</li> </ul>	<p><i>Surrogate toxicity values can also be entered in this table and indicated in the Source(s) column or with a footnote.</i></p>
<p><b>TABLE NUMBERING INSTRUCTIONS:</b></p> <ul style="list-style-type: none"> <li>• Complete one copy of this table only.</li> <li>• Number it Table 5.1.</li> <li>• The table should contain a row for each COPC considered.</li> </ul>	<p><i>If chronic and subchronic effects are listed for the same COPC, two rows will be required.</i></p>
<p><b>GENERAL NOTES/INSTRUCTIONS FOR THIS TABLE:</b></p> <ul style="list-style-type: none"> <li>• Table 5.1 does not replace the toxicological profiles for the individual chemicals that will be presented in the risk assessment.</li> </ul>	<p><i>It may be necessary to refer to RAGS, the risk assessment technical approach, and the EPA risk assessor to complete the table.</i></p>
<p><b>HOW TO COMPLETE/INTERPRET THE TABLE</b></p>	
<p><b>Column 1 - Chemical of Potential Concern</b></p>	
<p>Definition:</p> <ul style="list-style-type: none"> <li>• Chemicals that are potentially site-related, with data of sufficient quality, that have been retained for quantitative analysis as a result of the screening documented in Table 2.</li> </ul>	
<p>Instructions:</p> <ul style="list-style-type: none"> <li>• Enter the names of the chemicals that were selected as COPCs from Table 2.</li> </ul>	<p><i>Chemicals can be grouped in the order that the risk assessor prefers. Class descriptions (e.g., PAHs, VOCs, inorganics) can be included as a row before a group of chemicals.</i></p>
<p><b>Column 2 - Chronic/Subchronic</b></p>	
<p>Definition:</p> <ul style="list-style-type: none"> <li>• Identifies whether the RfD for a particular chemical is for chronic (long-term) and/or subchronic (short-term) exposure.</li> </ul>	

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### NON-CANCER TOXICITY DATA - ORAL/DERMAL (continued)

<p>Instructions:</p> <ul style="list-style-type: none"> <li>• Enter either “Chronic” or “Subchronic” in the field. Both values may be available for an individual COPC.</li> <li>• Subchronic values may not be available or necessary for an individual COPC. If that is the case, enter only “Chronic” in Column 2.</li> </ul>	<p><i>Chronic</i> <i>Subchronic</i></p>
<b>Column 3 - Oral RfD Value</b>	
<p>Definition:</p> <ul style="list-style-type: none"> <li>• The oral RfD value for each of the COPCs.</li> </ul>	
<p>Instructions:</p> <ul style="list-style-type: none"> <li>• Enter the value for the chronic and/or subchronic oral RfD (as appropriate).</li> </ul>	
<b>Column 4 - Oral RfD Units</b>	
<p>Definition:</p> <ul style="list-style-type: none"> <li>• The oral RfD units for each COPC.</li> </ul>	
<p>Instructions:</p> <ul style="list-style-type: none"> <li>• Enter units for each oral RfD value as necessary.</li> </ul>	<p><i>Consult the EPA risk assessor to determine if there is a preference regarding the units to be used.</i></p>
<b>Column 5 - Oral Absorption Efficiency Value for Dermal</b>	
<p>Definition:</p> <ul style="list-style-type: none"> <li>• The adjustment factor used to convert oral RfD values to dermal RfD values. This value is an oral absorption factor.</li> </ul>	
<p>Instructions:</p> <ul style="list-style-type: none"> <li>• Enter the adjustment factor in this column.</li> <li>• Use a footnote to indicate the source of the Oral Absorption Efficiency for Dermal. Also, specify the section of the risk assessment text where the derivation of the Oral Absorption Efficiency for Dermal can be found.</li> </ul>	
<b>Column 6 - Absorbed RfD for Dermal Value</b>	
<p>Definition:</p> <ul style="list-style-type: none"> <li>• The adjusted RfD for each COPC detected that is derived from the oral RfD.</li> </ul>	

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### NON-CANCER TOXICITY DATA - ORAL/DERMAL (continued)

<p>Instructions:</p> <ul style="list-style-type: none"> <li>Enter the value that was derived from the adjustment factor in Column 5.</li> <li>In a footnote on this table, reference the section of the risk assessment text where the derivation of the Absorbed RfDs for Dermal can be found.</li> </ul>	<p><i>Derivations of the Absorbed RfD for Dermal should be performed in as directed by the EPA risk assessor.</i></p>
<p><b>Column 7 - Absorbed RfD for Dermal Units</b></p>	
<p>Definition:</p> <ul style="list-style-type: none"> <li>The units associated with the Absorbed RfD for Dermal value for each COPC.</li> </ul>	
<p>Instructions:</p> <ul style="list-style-type: none"> <li>Enter units for each Absorbed RfD for Dermal value as necessary.</li> </ul>	<p><i>Consult the EPA risk assessor to determine if there is a preference regarding the units to be used.</i></p>
<p><b>Column 8 - Primary Target Organ(s)</b></p>	
<p>Definition:</p> <ul style="list-style-type: none"> <li>The organ(s) most affected (i.e., experiences critical effects) by chronic or subchronic exposure to the specific COPC, and upon which the RfD is based.</li> </ul>	
<p>Instructions:</p> <ul style="list-style-type: none"> <li>Enter the name of the most affected organ or organ system in the column. If the critical effect (the one on which the RfD is based) involves multiple target organs, they should be shown, separated by a ‘/.’ Target organs that are affected at higher doses should not be shown.</li> </ul>	
<p><b>Column 9 - Combined Uncertainty/Modifying Factors</b></p>	
<p>Definition:</p> <ul style="list-style-type: none"> <li>The factors applied to the critical effect level to account for areas of uncertainty inherent in extrapolation from available data.</li> </ul>	<p><i>NOAELs. Refer to IRIS, HEAST, or other source for these values. Examples of uncertainty to be addressed include:</i></p> <ul style="list-style-type: none"> <li><i>- variations in the general population</i></li> <li><i>- interspecies variability between humans and animals</i></li> <li><i>- use of subchronic data for chronic evaluation</i></li> <li><i>- extrapolation from LOAELs to</i></li> </ul>
<p>Instructions:</p> <ul style="list-style-type: none"> <li>Enter number obtained from IRIS, HEAST, or other source.</li> </ul>	<p><i>Refer to IRIS, HEAST, or other source for these values.</i></p>

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### NON-CANCER TOXICITY DATA - ORAL/DERMAL (continued)

<b>Column 10 - RfD: Target Organ(s) Source(s)</b>	
<p>Definition:</p> <ul style="list-style-type: none"> <li>• The source of the RfD and target organ information.</li> </ul>	
<p>Instructions:</p> <ul style="list-style-type: none"> <li>• Enter the source of the RfD and target organ information. Use a colon to delineate multiple sources if the sources of information are different for RfD and target organ.</li> </ul>	<p><i>IRIS</i> <i>HEAST</i> <i>NCEA</i> <i>OTHER</i></p>
<b>Column 11 - RfD: Target Organ(s) Dates (MM/DD/YYYY)</b>	
<p>Definition:</p> <ul style="list-style-type: none"> <li>• The date of the source that was consulted for the RfD and target organ information in MM/DD/YYYY format.</li> </ul>	<p><i>The MM/DD/YYYY format refers to month/day/year.</i></p>
<p>Instructions:</p> <ul style="list-style-type: none"> <li>• Enter the date, in MM/DD/YYYY format, for both RfD and target organ information. Use a colon to delineate multiple dates if the dates of information are different for RfD and target organ.</li> <li>• <i>For IRIS references, provide the date IRIS was searched.</i></li> <li>• <i>For HEAST references, provide the date of the HEAST reference.</i></li> <li>• <i>For NCEA references, provide the date of the information provided by NCEA.</i></li> </ul>	<p><i>For example, the MM/DD/YYYY version of the date March 30, 1995 is 03/30/1995.</i></p>