

Results updated between these given dates

REVIEWED*By Chris at 11:56 am, Sep 17, 2020*

Minimal Risk Levels (MRLs) for Hazardous

Minimal Risk Levels (MRLs) – For Prof

[MRL Information for the General Public](#)[List of ATSDR MRLs](#)

Narrative

The Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) amended by the Superfund Amendments and Reauthorization Act (SARA) [Pub. L. 99 49] for Toxic Substances and Disease Registry (ATSDR) develop jointly with the U.S. Environmental Protection Agency (EPA), in order of priority, a list of hazardous substances most commonly found at facilities on the National Priorities List (NPL) (42 U.S.C. 9604(i)(2)); prepare toxicological profiles for each substance on the list; determine Minimal Risk Levels (MRLs) for each hazardous substance, and to ascertain significant human exposure levels (SHELs) for each hazardous substance in the environment, and the associated acute, subacute, and chronic health effects (42 U.S.C. 9604(i)(3)); and the initiation of a research program to fill identified data needs associated with the substances on the list.

The ATSDR Minimal Risk Levels (MRLs) were developed as an initial response to the mandate of CERCLA and SARA in consultation with scientists within the Department of Health and Human Services (HHS) and the EPA. The MRL practice is similar to that of the EPA's Reference Dose (RfD) and Reference Concentration (RfC) for specific health guidance levels for non-neoplastic endpoints. An MRL is an estimate of the level of a hazardous substance that is likely to be without appreciable risk of adverse non-cancer effects over a duration of exposure. These substance specific estimates, which are intended to serve as a guide for use by ATSDR health assessors and other responders to identify contaminants and potential areas of concern at hazardous waste sites. It is important to note that MRLs are not intended to be used as MRLs for ATSDR or other Agencies.

The toxicological profiles include an examination, summary, and interpretation of available

and epidemiologic evaluations of a hazardous substance. During the development of the MRL, ATSDR determines the most sensitive health effect(s) for a specific duration for a given route of exposure to the substance. MRLs are based on non-cancer health effects only and are not based on a consideration of cancer effects. MRLs are derived from exposure concentrations expressed in units of parts per million (ppm) for gases and voltmeter (mg/m³) for particles. Oral MRLs are expressed as daily human doses in units of milligrams per kilogram per day (mg/kg/day). Radiation MRLs are expressed as external exposures in units of millisieverts per year (mSv/yr).

ATSDR uses the no observed adverse effect level/uncertainty factor (NOAEL/UF) approach to derive MRLs for hazardous substances. They are set below levels that, based on current information, might cause adverse effects in the people most sensitive to such substance-induced effects. MRLs are derived for acute (14-364 days), intermediate (>14-364 days), and chronic (365 days and longer) exposure durations, and for various routes of exposure. Currently MRLs for the dermal route of exposure are not derived because ATSDR has not identified a method suitable for this route of exposure. MRLs are generally based on the lowest adverse effect level (LAE) or the lowest observed adverse effect level (LOAEL) induced end point considered to be of relevance to humans. ATSDR does not use serious or irreversible damage to the liver or kidneys, or birth defects) as a basis for establishing MRLs. Exposure above the MRL does not mean that adverse health effects will occur.

MRLs are intended to serve as a screening tool to help public health professionals decide whether further action is warranted. They may also be viewed as a mechanism to identify those hazardous waste sites that are likely to cause adverse health effects. Most MRLs contain some degree of uncertainty because of the limited information on the people who might be most sensitive (e.g., infants, elderly, and nutritionally compromised) to effects of hazardous substances. ATSDR uses a conservative (i.e., protective) approach to these uncertainties consistent with the public health principle of prevention. Although MRLs often must be based on animal studies because relevant human studies are lacking, to the contrary, ATSDR assumes that humans are more sensitive than animals to the effects of hazardous substances and that certain persons may be particularly sensitive. Thus the resulting MRL may be as much as 100 times lower than the levels shown to be nontoxic in laboratory animals. When adequate information is available, ATSDR uses pharmacokinetic (PBPK) modeling and benchmark dose (BMD) modeling have also been used in addition to the NOAEL/UF approach in deriving MRLs.

Proposed MRLs undergo a rigorous review process. They are reviewed by the Health Effects Institute (HEI) and the Division of Toxicology and Human Health Sciences; an expert panel of external peer reviewers; the MRL Workgroup, with participation from other federal agencies, including EPA; and are made available for public comment through the toxicological profile public comment period. Each MRL is subject to public comment. MRLs become available concomitant with updating the toxicological profile of the substance. New MRLs supersede previously published levels. Follow [this link](#) to see our current MRLs.

ATSDR Contact Person for MRLs:

Further information can be obtained by contacting the ATSDR Information Center at:

Agency for Toxic Substances and Disease Registry
Division of Toxicology and Human Health Sciences
1600 Clifton Road NE, Mailstop F-57
Atlanta, GA 30329
Phone: 1-800-CDC-INFO 888-232-6348 (TTY)
Email: [Contact CDC-INFO](#)

Contact Us

Agency for Toxic Substances and Disease Registry
4770 Buford Hwy NE
Atlanta, GA 30341
800-CDC-INFO • (800-232-4636) • TTY: (888) 232-6348

New Hours of Operatio
8am-8pm ET/Monday-F
Closed Holidays
[Contact CDC-INFO](#)