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2019 Priority 1 List for HEAC PEL Review

Chemical	CAS #	TLV/STEL	PEL/STEL/C	ACGIH/NIOSH/EPA/OEHHA	EPA	CERS	FACTOR
methanol	67561	200/250	200/250/1000	Headache, eye dam, nausea, skin BEI; EPA: developmental	10-20B	468	5
1-Bromopropane (1-BP)	106945	0.1	5	CNS impair; dev/repro; peripheral neuropathy; OEHHA: cancer	10-50M	61	1
Diethylene Glycol Monobutyl Ether	112345	10 IFV	-	Hematologic, liver and kidney effects	100-250M	1830	3
dicyclopentadiene	77736	0.1/1	5	Irr, Kidney lesions	250-500 M	12	2
monochloroacetic acid	79118	0.5	-	URT irr, skin	50-100M	103	3
di(2-ethylhexyl)phthalate (DEHP)	117817	0.5	5	reproductive; teratogenic (2018)	-	6	1,4
p-chloro-α,α,α-trifluorotoluene (PCBTF)	98566	-	-	IARC, NTP: Under cancer review	10-50M	681	3
Carbon tetrachloride	56235	5/10	2/10/200	Liver damage; OEHHA: cancer	100-250M	129	4
phthalic anhydride	85449	0.002	1	DSEN; RSEN	500-750M	6	2,4
titanium dioxide, ultrafine (<100 nm)	13463677	0.3	5^R	NIOSH: cancer	10-50M	81	2

TLV/STEL: 8-hour /15-min. Units vary: mg/m^3 or ppm.
PEL/STEL/C: CalOSHA Permissible Exposure Limit: 8-hr/15-min/Ceiling. Units vary: mg/m^3 or ppm.
ACGIH/NIOSH/EPA/OEHHA: Health basis for substance as reported by ACGIH, NIOSH, EPA or OEHHA.
EPA: national chemical usage data obtained from EPA Chemview (tons per years)
CERS: chemical usage data obtained from California Environmental Reporting System (number of companies storing substance on site)
FACTOR: Key consideration used for P1 ranking – see list below.

Priority substances will be ranked for review based on the following considerations:

1. Evidence of a serious potential hazard not adequately addressed by existing regulations of the Division or other governmental agency.
2. A substantial change in the value of an OEL that could contribute to increased protection of workers if adhered to by employers.
3. The degree to which a substance is in widespread use in California or to which there are other indications of pervasive and potentially hazardous worker exposure to the substance.
4. The seriousness of the nature of the health hazard presented by the substance. For example, substances with apparent potential for cancer, reproductive, developmental, or sensitizing effects would generally receive a higher priority for consideration than substances where the major hazard potential is mild respiratory irritation
5. The potential for exposure in California (#3) in combination with the degree of hazard (#4). For example, a limited exposure to a highly toxic substance may be just as significant as widespread exposure to a less toxic substance