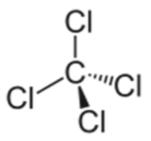
Final Risk Evaluation for Carbon Tetrachloride

Systematic Review Supplemental File:

Data Quality Evaluation of Human Health Hazard Studies – Epidemiological Studies

CASRN: 56-23-5



October 2020

Table Listing

1	Davis 1934: Evaluation of Acute Toxicity/Poisoning Outcomes	3
2	Radican et al., 2008: Evaluation of Cancer Outcomes	5
3	Radican et al., 2008: Evaluation of Respiratory Outcomes	8
4	Gold et al., 2010: Evaluation of Cancer Outcomes	11
5	Roberts et al., 2013: Evaluation of Neurological/Behavior Outcomes	13
6	Goldman et al., 2012: Evaluation of Neurological/Behavior Outcomes	16
7	Neta et al., 2012: Evaluation of Cancer Outcomes	19
8	Ruder et al., 2013: Evaluation of Cancer Outcomes	22
9	Vizcaya et al., 2013: Evaluation of Cancer Outcomes	25
10	Morales-Suárez-Varela et al., 2013: Evaluation of Cancer Outcomes	28
11	Heck et al., 2013: Evaluation of Cancer Outcomes	31
12	Davis 1934: Evaluation of Hematological And Immune Outcomes	34
13	Mattei et al., 2014: Evaluation of Cancer Outcomes	36
14	Garcia et al., 2015: Evaluation of Cancer Outcomes	38
15	Carton et al., 2017: Evaluation of Cancer Outcomes	41
16	Nelson et al., 2012: Evaluation of Cancer Outcomes	44
17	Purdue et al., 2016: Evaluation of Cancer Outcomes	47
18	Dow Chemical, Co 1992: Evaluation of Cancer Outcomes	49
19	Davis 1934: Evaluation of Renal Outcomes	52
20	Davis 1934: Evaluation of Cardiovascular Outcomes	54
21	Siemiatycki 1991: Evaluation of Cancer Outcomes	56
22	Heineman et al., 1994: Evaluation of Cancer Outcomes	58
23	Seidler et al., 2007: Evaluation of Cancer Outcomes	61
24	Dosemeci et al., 1999: Evaluation of Cancer Outcomes	64
25	Wang et al., 2009: Evaluation of Cancer Outcomes	66

Data Type: HERO ID:	3611	4_controlled_inhalation_exposure_clinicalobs-Acu	te Toxicity/1 ofse	Jiilig		
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
Domain 1: Study	Participation					
	Metric 1:	Participant Selection	Low	× 0.4	1.2	Eight controlled experiments were conducted in total. Each of periment consisted of three to four individuals and one group individuals was used for two experiments. Age and basic cli cal measurements were provided for each subject. Some subje may have been used for multiple experiments, but this is uncle The method of recruitment was not described and demograph details, including sex, were not provided.
	Metric 2:	Attrition	Medium	$\times 0.4$	0.8	Subjects differed for all experiments but one. The reason for t change from experiment to experiment is not fully described.
	Metric 3:	Comparison Group	Low	$\times 0.2$	0.6	No control group was used in this study. The measured outcon were presumably compared to reference values, but the deta are not clear.
Domain 2: Expo	sure Characte	rization				
	Metric 4:	Measurement of Exposure	Low	× 0.4	1.2	The inhalation chamber was adequately described. The meth of creating the inhalation exposure and the method to monitor exposure level were not described. Source and purity of the article are not reported. Exposure duration varied by expos- level. The seventh experiment described determining the carb tetrachloride concentration by the alcohol potassium hydrox and combustion method, but it is unclear if this was used for ot experiments.
	Metric 5:	Exposure Levels	Low	× 0.2	0.6	Multiple exposure levels were examined in this study includ 76 ppm, 158 ppm, 317 ppm, 1191 ppm, 2300 ppm and additio unreported levels, but exposure duration varied by exposure or centration.
	Metric 6:	Temporality	Low	× 0.4	1.2	This study was a controlled inhalation exposure. The timing outcome measurement was not fully described in the text a remains unclear, although it is presumed that measurements w taken after controlled exposure to carbon tetrachloride.
Domain 3: Outco	ome Assessm	ent				
	Metric 7:	Outcome Measurement or Characterization	Low	× 0.667	2	Clinical observations were described, if present. Hematolo urinalysis, and vital measurements were taken, but the methh or other details on outcome measurement were not reported, was not reported whether outcome investigators were blinded exposure during treatment.
	Metric 8:	Reporting Bias	Medium	× 0.333	0.67	Outcomes were outlined throughout the paper and clinical obs vations were described.
Domain 4: Poten	tial Confound	ling/Variable Control				

Table 1: Davis 1934: Evaluation of Acute Toxicity/Poisoning Outcomes

Study Citation: Data Type: HERO ID:		(1934). Carbon tetrachloride as an industrial hazar 4_controlled_inhalation_exposure_clinicalobs-Acu			Iedical A	Association, 103(13,13), 962-966
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
	Metric 9:	Covariate Adjustment	Low	× 0.667	2	A statistical analysis was not conducted. Age of the test sub- jects was provided, but no other demographic information was presented or adjusted for.
	Metric 10:	Covariate Characterization	Not Rated	NA	NA	Covariates, besides age, were not collected.
	Metric 11:	Co-exposure Confounding	Medium	× 0.333	0.67	There was no indication of co-exposures being present or mea- sured for during the controlled inhalation exposure.
Domain 5: Analy	ysis					
	Metric 12:	Study Design and Methods	Medium	× 0.5	1	This study utilized an inhalation chamber to examine the effects of acute inhalation exposures to carbon tetrachloride. No con- current control group was used and clinical measurements were presumably compared to reference standards. No statistical anal- ysis was applied to the results.
	Metric 13:	Statistical Power	Medium	× 0.25	0.5	Three to four subjects were used in each controlled inhalation experiment. This is a low number of individuals per experiment and results should be interpreted with caution.
	Metric 14:	Reproducibility of Analyses	Low	× 0.25	0.75	The inhalation chamber is described, but the method of used to achieve the inhalation exposure and ensure maintenance of an accurate dose are not described. Also, timings of exposure and measured outcomes were not reported.
	Metric 15:	Statistical Models	Not Rated	NA	NA	Results were compared to reference values and described quali- tatively only.
Domain 6: Other	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality I	Determination	‡	Low		2.6	
Extracted			Yes			

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

* The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 2: Radican et al., 2008: Evaluation of Cancer Outcomes

Study Citation:		Blair, A; Stewart, P; Wartenberg, D (2008). Morta als: Extended follow-up Journal of Occupational a				s exposed to trichloroethylene and other hydrocarbon). 1306-1319
Data Type: HERO ID:		orce_Base_CCl4_BreastCancer_Females-Cancer				, 1000 1019
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
Domain 1: Study	/ Participation	1				
	Metric 1:	Participant Selection	High	× 0.4	0.4	This study consisted of an extended follow-up of the Hill A Force Base occupational cohort through 2000. The cohort composed of former civilian employees, who worked at this ai craft maintenance facility for at least 1 year between January 1952 and December 31, 1956 (n=14,455). The key elements the study design were reported. Selection into the study was n likely to be biased. The cohort was described in detail in prev ous publications (Spirtas et al., 1991; Stewart et al., 1991; Blair al., 1998).
	Metric 2:	Attrition	High	$\times 0.4$	0.4	There was no loss of subjects to follow-up reported in the stud (as of December 31, 2000, 8,580 subjects had died and 5,875 wer still alive); exposure and outcome data were largely complete.
	Metric 3:	Comparison Group	High	× 0.2	0.2	Key elements of the study design are reported. Effects leve were adjusted for age, race, and/or sex. The use of an intern comparison group likely reduces the risk of bias relative to th use of an external reference group (e.g., the healthy worker e fect).
Domain 2: Expo	sure Characte	erization				
	Metric 4:	Measurement of Exposure	Medium	× 0.4	0.8	The exposure assessment was conducted by the National Cancer Institute (NCI), using job-exposure matrices, based on informa- tion provided by the Air Force. Although exposure misclassifica- tion was possible (because individual exposure records were not available), misclassification was likely random and not to appre- ciably bias the results.
	Metric 5:	Exposure Levels	Low	$\times 0.2$	0.6	For 21 chemicals (including TCE, Perc, CCl4 and DCM), ex- posure was classified as yes/no. No quantitative assessment of exposure was conducted.
	Metric 6:	Temporality	High	\times 0.4	0.4	The study presents the appropriate relationship between expo- sure and outcome. Outcome was ascertained after information on exposure was obtained. There was a long follow-up period.
Domain 3: Outco	ome Assessm	ent				
	Metric 7:	Outcome Measurement or Characterization	Medium	× 0.667	1.33	The outcome was determined from death records from the Na- tional Death Index (NDI). It was noted in the study that mortality data can be misleading owing to inaccuracies captured in patient death records.
		Continued	d on next page			

Study Citation:		Blair, A; Stewart, P; Wartenberg, D (2008). Morta als: Extended follow-up Journal of Occupational a				s exposed to trichloroethylene and other hydrocarbor), 1306-1319
Data Type: HERO ID:		rce_Base_CCl4_BreastCancer_Females-Cancer				
Domain		Metric	$Rating^{\dagger}$	\mathbf{MWF}^{\star}	Score	Comments ^{††}
	Metric 8:	Reporting Bias	High	× 0.333	0.33	A description of measured outcomes is provided in the study re- port. Effects estimates are provided with confidence limits; num- ber of exposed cases is included.
Domain 4: Poter	ntial Confound	ling/Variable Control				
	Metric 9:	Covariate Adjustment	Low	× 0.5	1.5	Adjustments were made for age, race, and gender. However there was indirect evidence that socioeconomic status (SES) wa considerably different among exposed and non-exposed popula tions. The proportion of non-exposed persons that were salarier was 61% compared to < 1% in the exposed cohort, suggesting a dissimilar SES. This difference may affect the results for some specific cancer types/diseases.
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	Confounders were assessed using reliable methods (database o employees and NDI). However, other than age, gender, and race data on other factors (disease history, SES) were not available.
	Metric 11:	Co-exposure Confounding	Low	× 0.25	0.75	The study evaluated exposure to CCl4 and various other chem icals. Exposures were not mutually exclusive; therefore, it wa not possible to evaluate the risk of death from exposure to a sin gular chemical while controlling for exposure to other chemicals
Domain 5: Analy	ysis					
	Metric 12:	Study Design and Methods	Medium	× 0.4	0.8	The cohort design and calculation of hazard ratios were appropriate for determining the association between exposure to TCE Perc, CCl4 and DCM, and all-cause, cancer, and non-cancer mortality.
	Metric 13:	Statistical Power	Medium	× 0.2	0.4	The cohort was large (adequate for statistical analyses). Despit the relatively large size of the cohort, the number of cases for many causes of death was small to evaluate associations.
	Metric 14:	Reproducibility of Analyses	Medium	× 0.2	0.4	The analysis (exposure estimation and statistical modeling) is de scribed in sufficient detail to understand what was done and i conceptually reproducible.
	Metric 15:	Statistical Models	Medium	\times 0.2	0.4	The method and model assumptions used to calculate risk esti mates for occupational exposure to TCE, Perc, CCl4 and DCM and all-cause and cause-specific mortality (hazard ratios) and clearly described in the study report.
Domain 6: Other	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
		Continue	d on next page			

				1 8					
Study Citation:	Study Citation: Radican, L; Blair, A; Stewart, P; Wartenberg, D (2008). Mortality of aircraft maintenance workers exposed to trichloroethylene and other hydrocarbo and chemicals: Extended follow-up Journal of Occupational and Environmental Medicine, 50(11), 1306-1319								
Data Type: Hill Air Force Base CCl4 BreastCancer Females-Cancer									
HERO ID:	699234								
Domain		Metric	$Rating^{\dagger}$	MWF^{\star}	Score	Comments ^{††}			
	Metric 21:	Method Requirements		NA	NA				
	Metric 22:	Matrix Adjustment		NA	NA				
Overall Quality I	Determination	÷	Medium		1.8				
Extracted			Yes						

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 3: Radican et al., 2008: Evaluation of Respiratory Outcomes

Study Citation:		Blair, A; Stewart, P; Wartenberg, D (2008). Morta als: Extended follow-up Journal of Occupational a				s exposed to trichloroethylene and other hydrocarbon), 1306-1319
Data Type: HERO ID:	Hill_Air_Fo 699234	orce_Base_CCl4_NonMalignantRespiratoryDiseas	e-Respiratory			
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
Domain 1: Study	Participation	1				
	Metric 1:	Participant Selection	High	× 0.4	0.4	This study consisted of an extended follow-up of the Hill A Force Base occupational cohort through 2000. The cohort composed of former civilian employees, who worked at this ai craft maintenance facility for at least 1 year between January 1952 and December 31, 1956 (n=14,455). The key elements of the study design were reported. Selection into the study was n likely to be biased. The cohort was described in detail in prev ous publications (Spirtas et al., 1991; Stewart et al., 1991; Blair al., 1998).
	Metric 2:	Attrition	High	$\times 0.4$	0.4	There was no loss of subjects to follow-up reported in the stud (as of December 31, 2000, 8,580 subjects had died and 5,875 wer still alive); exposure and outcome data were largely complete.
	Metric 3:	Comparison Group	High	× 0.2	0.2	Key elements of the study design are reported. Effects leve were adjusted for age, race, and/or sex. The use of an intern comparison group likely reduces the risk of bias relative to th use of an external reference group (e.g., the healthy worker e fect).
Domain 2: Expos	sure Characte	erization				
	Metric 4:	Measurement of Exposure	Medium	× 0.4	0.8	The exposure assessment was conducted by the National Cancer Institute (NCI), using job-exposure matrices, based on informa- tion provided by the Air Force. Although exposure misclassifica- tion was possible (because individual exposure records were not available), misclassification was likely random and not to appre- ciably bias the results.
	Metric 5:	Exposure Levels	Low	$\times 0.2$	0.6	For 21 chemicals (including TCE, Perc, CCl4 and DCM), ex- posure was classified as yes/no. No quantitative assessment of exposure was conducted.
	Metric 6:	Temporality	High	$\times 0.4$	0.4	The study presents the appropriate relationship between expo- sure and outcome. Outcome was ascertained after information on exposure was obtained. There was a long follow-up period.
Domain 3: Outco	me Assessm	ent				
	Metric 7:	Outcome Measurement or Characterization	Medium	× 0.667	1.33	The outcome was determined from death records from the Na- tional Death Index (NDI). It was noted in the study that mortality data can be misleading owing to inaccuracies captured in patient death records.
		Continued	d on next page	•••		

Study Citation:		Blair, A; Stewart, P; Wartenberg, D (2008). Morta als: Extended follow-up Journal of Occupational a				s exposed to trichloroethylene and other hydrocarbor), 1306-1319
Data Type: HERO ID:		prce_Base_CCl4_NonMalignantRespiratoryDiseas			c , <i>c</i> o (11)	
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
	Metric 8:	Reporting Bias	High	× 0.333	0.33	A description of measured outcomes is provided in the study re- port. Effects estimates are provided with confidence limits; num- ber of exposed cases is included.
Domain 4: Poter	ntial Confound	ling/Variable Control				
	Metric 9:	Covariate Adjustment	Low	× 0.5	1.5	Adjustments were made for age, race, and gender. However there was indirect evidence that socioeconomic status (SES) wa considerably different among exposed and non-exposed popula tions. The proportion of non-exposed persons that were salarier was 61% compared to < 1% in the exposed cohort, suggesting a dissimilar SES. This difference may affect the results for some specific cancer types/diseases.
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	Confounders were assessed using reliable methods (database o employees and NDI). However, other than age, gender, and race data on other factors (disease history, SES) were not available.
	Metric 11:	Co-exposure Confounding	Low	× 0.25	0.75	The study evaluated exposure to CCl4 and various other chem icals. Exposures were not mutually exclusive; therefore, it wa not possible to evaluate the risk of death from exposure to a sin gular chemical while controlling for exposure to other chemicals
Domain 5: Analy	ysis					
	Metric 12:	Study Design and Methods	Medium	× 0.4	0.8	The cohort design and calculation of hazard ratios were appropriate for determining the association between exposure to TCE Perc, CCl4 and DCM, and all-cause, cancer, and non-cancer mortality.
	Metric 13:	Statistical Power	Medium	× 0.2	0.4	The cohort was large (adequate for statistical analyses). Despit the relatively large size of the cohort, the number of cases for many causes of death was small to evaluate associations.
	Metric 14:	Reproducibility of Analyses	Medium	× 0.2	0.4	The analysis (exposure estimation and statistical modeling) is de scribed in sufficient detail to understand what was done and i conceptually reproducible.
	Metric 15:	Statistical Models	Medium	\times 0.2	0.4	The method and model assumptions used to calculate risk esti mates for occupational exposure to TCE, Perc, CCl4 and DCN and all-cause and cause-specific mortality (hazard ratios) ar clearly described in the study report.
Domain 6: Other	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
		Continuer	l on next page			

				P-8-					
Study Citation:	Study Citation: Radican, L; Blair, A; Stewart, P; Wartenberg, D (2008). Mortality of aircraft maintenance workers exposed to trichloroethylene and other hydrocarb and chemicals: Extended follow-up Journal of Occupational and Environmental Medicine, 50(11), 1306-1319								
Data Type:Hill_Air_Force_Base_CCl4_NonMalignantRespiratoryDisease-RespiratoryHERO ID:699234									
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}			
	Metric 21:	Method Requirements		NA	NA				
	Metric 22:	Matrix Adjustment		NA	NA				
Overall Quality	Determination	÷	Medium		1.8				
Extracted			Yes						

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 4: Gold et al., 2010: Evaluation of Cancer Outcomes

_

Study Citation: Data Type: HERO ID:	multiple my	tewart, PA; Milliken, K; Purdue, M; Severson, R; reloma and occupational exposure to six chlorinate _exposed workers_cancer_1-4 yrs-Cancer				vis, S; De Roos, AJ (2010). The relationship betwee onmental Medicine, 68(6), 391-399
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
Domain 1: Stud	v Participation	1				
	Metric 1:	Participant Selection	Medium	× 0.4	0.8	Study authors note a low participation rate of eligible controls with individuals in the youngest (35-50) and oldest (65-75) ag groups were less likely to participate than those in the middle ag group.
	Metric 2:	Attrition	High	$\times 0.4$	0.4	Low attrition for subjects that decided to participate in study Only one case was excluded because of missing covariate infor- mation.
	Metric 3:	Comparison Group	High	× 0.2	0.2	General population controls were selected from a case-control study of non-Hodgkin's lymphoma undertaken at the same time Controls were identified by random digit dialing with clear in clusion criteria. A table of characteristics was not provided to evaluate similarities, but adjustments were made for age, race site, gender, and years of education.
Domain 2: Expo	sure Characte	rization				
	Metric 4:	Measurement of Exposure	Low	$\times 0.4$	1.2	Use of a job-exposure matrix in a population based study. Expo sure based on participant interview rather than detailed employ- ment history records
	Metric 5:	Exposure Levels	Medium	$\times 0.2$	0.4	Reports referent group and 3 levels of exposure for cumulative exposure and 10-year lagged cumulative exposure.
	Metric 6:	Temporality	High	× 0.4	0.4	Cases were diagnosed between 2000 and 2002 while exposure was assessed from 1941 to time of study enrollment.
Domain 3: Outc	ome Assessme	ent				
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	Cases were identified through the review of hospital medica records and records of selected pathology laboratories, oncolo gists, radiologists and state death certificates.
	Metric 8:	Reporting Bias	High	× 0.333	0.33	Effect estimates are reported with a confidence interval. The number of cases and controls are included in a tabular forma for date extraction and analysis.
Domain 4: Poter	ntial Confound	ling/Variable Control				
	Metric 9:	Covariate Adjustment	High	$\times 0.5$	0.5	Covariates gender, age (35-50 years (referent), 51-64 years and 65-74 years), race (only white (referent), any black, any Asian and other), education (less than 12 years (referent), 12-15 year and 16 or more years) and SEER site (Seattle and Detroit).
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	Potential confounders were considered but method validation no provided. However there is no evidence that the method had poor validity.
		Continue	d on next page			

Study Citation: Data Type: HERO ID:	multiple my	tewart, PA; Milliken, K; Purdue, M; Severson, R; eloma and occupational exposure to six chlorinate _exposed workers_cancer_1-4 yrs-Cancer				vis, S; De Roos, AJ (2010). The relationship betwee onmental Medicine, 68(6), 391-399
Domain		Metric	Rating [†]	MWF⁺	Score	Comments ^{††}
	Metric 11:	Co-exposure Confounding	Low	× 0.25	0.75	Exposure to other chlorinated solvents was also assessed with JEM. Study authors note that they report the percentages of con- trol subjects exposed to these chemicals alone and to two of these chemicals and provide an estimate of the association with mul- tiple myeloma for subjects who were exposed to all four (TCE CCl4, DCM, PERC). But analyses were not adjusted for these exposures.
Domain 5: Anal	ysis					
	Metric 12:	Study Design and Methods	Medium	$\times 0.4$	0.8	The case-control study design chosen was appropriate for the exposure and outcome of interest.
	Metric 13:	Statistical Power	Medium	$\times 0.2$	0.4	The overall number of cases and controls are adequate to detect an effect.
	Metric 14:	Reproducibility of Analyses	Medium	$\times 0.2$	0.4	The description of the analysis is sufficient to understand what has been done.
	Metric 15:	Statistical Models	Medium	imes 0.2	0.4	There is sufficient information on how the ORs were calculated.
Domain 6: Other	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality	Determination	÷	High-	\rightarrow Medium	§ 1.6	
Extracted			Yes			

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \\ \left[\sum_{i} \left(\text{Metric Score}_{i} \times \text{MWF}_{i} \right) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

^{††} This metric met the criteria for high confidence as expected for this type of study.

[§] Evaluator's explanation for rating change: "The number of cases in this subgroup is small (n=4) and caution should be taken when interpreting the findings."

Study Citation: Data Type: HERO ID:	exposures a		of Nurses' Health Stu	dy II partic		A., Weisskopf, M.G. (2013). Perinatal air pollutan nvironmental Health Perspectives, 121(8), 978-984
Domain		Metric	Rating [†]	MWF⁺	Score	Comments ^{††}
Domain 1: Study	Participation	1				
	Metric 1:	Participant Selection	High	× 0.4	0.4	Data from the Nurses' Health Study II was used. Study reported time frame in which all children (cases and controls) were se- lected (2005-2008). Children were born in all 50 US states. Ex- clusion/inclusion criteria is described in the study.
	Metric 2:	Attrition	High	× 0.4	0.4	The number of cases/controls included in the study was 329 cases, 22,098 controls. Reasons for excluding subjects were clearly detailed. There was minimal loss of subjects reported in results (325 cases/22,101 controls)
	Metric 3:	Comparison Group	High	$\times 0.2$	0.2	Table 1 shows the demographic characteristics of the cases and controls, which appear to be similar. These include maternal age, year of birth, sex, state of residence, smoking, income, and edu- cation information. These were also considered in the analysis.
Domain 2: Expos	ure Characte	rization				
	Metric 4:	Measurement of Exposure	Low	× 0.4	1.2	Exposure was determined based on the location of the mothers beginning in 1989. Children born from 1987-1990 were assigned the geographic location of their mothers in 1989. The nurses address was updated every other year after that and children were assigned based on the closest date. "Hazardous air pollutant (HAP) concentrations were assessed by the U.S. EPA National Air Toxics Assessments in 1990, 1996, 1999, and 2002, which uses an inventory of outdoor sources of air pollution, including both stationary sources (e.g., waste incinerators, small businesses) and mobile sources (e.g., traffic) to estimate average ambient concentrations of pollutants for each census tract based on dispersion models (U.S. EPA 2011)."
						The erratum states that the authors did not use back- ground exposures when determining the quintiles in 1996, so the quintiles are somewhat different than as reported.
	Metric 5:	Exposure Levels	Medium	× 0.2	0.4	Exposure levels ranged from 0.0006-41.9 ug/m ³ , and divided into 5 quintiles. The range is sufficient to determine a dose- response relationship.
	Metric 6:	Temporality	High	× 0.4	0.4	Exposures were measured during time and place of birth from 1987-2002, autism spectrum disorder was first assessed in 2005; therefore, a minimum of 3 years after exposure.
Domain 3: Outco	me Assessme	ent				
		Con	tinued on next page			

Table 5: Roberts et al., 2013: Evaluation of Neurological/Behavior Outcomes

_

Study Citation:	exposures a	nd autism spectrum disorder in the children of Nur	rses' Health Stu	dy II partic		A., Weisskopf, M.G. (2013). Perinatal air polluta avironmental Health Perspectives, 121(8), 978-984
Data Type: HERO ID:	Nurses' Hea 1790951	alth Study II_CCl4_case-control_Autism endpoint	-Neurological/H	Behavior		
Domain		Metric	$Rating^{\dagger}$	MWF^{\star}	Score	Comments ^{††}
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	ASD was reported by the mothers via this question "Have any of your children been diagnosed with the following diseases: autism, Asperger's syndrome, or other ASD listed as separate responses." The ASD diagnoses were validated by telephone administration of the Autism Diagnostic Interview-Revised (ADI-R), to a randomly selected group of 50 mothers from the study.
	Metric 8:	Reporting Bias	High	× 0.333	0.33	All measured outcomes were outlined in the methods, and infor mation could be fully extracted for analysis. Some information was provided in supplemental information.
Domain 4: Poter		ling/Variable Control				
	Metric 9:	Covariate Adjustment	High	× 0.5	0.5	Covariates were included in the models, including: socioecc nomic indicators, smoking, year of birth, maternal age at birth and air pollution prediction model year.
	Metric 10:	Covariate Characterization	Medium	$\times 0.25$	0.5	Confounders were assessed via questionnaires, but there is n indication that the questionnaires were validated.
	Metric 11:	Co-exposure Confounding	Medium	× 0.25	0.5	Co-exposure analysis was included in the model: "To investigate further whether one or two pollutants were driving the association between correlated pollutants and ASD, we conducted analyses with diesel, lead, manganese, cadmium methylene chloride, and nickel—the pollutants most strongly associated with ASD based on tests of highest versus lowest quintile as well as linear trend—in a single model."
Domain 5: Anal	vsis					
	Metric 12:	Study Design and Methods	Medium	× 0.4	0.8	The case-control study design was appropriate for assessing the possible association between autism spectrum disorder and expo- sure to several different compounds. The study design can get a prior exposure to several exposures at once for a specific outcom- from a large cohort.
	Metric 13:	Statistical Power	Medium	$\times 0.2$	0.4	The power was sufficient to detect effects (325 cases and 2210 controls).
	Metric 14:	Reproducibility of Analyses	Medium	× 0.2	0.4	The methodology is clearly laid out, and could be reproduced Methods to calculate the odds ratios and the covariates included were provided. and details were provided on when they were no included.
		Continue	d on next page			

		continued	from previous	s page		
Study Citation:	exposures a	nd autism spectrum disorder in the children of Nurs	ses' Health Stu	ıdy II partic	,	A., Weisskopf, M.G. (2013). Perinatal air pollutant nvironmental Health Perspectives, 121(8), 978-984
Data Type: HERO ID:	Nurses' Hea 1790951	Ith Study II_CCl4_case-control_Autism endpoint-	Neurological/I	Behavior		
Domain		Metric	Rating [†]	MWF^{\star}	Score	Comments ^{††}
	Metric 15:	Statistical Models	Medium	× 0.2	0.4	Statistical methods were appropriate (calculation of ORs, logis- tic regression models). Linear dose-response was determined by dividing exposures into quintiles and using logistic regression with concentrations entered as a continuous independent vari- able. Other analysis such as sex, correlation of heavy metals, and covariate analysis were employed.
Domain 6: Other	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality I	Determination	÷	High		1.5	
Extracted			Yes			

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

 $Overall rating = \begin{cases} 4 & \text{if any metric is unacceptable} \\ \\ \left[\sum_{i} (Metric Score_{i} \times MWF_{i}) / \sum_{j} MWF_{j} \right]_{0.1} & (round to the nearest tenth) otherwise \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Study Citation:	Goldman, S.M., Quinlan, P.I., Ross, G.W., Marras, C., Meng, C., Bhudhikanok, G.S., Comyns, K., Korell, M., Chade, A.R., Kasten, M., Priestley, B., Chou, K.L., Fernandez, H.H., Cambi, F., Langston, J.W., Tanner, C.M. (2012). Solvent exposures and Parkinson disease risk in twins Annals of Neurology, 71(6), 776-784						
Data Type: HERO ID:		s CCl4 Parkinson's dichotomous pairwise	OR-Neurological/Beha	vior			
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}	
Domain 1: Study	Participation	1					
	Metric 1:	Participant Selection	High	× 0.4	0.4	Key elements of study are reported: participants were se- lected from the National Academy of Sciences/National Re- search Council WWII Veteran Twins Registry, an all-male twir cohort. Cases were selected through telephone screening of the entire reachable cohort; concurrently, searches of VA medica databases, the Health Care Financing Administration, and the National Death Index were undertaken to identify other cases It was stated that age at PD diagnosis or interview was simila between those pairs that completed the interview and those pairs that did not complete the interview. As such, the reported infor- mation indicates selection in or out of the study and participation is not likely to be biased.	
	Metric 2:	Attrition	Medium	× 0.4	0.8	Occupational histories were completed by 63.6% of twins with PD and 60.1% of twins without PD leading to a final total of 99 twin pairs. This is moderate exclusion from the analysis sample Rates of completion were similar between twins with and withou PD.	
	Metric 3:	Comparison Group	High	× 0.2	0.2	In both paired and unpaired analysis, smoking was an include covariate. In unpaired analysis, an age index was also adjuste for. Other important demographic factors in the paired analysi would be highly controlled as the analysis was of twin pairs. Th type of twin (monozygotic or dizygotic) was also included as covariate in the paired analysis.	
Domain 2: Expos	ure Characte	rization					
	Metric 4:	Measurement of Exposure	Low	× 0.4	1.2	This method relies on self-reported occupational histories. There may be some misclassification due recall bias in addition to an bias introduced by accuracy of response for participant proxies.	
	Metric 5:	Exposure Levels	Medium	× 0.2	0.4	For logistic regression using duration of exposure or cumulative exposure indices, ORs addressed risk associated with a one ter tile change in the respective marker of exposure. This represent three or more levels of exposure. For the Ever/Never analysis, only two levels of exposure an used. Ever exposure was defined as exposure to a solvent fo at least 2% of work time or 1 hour per week.	
		Co	ontinued on next page	•••			

Table 6: Goldman et al., 2012: Evaluation of Neurological/Behavior Outcomes

_

Study Citation:	Goldman, S.M., Quinlan, P.I., Ross, G.W., Marras, C., Meng, C., Bhudhikanok, G.S., Comyns, K., Korell, M., Chade, A.R., Kasten, M., Priestley, B., Chou, K.L., Fernandez, H.H., Cambi, F., Langston, J.W., Tanner, C.M. (2012). Solvent exposures and Parkinson disease risk in twins Annals of Neurology, 71(6), 776-784								
Data Type: HERO ID:	2127988	s CCl4 Parkinson's dichotomous pairwise OR-Net	urological/Bena	VIOT					
Domain		Metric	Rating [†]	MWF^{\star}	Score	Comments ^{††}			
	Metric 6:	Temporality	High	× 0.4	0.4	This study investigated occupational exposures beginning at a young age and their association with Parkinson's Disorder later in life. The interval between exposure and outcome measurement is appropriate to measure this association.			
Domain 3: Outc	ome Assessme	ent							
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	Cases were identified through searches of records in the Depart- ment of Veteran's Affairs, the Health Care Financing Adminis- tration, and the National Death Index. Participants suspected of having Parkinson's underwent in-person examination with a trained movement disorder specialist. This outcome assessment represents a well-established method. Both neurologists fol- lowed standard criteria for PD diagnosis and made their diagnosis by video. There is no mention of blinding during this evaluation., although participants were unaware of study hypotheses.			
	Metric 8:	Reporting Bias	High	× 0.333	0.33	All outcomes mentioned in the abstract, introduction, and meth- ods were presented clearly in the results. ORs are contained in easily extractable tables, including number of participants used in each analysis accompanied by summary measures of exposure in the analyses of cumulative exposure.			
Domain 4: Poter	ntial Confound	ling/Variable Control							
	Metric 9:	Covariate Adjustment	High	× 0.5	0.5	In the paired analysis (paired twins), the conditional logistic re- gression model included terms for respondent type (monozy- gotic/dizygotic) and smoking. In the unpaired analysis, respon- dent type, smoking, and age were all included in the analysis. Models including head injury were stated to be similar to the re- sults shown.			
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	In some cases, questionnaires/surveys were completed by prox- ies such as a spouse or sibling. For several covariates including head injury or smoking, this is not a well-established method, but there was little evidence that the method had poor validity. It should also be noted that results were presented for an analysis excluding twin pairs using proxy respondents. The results of this analysis were in agreement with the main analyses.			
	Metric 11:	Co-exposure Confounding	Medium	× 0.25	0.5	Co-exposures to other solvents was measured in this study. Over- all, six different solvents were included in the exposure analy- sis: TCE, PERC, CCl4, n-hexane, toluene, and xylene. Several analysis strategies were presented to elucidate any effects of co- exposures. Analyses were done for the relationship between PD and exposure to TCE or PERC as well as an analysis of the re- lationship between exposure to any of the 4 solvents, excluding TCE and PERC.			

Study Citation:	Goldman, S.M., Quinlan, P.I., Ross, G.W., Marras, C., Meng, C., Bhudhikanok, G.S., Comyns, K., Korell, M., Chade, A.R., Kasten, M., Priestley, B., Chou, K.L., Fernandez, H.H., Cambi, F., Langston, J.W., Tanner, C.M. (2012). Solvent exposures and Parkinson disease risk in twins Annals of Neurology, 71(6), 776-784								
Data Type: HERO ID:		s CCl4 Parkinson's dichotomous pairwise OR-Neu	rological/Beha	vior					
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}			
Domain 5: Analy	sis								
	Metric 12:	Study Design and Methods	Medium	× 0.4	0.8	The retrospective study design is appropriate to investigate long- term or chronic exposure to industrial solvents and development of the neurodegenerative Parkinson's Disease. Appropriate sta- tistical methods (i.e., conditional logistical modeling) were em- ployed to analyze the matched data.			
	Metric 13:	Statistical Power	Medium	$\times 0.2$	0.4	There is an adequate number of discordant twin pairs (n=99) for the pairwise analysis and an adequate number of participants in the unpaired analysis (n=126 cases exposed, n=110 controls ex- posed) to detect an effect in the exposed population.			
	Metric 14:	Reproducibility of Analyses	Medium	$\times 0.2$	0.4	The description of the analysis is sufficient to reproduce the re- sults if given original data. No apparent issues.			
	Metric 15:	Statistical Models	Medium	$\times 0.2$	0.4	The method (logistic regression modeling) of calculating risk is transparent and appropriate. Rationale for variable selection is stated. Model assumptions do not appear to be violated.			
Domain 6: Other	Consideratio	ns for Biomarker Selection and Measurement							
	Metric 16:	Use of Biomarker of Exposure		NA	NA				
	Metric 17:	Effect Biomarker		NA	NA				
	Metric 18:	Method Sensitivity		NA	NA				
	Metric 19:	Biomarker Stability		NA	NA				
	Metric 20:	Sample Contamination		NA	NA				
	Metric 21:	Method Requirements		NA	NA				
	Metric 22:	Matrix Adjustment		NA	NA				
Overall Quality D	Determination	÷	High		1.6				
Extracted			Yes						

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

 $Overall rating = \begin{cases} 4 & \text{if any metric is unacceptable} \\ \\ \left[\sum_{i} (Metric \ Score_{i} \times MWF_{i}) / \sum_{j} MWF_{j} \right]_{0.1} & (round \ to \ the \ nearest \ tenth) \ otherwise} \end{cases},$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 7: Neta et al., 2012: Evaluation of Cancer Outcomes

_

Study Citation:		tewart, P.A., Rajaraman, P., Hein, M.J., Waters, M., solvents and risks of glioma and meningioma in a				le, J.B., Linet, M.S. (2012). Occupational exposure t ttal Medicine, 69(11), 793-801
Data Type: HERO ID:		ubjects_possibleexp_Glioma-Cancer	1			
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
Domain 1: Study	y Participation	1				
	Metric 1:	Participant Selection	High	$\times 0.4$	0.4	High rating: key elements of study design were reported, and the reported information indicates selection in or out of the study and participation is not likely to be biased.
	Metric 2:	Attrition	High	$\times 0.4$	0.4	High participation rates: 92% and 94% for glioma and menin gioma cases, respectively. Participation rate among controls was 86%
	Metric 3:	Comparison Group	High	× 0.2	0.2	High rating: cases and controls were similar - controls where patients admitted to the same hospitals as cases for non- malignant conditions with frequency matching by sex, age, race/ethnicity, hospital, and proximity to hospital; differences in baseline characteristics of groups were considered as potential confound-ing or stratification variables (i.e., sex and 5-year age groups) and were thereby controlled by statistical analysis.
Domain 2: Expo	osure Characte Metric 4:	erization Measurement of Exposure	Low	× 0.4	1.2	Low rating: occupational study population with exposure as sessed using in person interviews (i.e., no employment record
						were utilized). Industrial hygiene experts from examined dat collected in the questionnaires, and assessed a level of probabi ity and levels of exposure to groups or classes of solvents as we as certain individual substances.
	Metric 5:	Exposure Levels	Medium	$\times 0.2$	0.4	Medium rating: range and distribution of exposure was sufficien to develop an exposure response estimate; 3 or more levels of exposure were reported.
	Metric 6:	Temporality	High	× 0.4	0.4	High rating: temporality is established and the interval between reconstructed exposure and brain tumor risk has an appropriate consideration of relevant exposure windows.
Domain 3: Outc	ome Assessm	ent				
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	High rating: ICD-Oncology codes listed; all participating case diagnoses were confirmed by microscopy
		Continuo	d on next page			

Study Citation:	chlorinated	solvents and risks of glioma and meningioma				le, J.B., Linet, M.S. (2012). Occupational exposure t tal Medicine, 69(11), 793-801
Data Type: HERO ID:	CCl4_all_su 2128240	bjects_possibleexp_Glioma-Cancer				
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
	Metric 8:	Reporting Bias	High	× 0.333	0.33	High rating: all of the study's measured outcomes are reported, effect estimates reported with confidence interval; number of exposed reported for each analysis.
Domain 4: Poten	tial Confound	ling/Variable Control				
	Metric 9:	Covariate Adjustment	High	× 0.5	0.5	High rating: appropriate adjustments or explicit considerations were made for potential confounders in the final analyses through the use of statistical models for covariate adjustment (i.e., age group (<30, 30–49, 50–69, 70+), race (white vs non- white), sex, hospital site and proximity of residence to the hospital)
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	Medium rating: primary confounders (excluding co-exposures) were assessed. The paper did not describe if the computer-based questionnaire used to collect demographic information has been previously validated.
	Metric 11:	Co-exposure Confounding	Medium	× 0.25	0.5	Medium rating: potential co-pollutant confounding was consid- ered through the adjustment in statistical models, of estimated cumulative occupational exposures to lead, magnetic fields, her bicides and insecticides. In addition, forever/never analyses for particular solvents, the authors included all other solvents in the model to account for possible confounding by other solvent exposures.
Domain 5: Analy	vsis					
	Metric 12:	Study Design and Methods	Medium	× 0.4	0.8	Medium rating: appropriate design (i.e., case control study of chemical exposures in relation to a rare disease), and appropriate statistical methods (i.e., logistic regression analyses) were em- ployed to analyze data.
	Metric 13:	Statistical Power	Medium	\times 0.2	0.4	Medium rating: the number of cases and controls are adequate to detect an effect in the exposed population for the primary analy- ses of probable/possible solvent exposure vs. unexposed in rela- tion to risk of glioma. The number of exposure cases of menin- gioma was too small to have the power to conduct stratified anal- yses or analyses of more detailed exposure metrics.
	Metric 14:	Reproducibility of Analyses	Medium	$\times 0.2$	0.4	Medium rating: description of the analyses is sufficient to under- stand what has been done and to be reproducible with access to the data.
	Metric 15:	Statistical Models	Medium	$\times 0.2$	0.4	Medium rating: logistic regression models were used to generate Odds Ratios. Rationale for variable selection is stated. Model assumptions are met.
Domain 6: Other	r Consideratio	ns for Biomarker Selection and Measurement				
		Conti	nued on next page			

Study Citation:	Neta, G., Stewart, P.A., Rajaraman, P., Hein, M.J., Waters, M.A chlorinated solvents and risks of glioma and meningioma in additional solvents and risks of glioma and meningioma in additional solvents.				
Data Type: HERO ID:	CCl4_all_subjects_possibleexp_Glioma-Cancer 2128240	_			
Domain	Metric	Rating [†]	MWF*	Score	Comments ^{††}

* MWF = Metric Weighting Factor

Overall Quality Determination[‡]

Extracted

Metric 16:

Metric 17:

Metric 18:

Metric 19:

Metric 20:

Metric 21:

Metric 22:

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Use of Biomarker of Exposure

Effect Biomarker

Method Sensitivity

Biomarker Stability

Matrix Adjustment

Sample Contamination

Method Requirements

if any metric is unacceptable

NA

NA

NA

NA

NA

NA

NA

1.5

 $Overall rating = \begin{cases} 4 & \text{if any metric is unacceptable} \\ \left| \sum_{i} (Metric Score_{i} \times MWF_{i}) / \sum_{j} MWF_{j} \right|_{0.1} & (round to the nearest tenth) otherwise \end{cases}$

NA

NA

NA

NA

NA

NA

NA

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

High

Yes

Table 8: Ruder et al., 2013: Evaluation of Cancer Outcomes

Data Type:	occupationa	g, D.J., Rosenman, K.D., Stewart, P.A., Br l exposure to chlorinated solvents Occupat vest Health Study_CCl4_cumulative_inclu	tional and Environment	al Medicin		13). The Upper Midwest Health Study: Gliomas ar 73-80
Domain		Metric	$Rating^{\dagger}$	MWF^{\star}	Score	Comments ^{††}
Domain 1: Study F	-					
	Metric 1:	Participant Selection	High	× 0.4	0.4	Subjects were selected from the same area during the same tim frame. Cases were identified through participating medical fa cilities and neurosurgeon offices. Controls were identified from state driver's license records. 91.5% of cases or their next of ki participated and 70.4% of controls participated. Key elements of the study design are reported
	Metric 2:	Attrition	High	× 0.4	0.4	Study population consisted of 1,175 controls and 798 cases 97% of the controls (1141/1175) were interviewed and a cases had interviews with 360 being proxy interviews. Som analysis was restricted to cases that were directly interviewed.
	Metric 3:	Comparison Group	High	× 0.2	0.2	Controls were randomly selected and age and sex stratified There were some differences in the level of education, but thi was adjusted for in the analysis. Details comparing cases an controls as well as ineligible and non-participants are detailed i companion publication (Ruder et al., 2006).
Domain 2: Exposu	re Characte	rization				
	Metric 4:	Measurement of Exposure	Medium	× 0.4	0.8	Complete occupational history was obtained using a question naire modified from the one developed by the National Cance Institute. Jobs of at least one years duration between the age of 16 and the end of 1992 were included. The questionnaire als asked about specific exposures including solvent and on whic jobs and for how many hours a week these exposures occurrec There is potential for cases to have better recall. The probabili ity, intensity, and frequency of exposure in non-farm related job was estimated based on occupation, industry, and decade usin an annotated appendix of sources of exposure levels. Complet descriptions of the methods were provided. JEM with complet job history, but based on recalled jobs and some judgement of exposure (although used several cited references).
	Metric 5:	Exposure Levels	Medium	$\times 0.2$	0.4	Exposure was estimated in cumulative exposure of ppm-h and ppm-years.
	Metric 6:	Temporality	Medium	× 0.4	0.8	Temporality is established, but it is unclear whether exposure fall within relevant exposure windows for the outcome of interest Case diagnosis occurred between 1995 and 1997 with job histor- ending in 1992.

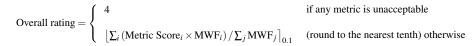
Study Citation:	R.F., Reding		cer Collaborati	ve Study Gr	roup (20	avis-King, K.E., Schulte, P.A., Mandel, J.S., Morton, 13). The Upper Midwest Health Study: Gliomas and 73-80
Data Type: HERO ID:	•	vest Health Study_CCl4_cumulative_include prox			.,	
Domain		Metric	Rating [†]	MWF^{\star}	Score	Comments ^{††}
Domain 3: Outco	ome Assessme	ent				
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	The study focused on histologically confirmed primary intracra- nial gliomas (ICD-O code 938-948).
	Metric 8:	Reporting Bias	High	× 0.333	0.33	Sufficient information was reported. Effect estimates are re- ported with a confidence interval.
Domain 4: Poter	ntial Confound	ling/Variable Control				
	Metric 9:	Covariate Adjustment	Medium	imes 0.5	1	Adjusted for age group, sex, age, and education.
	Metric 10:	Covariate Characterization	Medium	$\times 0.25$	0.5	Information was obtained via a questionnaire sometimes via proxy.
	Metric 11:	Co-exposure Confounding	Medium	× 0.25	0.5	Although this was occupational exposure, they included people from different jobs at different times and it is unlikely that there would be differential co-exposures.
Domain 5: Anal	ysis					
	Metric 12:	Study Design and Methods	Medium	$\times 0.4$	0.8	Methods are appropriate and appropriate statistical methods were used to address research question.
	Metric 13:	Statistical Power	Medium	× 0.2	0.4	The study included 798 cases and 1175 controls, which is likely to provide sufficient statistical power. For any given expo- sure there were more than 100 subjects except when evaluating women only or a subset excluding proxy only. In these cases there were as few as 34 subjects.
	Metric 14:	Reproducibility of Analyses	Medium	imes 0.2	0.4	Enough information is provided to be reproducible if data were available.
	Metric 15:	Statistical Models	Medium	× 0.2	0.4	Unconditional logistic regression models were used, which were appropriate for the data and assumptions appear to have been met.
Domain 6: Other	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality	Determination	÷	High		1.6	
Extracted			Yes			
		~ .	d on next page			

	1 10
Study Citation:	Ruder, A.M., Yiin, J.H., Waters, M.A., Carreon, T., Hein, M.J., Butler, M.A., Calvert, G.M., Davis-King, K.E., Schulte, P.A., Mandel, J.S., Morton, R.F., Reding, D.J., Rosenman, K.D., Stewart, P.A., Brain Cancer Collaborative Study Group (2013). The Upper Midwest Health Study: Gliomas and occupational exposure to chlorinated solvents Occupational and Environmental Medicine, 70(2), 73-80
Data Type: HERO ID:	Upper Midwest Health Study_CCl4_cumulative_include proxy_glioma-Cancer 2128307
Domain	Metric Rating [†] MWF [*] Score Comments ^{††}

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.



where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 9: Vizcaya et al., 2013: Evaluation of Cancer Outcomes

_

Study Citation:	-	; Christensen, KY; Lavoue, J; Siemiatycki, J (2013) l studies in Montreal, Canada Occupational and Er	-			th six types of chlorinated solvents: Results from tw
Data Type: HERO ID:		al case-control study Montreal (CCl4 any exposure				
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
Domain 1: Study	y Participation	1				
	Metric 1:	Participant Selection	Medium	× 0.4	0.8	This was a population based case-control study in which subjects were restricted to Canadian citizens who were resident in the Montreal metropolitan area. This report did not describ case ascertainment, but cited references (Ramanakumar et a 2011; Parent et al., 2007) which indicate that histological confirmed cancer patients from 18 of the largest hospitals we used as cases. Controls were randomly selected frequene matched by age and sex. Participation rates were provided ar were slightly higher in the cases.
	Metric 2:	Attrition	Low	$\times 0.4$	1.2	There appears to be a large amount of attrition that was not ad equately explained. It is likely that the missing subjects from Table 1 did not have occupations with exposure codes.
	Metric 3:	Comparison Group	High	× 0.2	0.2	Cases were more likely to be French Canadians than controls Controls were on average wealthier and had a higher education Cases were heavier smokers than controls. These were all cor trolled for in the analysis.
Domain 2: Expo	sure Characte	erization				·
	Metric 4:	Measurement of Exposure	Low	× 0.4	1.2	A semi-structured questionnaire was used to obtain details of each job that lasted at least 6 months. A team of industria chemists and hygienists examined each subject's questionnair and translated each job into potential exposures from a list of 29 substances without knowledge of the subject's status. Exposure based on collective judgement.
	Metric 5:	Exposure Levels	Medium	$\times 0.2$	0.4	Only two groups were compared and could not be evaluated fo trend. Exposed groups were never exposed, ever exposed, or sub stantial exposure.
	Metric 6:	Temporality	Low	× 0.4	1.2	The temporality of exposure and outcome is uncertain. Althoug job history was obtained, there is no information provided to de termine that the jobs occurred before diagnosis or even if the job were prior to diagnosis there is no information provided on how long or how close to the diagnosis the jobs occurred.
Domain 3: Outco	ome Assessm	ent				
	Metric 7:	Outcome Measurement or Characterization	High	\times 0.667	0.67	Cases were histologically confirmed.
		Continued	l on next page	•••		

Study Citation:	case-control	studies in Montreal, Canada Occupational and Er	vironmental M	edicine, 70((2), 81-8	
Data Type: HERO ID:	occupationa 2128435	l case-control study Montreal (CCl4 any exposure	Study II analys	sis extractio	n)-Cance	er
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
	Metric 8:	Reporting Bias	High	× 0.333	0.33	Results were reported in sufficient details. A description of mea- sured outcomes is reported in the methods, abstract, and/or intro- duction. Effect estimates are reported with a confidence interval and the number of cases/controls are reported for each analysis.
Domain 4: Potenti	ial Confound	ling/Variable Control				
	Metric 9:	Covariate Adjustment	High	$\times 0.5$	0.5	Results were adjusted by age, smoking habit, educational attain- ment, SES, and ethnicity.
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	Information was obtained from a questionnaire of unknown re- liability and validity. The authors note that "Although it is very difficult to establish the validity of retrospective exposure assess- ments, we have demonstrated satisfactory levels of reliability and validity in the job histories and in the expert exposure assess ments."
	Metric 11:	Co-exposure Confounding	Medium	× 0.25	0.5	It was noted that results were adjusted for exposure to eight known carcinogens. Although there are potential co-exposures for any given job, it is unlikely that they were differential across jobs and within the specific chemicals of i nterest. Supplemental Table S2 indicated 5 different jobs with exposure to CCl4 mak- ing it unlikely that co-exposure was consistent across all 5 jobs in each category.
Domain 5: Analys	sis					
•	Metric 12:	Study Design and Methods	Medium	× 0.4	0.8	Study design and statistical method were appropriate for the re- search question. A case-control study is the best design to study lung cancers when evaluating many different possible exposures across multiple different jobs. The use of unconditional logistic regression is appropriate for this data.
	Metric 13:	Statistical Power	Medium	$\times 0.2$	0.4	Statistical power should be sufficient. However, some substantial exposure categories had a small number of subjects.
	Metric 14:	Reproducibility of Analyses	Medium	× 0.2	0.4	The description of the unconditional logistic regression analysis used for estimates of odds ratios and the confounders included is sufficient to understand precisely what has been done and to be conceptually reproducible with access to the analytic data.
	Metric 15:	Statistical Models	Medium	$\times 0.2$	0.4	The method for calculating the risk estimates (i.e., odds ratios) is transparent and the model assumptions were met.
Domain 6: Other	Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
		Continuer	l on next page			

			continued from previous	page				
Study Citation:	Vizcaya, D; Christensen, KY; Lavoue, J; Siemiatycki, J (2013). Risk of lung cancer associated with six types of chlorinated solvents: Results from two case-control studies in Montreal, Canada Occupational and Environmental Medicine, 70(2), 81-85							
Data Type:	occupationa	l case-control study Montreal (CCl	4 any exposure Study II analys	is extractio	n)-Cancer			
HERO ID:	2128435							
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}		
	Metric 21:	Method Requirements		NA	NA			
	Metric 22:	Matrix Adjustment		NA	NA			
Overall Quality I	Determination	÷	Medium		1.9			
Extracted			Yes					

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right]_{0,1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 10: Morales-Suárez-Varela et al., 2013: Evaluation of Cancer Outcomes

Study Citation:	Merletti, F; mycosis fur	Gorini, G; Aurrekoetxea, JJ; Févotte, J; goides Journal of Occupational and Enviro	Cyr, D; Guénel, P (20 nmental Medicine, 55(13). Occu 8), 924-93	pational	z, A; Wingren, G; Hardell, L; Ahrens, W; Stang, A exposure to chlorinated and petroleum solvents an
Data Type: HERO ID:	Case-Contro 2129849	ol_Occupational_CCl4_MycosisFungoides	_OR_aboveMedian_Al	ll-Cancer		
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
Domain 1: Study	Participation	l				
	Metric 1:	Participant Selection	High	× 0.4	0.4	140 cases ascertained from requests to hospitals and pathology department, as well as regional/national cancer and pathology registers. Patients from 6 European countries: Denmark, Swe- den, France, Germany, Italy, and Spain. Controls from these countries selected from population registries or colon cancer reg- istries. As such, the reported information indicates selection in or out of the study and participation is not likely to be biased.
	Metric 2:	Attrition	Medium	× 0.4	0.8	Moderate attrition due to patents removed from study due to unconfirmed diagnosis (22) or lack of availability for interview (18); participation rate of 84.75%. Of the eligible controls 68.2% (3156) were interviewed; only controls within the strata (5 year age + gender) of MF patients used (2846).
	Metric 3:	Comparison Group	High	× 0.2	0.2	Key elements of the study design are reported and indicate that cases and controls were similar (e.g., recruited from the same eligible population with the number of controls described, and eligibility criteria and are recruited within the same time frame Specifically, 4 controls/case, frequency matched by sex and ag (5 years). Population registries and electoral rolls used to select controls in Denmark, Sweden, France, Germany and Italy. Span ish controls from colon cancer patients (no population register).
Domain 2: Expos		rization				
	Metric 4:	Measurement of Exposure	Low	× 0.4	1.2	Interviews with standardized questionnaires to determine occu pational history. Next of kin completed interviews for 4 cases an 95 controls. Exposure determined with JEM developed by th French Institute of Health Surveillance using jobs/industries as signed based on interviews by trained coders using international standards.
	Metric 5:	Exposure Levels	Low	$\times 0.2$	0.6	Reports only 2 levels of exposure for CCl4 (exposed/unexposed
	Metric 6:	Temporality	High	× 0.4	0.4	Temporality is established and the interval between the exposur (or reconstructed exposure) and the outcome has an appropriat consideration of relevant exposure windows. Specifically, the au thors considered lag times of 5, 10, or 15 years, which did no make an impact (results not presented).
Domain 3: Outcom	me Assessme	ent				
		Co	ntinued on next page			

Study Citation:	Merletti, F; mycosis fur	Gorini, G; Aurrekoetxea, JJ; Févotte, J; Cyr, D; goides Journal of Occupational and Environmenta	Guénel, P (20 l Medicine, 55	13). Occu (8), 924-93	pational	z, A; Wingren, G; Hardell, L; Ahrens, W; Stang, A exposure to chlorinated and petroleum solvents and
Data Type: HERO ID:	2129849	ol_Occupational_CCl4_MycosisFungoides_OR_al	bovelvledian_A	II-Cancer		
Domain		Metric	$Rating^{\dagger}$	\mathbf{MWF}^{\star}	Score	Comments ^{††}
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	Clinical and pathological mycosis fungoides (MF) diagnosis from cancer/pathology registers and requests of hospitals, using ICD codes. All diagnosis were reviewed by the same pathologist for adherence to morphological and topographical MF criteria; 22 cases were excluded on this basis.
	Metric 8:	Reporting Bias	High	× 0.333	0.33	The results discussed in the introduction/methods were fully pro- vided and extractable. All of the study's measured outcomes are reported, effect estimates reported with confidence interval; num- ber of cases and controls reported for each analysis.
Domain 4: Poter	ntial Confound	ling/Variable Control				
	Metric 9:	Covariate Adjustment	High	$\times 0.5$	0.5	Confounders considered in adjusted analysis: age, sex, country, current smoking habit (cigarettes/day), alcohol intake, BMI, and education level.
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	Primary confounders were assessed using a less-established method with no reporting of validation against well-established methods. Specifically, covariates were determined from inter- views. Next of kin completed interviews for 4 cases and 95 con- trols.
	Metric 11:	Co-exposure Confounding	Medium	× 0.25	0.5	Co-exposures were not accounted for in this analysis, but no di- rect evidence that co-exposures differ across cases and controls.
Domain 5: Anal	ysis					
	Metric 12:	Study Design and Methods	Medium	$\times 0.4$	0.8	Case-control design was appropriate for investigating chlorinated solvents and a rare disease such as MF, and appropriate statistical methods (logistic regression) were employed to analyze data.
	Metric 13:	Statistical Power	Medium	$\times 0.2$	0.4	100 cases and 2,846 controls. Exposed cases relatively low (27 trichloroethylene, 6 perchloroethylene, 9 methylene chloride), but sufficient to detect an effect.
	Metric 14:	Reproducibility of Analyses	Medium	$\times 0.2$	0.4	Description of the analyses is sufficient to understand what has been done and to be reproducible with access to the data.
	Metric 15:	Statistical Models	Medium	\times 0.2	0.4	The model used for calculating risk estimate (i.e., odds ratios using logistic regression) is fully appropriate. Rationale for co- variate selection is not provided, but model assumptions do not appear to be violated.
Domain 6: Other	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
		Continued	l on next page	•••		

Study Citation:	Merletti, F;		Cyr, D; Guénel, P (20	013). Occu	pational exposu	/ingren, G; Hardell, L; Ahrens, W; Stang, A; re to chlorinated and petroleum solvents and
Data Type:	Case-Contro	ol_Occupational_CCl4_MycosisFungoides	S_OR_aboveMedian_A	ll-Cancer		
HERO ID:	2129849					
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality I	Determination	÷ ÷	High		1.6	
Extracted			Yes			

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

* The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

if any metric is unacceptable

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left| \sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right|_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 11: Heck et al., 2013: Evaluation of Cancer Outcomes

Study Citation: Data Type: HERO ID:	toma in offs	Park, AS; Qiu, J; Cockburn, M; Ritz, B (201 spring Environmental Research, 127 1-6 ol_Children_CCl4_Neuroblastoma_OR_IQ		dy of ambi	ent air to	xics exposure in pregnancy and the risk of neurobla
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
Domain 1: Study	V Participation]				
	Metric 1:	Participant Selection	High	$\times 0.4$	0.4	Authors included all cases of neuroblastoma listed in the California Cancer Registry (1990-2007).
	Metric 2:	Attrition	Low	× 0.4	1.2	The study attained a 89% matching rate to California birth cc tificate (probabilistic linkage program (LinkPlus, Atlanta, Gu and included up to 75 cases and 14,602 controls (depending o the air toxic evaluated as exposure), who lived within 5 km o an air toxics monitor. According to the authors, excluded child dren (781 cases and 146,763 controls) were more likely to live i a rural county (20% vs. 4%), to have a mother who was Whi non-Hispanic (35% vs. 26%) and to be born in the US (56% v 50%).
	Metric 3:	Comparison Group	Medium	× 0.2	0.4	Controls randomly selected from California birth records (nc cancer diagnosis before age 6), frequency matched by year o birth; excluded children who had died of other causes prior to age 6. Large number excluded due to missing information on length of gestation. In general, demographic characteristics of cases and controls were similar but there were some differences, for example, in ethnicity (e.g., 40% cases were White non-Hispan vs 26.1% controls) and neighborhood socioeconomic inde (e.g., 18.7% of cases vs 29.2% of controls in lowest level).
Domain 2: Expo	sure Characte	rization				
	Metric 4:	Measurement of Exposure	Low	× 0.4	1.2	Exposure based on data from community-based air pollutio monitors for participants living within 5 km of an air pollutio monitor. For participants born in the period 1998-2007, geocod ing based on exact home address, but for those born 1990-1997, geocoding based on zip code (potential fe exposure misclassification). Additional potential source of bias due to assumption that birth certificate address we consistent throughout the pregnancy.
	Metric 5:	Exposure Levels	Medium	$\times 0.2$	0.4	Exposure-response estimate obtained for several air toxics, in cluding CCl4, Perc and TCE, for interquartile range and in som cases for across quartiles, considering different buffer sizes (km, 4 km, 3 km, 2.5 km) around air toxics' monitors.
	Metric 6:	Temporality	High	× 0.4	0.4	Exposure assessed for full extent of pregnancy and for eac trimester. Neuroblastoma has a high incidence in infants, so as sessing though 6 years old is appropriate.
Domain 3: Outco	ome Assessm	ent				
		Co	ntinued on next page			

Study Citation:		ark, AS; Qiu, J; Cockburn, M; Ritz, B (2013). An pring Environmental Research, 127 1-6	exploratory stu	dy of ambie	ent air to	xics exposure in pregnancy and the risk of neuroblas
Data Type: HERO ID:		ol_Children_CCl4_Neuroblastoma_OR_IQR_2_5	km-Cancer			
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
	Metric 7:	Outcome Measurement or Characterization	Medium	× 0.667	1.33	Outcome assessed using International Classification of Child- hood Cancer, version3 (ICCC-3) code 041 as reported in the Cali- fornia Cancer Registry, but diagnosis was not confirmed. It is not clear if absence of cancer diagnosis in controls was confirmed.
	Metric 8:	Reporting Bias	Medium	× 0.333	0.67	For CCl4, both OR for IQR at different buffer sizes (2.5 km, 3 km 4 km, and 5 km) and for each quartile (vs. 1st quartile) are reported; however, when reporting results for each quartile it is not clearly stated whether or not these are for the 5 km buffer size. For Perc and TCE, OR per interquartile increase reported only for two buffer sizes (2.5 km and 5 km) and results for each quartile are not reported.
Domain 4: Poter		ling/Variable Control				
	Metric 9:	Covariate Adjustment	Medium	× 0.5	1	Selection of potential confounders was based on literature re- view and relationship in sample between demographic and peri- natal factors and outcome. Several relevant covariates were con- sidered and retained in final a nalysis [mother's age, mother' race/ethnicity, birth year, socioeconomic indicator (method of payment for prenatal care)]. However, other potential con- founders noted as relevant by the authors in the Introduction sec- tion (e.g., birthweight, maternal and paternal alcohol intake and smoking status, paternal occupational exposures) were no evaluated.
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	Demographic and socio-economic data obtained from birth cer- tificates (mother's age, mother's race/ethnicity, birth y ear) and US Census data (socio-economic data). SES was assessed through both insurance type and census tract data.
	Metric 11:	Co-exposure Confounding	Medium	× 0.25	0.5	Co-exposures to pollutants were measured but not adjusted for in the regression models. Authors state that, according to cited study (Heck et al., in press), they found that Perc was highly cor- related with traffic-related toxics, while other air toxics "were not as strongly correlated with each other." No differences expected between exposure groups.
Domain 5: Analy						
	Metric 12:	Study Design and Methods	Medium	× 0.4	0.8	A case-control study design was used to evaluate the relationship between prenatal exposure to air toxics (CC14, PERC, TCE) and neuroblastoma (childhood cancer). Logistic regression was used to determine OR for IQR of increase in exposure to each air toxic and, for CC14, the OR for each quartile relative to the lowest quartile of exposure was also evaluated.
		Continue	d on next page			

Study Citation:	toma in offs	pring Environmental Research, 127 1-6		dy of ambi	ent air to	xics exposure in pregnancy and the risk of neuroblas
Data Type: HERO ID:	Case-Contro 2225094	ol_Children_CCl4_Neuroblastoma_OR_IQR_2_5	km-Cancer			
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
	Metric 13:	Statistical Power	Medium	× 0.2	0.4	Statistically significant effects were determined for some air tox- ics using each respective sample size, but no statistical power was reported. For CCl4, the analysis included 40 cases and 7,443 controls, for Perc 67 cases and 12,041 controls were included and for TCE 67 cases and 12,086 controls were included, for a 5 km radius around air pollution monitors.
	Metric 14:	Reproducibility of Analyses	Medium	\times 0.2	0.4	Detailed description of statistical analysis provided. The covari- ates adjusted for in the logistic regression explicitly stated for each model. Number of cases/controls used in each analysis pre- sented for 5 km and 2.5 km radii.
	Metric 15:	Statistical Models	Medium	× 0.2	0.4	Logistic regression appropriately used to determine ORs. Study presents models adjusted just for birth year, or for all con- founders that were collected (birth year, maternal age, mater- nal race/ethnicity, and method of payment - SES). Potential con- founders identified from literature and in a previous study (Heck 2009).
Domain 6: Other	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality I	Determination	‡ 	Medium		2.0	
Extracted			Yes			

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

* The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Study Citation: Data Type: HERO ID:		(1934). Carbon tetrachloride as an industrial hazar 4_controlled_inhalation_exposure_hematology-He				
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
Domain 1: Study	y Participation					
	Metric 1:	Participant Selection	Low	× 0.4	1.2	Eight controlled experiments were conducted in total. Each experiment consisted of three to four individuals and one group individuals was used for two experiments. Age and basic clin cal measurements were provided for each subject. Some subjec may have been used for multiple experiments, but this is unclea The method of recruitment was not described and demograph details, including sex, were not provided.
	Metric 2:	Attrition	Medium	$\times 0.4$	0.8	Subjects differed for all experiments but one. The reason for th change from experiment to experiment is not fully described.
	Metric 3:	Comparison Group	Low	$\times 0.2$	0.6	No control group was used in this study. The measured outcome were presumably compared to reference values, but the detai are not clear.
Domain 2: Expo	sure Characte	erization				
	Metric 4:	Measurement of Exposure	Low	× 0.4	1.2	The inhalation chamber was adequately described. The metho of creating the inhalation exposure and the method to monitor the exposure level were not described. Source and purity of the ter article are not reported. Exposure duration varied by exposu level. The seventh experiment described determining the carbo tetrachloride concentration by the alcohol potassium hydroxide and combustion method, but it is unclear if this was used for oth experiments.
	Metric 5:	Exposure Levels	Low	imes 0.2	0.6	Multiple exposure levels were examined in this study includie 76 ppm, 158 ppm, 317 ppm, 1191 ppm, 2300 ppm and addition unreported levels, but exposure duration varied by exposure co centration.
	Metric 6:	Temporality	Low	× 0.4	1.2	This study was a controlled inhalation exposure. The timing outcome measurement was not fully described in the text ar remains unclear, although it is presumed that measurements we taken after controlled exposure to carbon tetrachloride.
Domain 3: Outco	ome Assessm	ent				
	Metric 7:	Outcome Measurement or Characterization	Low	× 0.667	2	Clinical observations were described, if present. Hematolog urinalysis, and vital measurements were taken, but the metho or other details on outcome measurement were not reported. was not reported whether outcome investigators were blinded exposure during treatment.
	Metric 8:	Reporting Bias	Medium	× 0.333	0.67	Outcomes were outlined throughout the paper and clinical observations were described.
Domain 4: Poter	ntial Confound	ding/Variable Control				
		Continuo	d on next page .			

Table 12: Davis 1934: Evaluation of Hematological And Immune Outcomes

Study Citation: Data Type: HERO ID:		(1934). Carbon tetrachloride as an industrial hazar L_controlled_inhalation_exposure_hematology-He			Iedical A	Association, 103(13,13), 962-966
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
	Metric 9:	Covariate Adjustment	Low	× 0.667	2	A statistical analysis was not conducted. Age of the test sub- jects was provided, but no other demographic information was presented or adjusted for.
	Metric 10:	Covariate Characterization	Not Rated	NA	NA	Covariates, besides age, were not collected.
	Metric 11:	Co-exposure Confounding	Medium	× 0.333	0.67	There was no indication of co-exposures being present or mea- sured for during the controlled inhalation exposure.
Domain 5: Analy	ysis					
	Metric 12:	Study Design and Methods	Medium	× 0.5	1	This study utilized an inhalation chamber to examine the effects of acute inhalation exposures to carbon tetrachloride. No con- current control group was used and clinical measurements were presumably compared to reference standards. No statistical anal- ysis was applied to the results.
	Metric 13:	Statistical Power	Medium	× 0.25	0.5	Three to four subjects were used in each controlled inhalation experiment. This is a low number of individuals per experiment and results should be interpreted with caution.
	Metric 14:	Reproducibility of Analyses	Low	× 0.25	0.75	The inhalation chamber is described, but the method of used to achieve the inhalation exposure and ensure maintenance of an accurate dose are not described. Also, timings of exposure and measured outcomes were not reported.
	Metric 15:	Statistical Models	Not Rated	NA	NA	Results were compared to reference values and described quali- tatively only.
Domain 6: Other	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality	Determination	‡	Low		2.6	
Extracted			Yes			

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

* The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 13: Mattei et al., 2014: Evaluation of Cancer Outcomes

_

	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	All cases were histologically confirmed.
Domain 3: Outc		ent				
	Metric 6:	Temporality	Low	imes 0.4	1.2	The temporality of exposure and outcome is uncertain.
	Metric 5:	Exposure Levels	Medium	imes 0.2	0.4	Each chemical had at least 3 levels (control + 2 or more CE levels)
Domain 2: Expo	osure Characte Metric 4:	erization Measurement of Exposure	Low	× 0.4	1.2	Data was collected via a questionnaire. For each job held for a least 1 month, information was collected on the tasks and spe- cific exposures of interest. TCE was the only chlorinated solver specifically listed and Perc was stated to be the one agent that was self-reported. Chlorinated solvents were assessed using a JEM For each combination of ISCO and NAF codes, JEM assigne three indices of exposure 1) probability of exposure, 2) intensit of exposure, and 3) frequency of exposure. JEM provided a average level of exposure during a usual work day. Cumulativ Exposure Index (CEI) was calculated and transformed into ca egorical variables. However, it appears that exposure is solel based on self-report and professional judgement.
	Metric 3:	Comparison Group	High	× 0.2	0.2	Controls were selected based on incidence density sampling an were frequency matched to cases by gender and age with further stratification to make SES distribution comparable to the general population living in the departments. Cases were more likely to be current smokers, but this was addressed in the analysis.
	Metric 2:	Attrition	Medium	× 0.4	0.8	All attrition was clearly recorded. 10% of eligible cases could not be located. 16% died, and 5% could not be interviewed becaus of health status. 87% of those remaining agreed to participate 94% of eligible controls were contacted and 81% agreed to participate. There were a few subjects that were not included in th analysis based on the numbers in the table with out explanation but this was <10%.
Domain 1: Stud	Metric 1:	Participant Selection	High	× 0.4	0.4	This is a is French multi-center population-based case-contrr study conducted from 2001-2007. It included a cancer registry Case recruitment was performed in collaboration with the Frenc network of cancer registries. Population-based controls were se lected by incidence density sampling. All steps of the participa- tion were provided.
Domain	D (' ' ('	Metric	Rating [†]	MWF*	Score	Comments ^{††}
Data Type: HERO ID:		ort (CCl4 women CEI 1)-Cancer			•	
Study Citation:		Guida, F; Matrat, M; Cenée, S; Cyr, D; Sanchez, M posure to chlorinated solvents and lung cancer: Res				onal and Environmental Medicine, 71(10), 681-689

Study Citation:						F; Carton, M; Bara, S; Marrer, E; Luce, D; Stücker, I
	· · •	6	ults of the ICA	RE study O	ccupatio	onal and Environmental Medicine, 71(10), 681-689
Data Type:		ort (CCl4 women CEI 1)-Cancer				
HERO ID:	2799644					
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
	Metric 8:	Reporting Bias	High	× 0.333	0.33	Sufficient details were provided.
Domain 4: Poter	ntial Confound	ling/Variable Control				
	Metric 9:	Covariate Adjustment	High	$\times 0.5$	0.5	Confounders adjusted for included age at interview, department, smoking history, number of jobs, and SES. Genders were evalu- ated separately.
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	Information was obtained from a questionnaire without reporting reliability or validity of the questionnaire.
	Metric 11:	Co-exposure Confounding	Low	× 0.25	0.75	Exposure to asbestos was adjusted for in the analysis. It was noted that exposure to one solvent did not preclude exposure to the others, subjects were categorized in into mutually exclusive exposure groups according to various combinations of specific solvents. Combinations were evaluated separately. However, it appears that there may be too much correlation between exposure to some chemicals.
Domain 5: Anal	ysis					
	Metric 12:	Study Design and Methods	Medium	imes 0.4	0.8	Method is acceptable.
	Metric 13:	Statistical Power	Medium	imes 0.2	0.4	Likely sufficient.
	Metric 14:	Reproducibility of Analyses	Medium	imes 0.2	0.4	Information was sufficient.
	Metric 15:	Statistical Models	Medium	imes 0.2	0.4	Methods are transparent and assumptions were met.
Domain 6: Othe	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality	Determination	÷	Medium		1.8	
Extracted			Yes			

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

* The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

 $g = \begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & (\text{round to the nearest tenth}) \text{ otherwise} \end{cases},$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 14: Garcia et al., 2015: Evaluation of Cancer Outcomes

Study Citation:	Environmer	ntal Health: A Global Access Science Source		ur pollutan	ts and bre	east cancer risk in California teachers: A cohort stud
Data Type: HERO ID:	Cohort_CC 3014082	l4_CTS_BreastCancer_Q4-Cancer				
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
Domain 1: Study	y Participation	l				
	Metric 1:	Participant Selection	High	× 0.4	0.4	California Teachers Study including active and retired femal teachers and administrators were enrolled in the California Stat Teachers Retirement System and completed a questionnair Study population was comprised on 5,676 women. A participants were included using the same inclusion ar exclusion criteria.
	Metric 2:	Attrition	High	imes 0.4	0.4	Large sample of study population excluded due to women who were not residing in California at baseline, had unknown history of prior cancer, had prior history of invasive or in situ breast can cer, asked to be removed from study after joining, or had an ad dress that couldn't be geocoded. This represents adequate expla nation of attrition and is not expected to bias the results.
	Metric 3:	Comparison Group	High	\times 0.2	0.2	Cases and controls were stated to be similar. Covariates that wer different between groups were considered and included as covar ates in the final model, including a term for grouped person- risk factors.
Domain 2: Expo	sure Characte	rization				
-	Metric 4:	Measurement of Exposure	Medium	× 0.4	0.8	NATA identified and prioritized the air toxicants with respect to their potential population health risks. The first NATA was con- ducted based on 1996 emissions. EPA models annual ambier HAP concentrations using the Assessment System for Popula tion Exposure Nationwide (ASPEN). This is a well-established method of determining exposure, but may lead to some non differential exposure misclassification.
	Metric 5:	Exposure Levels	Medium	$\times 0.2$	0.4	By examining each compound individually, they categorized them into four quantiles of concentration without including ex- posure from any other compound in the model. Level of expo- sure adequate. Included four quantiles of exposure, Q1 being no exposure.
	Metric 6:	Temporality	Medium	× 0.4	0.8	Chose to use the 2002 ambient air concentration estimates for this study because that year was approximately the mid-point for the follow-up period. Decided against combining multiple year of estimate due to inconsistent methodical approaches and tem poral variations in the level of agreement between years of the assessments which could introduce exposure misclassification.
Domain 3: Outco	ome Assessme	ent				
		Co	ntinued on next page			

Study Citation:	Environmen	turley, S; Nelson, DO; Hertz, A; Reynolds, P (201) tal Health: A Global Access Science Source, 14(1 4_CTS_BreastCancer_Q4-Cancer		air pollutant	s and bre	east cancer risk in California teachers: A cohort stud
Data Type: HERO ID:	3014082	4_C15_breastCancer_Q4-Cancer				
Domain		Metric	Rating [†]	MWF^{\star}	Score	Comments ^{††}
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	CTS cohort is followed annually for cancer diagnosis, death, and change of address. Annual linkage between CCR and cohort membership was used to identify incident cancer rates. Defined a case as any woman diagnosed with invasive breast cancer (ICD- 03 site codes CS00-CS09, excluding those with histology codes for 9050-9055, 9140, and 9590-9992) after the date they com- pleted their baseline questionnaire through Dec 31, 2011.
	Metric 8:	Reporting Bias	High	× 0.333	0.33	CCR maintains high standards for data quality and completeness and is estimated to be 99% complete. Ascertained date and cause of death from mortality files as well as reports from relatives.
Domain 4: Potent		ling/Variable Control				
	Metric 9:	Covariate Adjustment	High	× 0.5	0.5	All models were stratified by age and adjusted either for race alone or for race and personal risk factors of interest. For each compound, p-values for each non-degenerative quantile HF were adjusted for multiple testing across the ten subsets using False Discovery Rates.
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	Covariates were obtained from the CTS baseline questionnaire. This was self-reported information, but there is no evidence to suggest that it is not a valid method of obtaining covariate infor- mation.
	Metric 11:	Co-exposure Confounding	Medium	$\times 0.25$	0.5	No indication of unbalanced co-exposures.
Domain 5: Analys						
	Metric 12:	Study Design and Methods	Medium	$\times 0.4$	0.8	Cohort was appropriate study design. Examined the relationship between risk of breast cancer and numerous compounds of inter- est. Used two different methods of parameterizing exposure in the models.
	Metric 13:	Statistical Power	Medium	\times 0.2	0.4	Number of subjects for estimated exposure was 5,670 women. There were enough subjects to detect effects for some chemicals and for some trends.
	Metric 14:	Reproducibility of Analyses	Medium	imes 0.2	0.4	Study design and methods can be reproducible with information provided. Provided reasoning on how categories were created for exposure quantiles, why covariates were used. Covariates included in the models are reported explicitly.
	Metric 15:	Statistical Models	Medium	\times 0.2	0.4	Used COX proportional hazard models to estimate hazard rate ra- tios. Parameterized exposures into quantiles, modeled exposure as a continuous variable, and tested for non-zero slope using a likelihood ratio test.
Domain 6: Other	Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
		Continued	l on next page	•••		

Study Citation:	Garcia, E; Hurley, S; Nelson, DO; Hertz, A; Reynolds, P (2015 Environmental Health: A Global Access Science Source, 14(1)		air pollutan	ts and breast of	cancer risk in California teachers: A cohort study
Data Type:	Cohort_CCl4_CTS_BreastCancer_Q4-Cancer				
HERO ID:	3014082				
Domain	Metric	Rating [†]	MWF*	Score	Comments ^{††}
	Metric 18: Method Sensitivity		NA	NA	
	Metric 19: Biomarker Stability		NA	NA	
	Metric 20: Sample Contamination		NA	NA	

* MWF = Metric Weighting Factor † High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

Metric 21:

Metric 22:

Overall Quality Determination[‡]

Extracted

* The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & (\text{round to the nearest tenth}) \text{ otherwise} \end{cases}$

High

Yes

NA

NA

NA

NA

1.5

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

^{††} This metric met the criteria for high confidence as expected for this type of study.

Method Requirements

Matrix Adjustment

Table 15: Carton et al., 2017: Evaluation of Cancer Outcomes

_

Study Citation:	risk of head	and neck cancer in women: A population-based c				ce, D (2017). Occupational exposure to solvents an Medical Journal Open, 7(1), e012833
Data Type: HERO ID:	ICARE_CO 3480125	Cl4_HeadNeckCancer_OR_EverExposure-Cancer				
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
Domain 1: Study	y Participation	1				
	Metric 1:	Participant Selection	High	$\times 0.4$	0.4	296 cases of head and neck squamous cell carcinomas and 775 controls were drawn from ICARE, a French population-base case-control study (Luce 2011). Only women.
	Metric 2:	Attrition	Medium	$\times 0.4$	0.8	Participation rates in initial ICARE study were 82.5% for case and 80.6% for controls. Restricting to only females with squa mous cell carcinomas in areas of interest led to 296 cases an 755 controls.
	Metric 3:	Comparison Group	High	× 0.2	0.2	Controls selected from general population based on age, geo graphic region and SES. However, there are statistically signifi icant differences in terms of age, geographic region, SES, smok ing and alcohol consumption. These covariates are all considere in the analysis. Cases ~2 years younger than controls, lower SES and more likely to smoke or drink alcohol.
Domain 2: Expo	sure Characte	rization				
2011.uur 2. 2. 2. 2.	Metric 4:	Measurement of Exposure	Low	× 0.4	1.2	Employment history from in person interviews and question naires. Employment of 1+ month coded by trained coder blinded to status using International Standard Classification o Occupations and the Nomenclature des Activités Françaises Job-exposure matrix from French Institute of Health Surveillance to predict exposure probability, intensity, and frequency.
	Metric 5:	Exposure Levels	Medium	$\times 0.2$	0.4	Analysis includes dichotomous ever/never exposed, as well a continuous exposure intensity, exposure duration and cumulative exposure indices.
	Metric 6:	Temporality	Low	$\times 0.4$	1.2	Time between potential occupational exposure and diagnosis no stated.
Domain 3: Outc	ome Assessm	ent				
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	Cases identified from cancer registries in 10 geographical region of France. Histologically confirmed diagnosis from 2001-2007 in women aged 18-85. ICD-O-3 codes were used to identify squa mous cell carcinomas in oral cavity, oropharynx, hypopharynx oral cavity, and larynx (detailed list of codes in text).
	Metric 8:	Reporting Bias	High	× 0.333	0.33	Quantitative description of relevant outcomes (head and neck cancers in women) from the abstract/methods are provided and extractable.
Domain 4: Poter	ntial Confoun	ding/Variable Control				
		Continue	d on next page			

Study Citation:		Barul, C; Menvielle, G; Cyr, D; Sanchez, M; Pilo and neck cancer in women: A population-based ca				ce, D (2017). Occupational exposure to solvents and Medical Journal Open 7(1) e012833
Data Type: HERO ID:		14_HeadNeckCancer_OR_EverExposure-Cancer		iy in France	Dinish	
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
	Metric 9:	Covariate Adjustment	High	× 0.5	0.5	Analyses adjusted for geographical area, age, smoking status, to- bacco consumption (pack-years) and alcohol consumption. In- teraction terms for smoking and alcohol were also included. SES considered with last occupation and longest occupation, but did not impact ORs and were not presented.
	Metric 10:	Covariate Characterization	Medium	$\times 0.25$	0.5	In person interviews with standardized questionnaire.
	Metric 11:	Co-exposure Confounding	Medium	× 0.25	0.5	Exposures to TCE, Perc, and DCM were strongly correlated. Rather than adjusting for co-exposures, exclusive exposure to in- dividual and combinations of chlorinated solvents were analyzed.
Domain 5: Anal	ysis					
	Metric 12:	Study Design and Methods	Medium	$\times 0.4$	0.8	Study design was appropriate for the research questions. Logistic regression was used appropriately to estimate ORs and CIs.
	Metric 13:	Statistical Power	Medium	× 0.2	0.4	The cohort contains sufficient participants to detect an effect for TCE, perc, and DCM. Insufficient data for carbon tetrachloride, so it was excluded from analysis beyond an ever/never OR. For analysis involving ever exposure to CCL4, the number of cases and controls is relatively small.
	Metric 14:	Reproducibility of Analyses	Low	$\times 0.2$	0.6	Although the process of creating the regression models was de- scribed in detail, adjustments used for covariates were not explic- itly stated.
	Metric 15:	Statistical Models	Medium	\times 0.2	0.4	Odds ratios and 95% confidence intervals were determined us- ing unconditional logistic regression adjusted for key covariates. Models were transparent and assumptions were met.
Domain 6: Othe	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality	Determination	÷	Medium		1.8	
Extracted			Yes			

Continued on next page ...

	continued	from previous	page		
Study Citation:	Carton, M; Barul, C; Menvielle, G; Cyr, D; Sanchez, M; Pilor risk of head and neck cancer in women: A population-based ca	-			
Data Type: HERO ID:	ICARE_CCl4_HeadNeckCancer_OR_EverExposure-Cancer 3480125				-
Domain	Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.
[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

0 11 1	4	if any metric is unacceptable	
Overall rating =	$\left\{ \left[\sum_{i} \left(\text{Metric Score}_{i} \times \text{MWF}_{i} \right) / \sum_{j} \text{MWF}_{j} \right]_{0.1} \right\}$	(round to the nearest tenth) otherwise	,

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 16: Nelson et al., 2012: Evaluation of Cancer Outcomes

Study Citation:		Burchfiel, CM; Fekedulegn, D; Andrew, ME (20 d Honolulu-Asia Aging Study Journal of Neuroon			s for inc	ident glioblastoma multiforme: The Honolulu Hea
Data Type: HERO ID:		S_CCL4_glioblastoma_high occupational-Cancer	8,,,(-),			
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
Domain 1: Study	y Participatior	1				
	Metric 1:	Participant Selection	High	× 0.4	0.4	Cohort of aging men of Japanese ancestry born between and 190 and 1919 and between age 45-68 at time of initial examinatio (1965-1968). Participants identified through WWII selective se vice records. Of 14,426 men estimated to be Oahu resident 11,148 were located and 8,006 completed a baseline examina- tion (>70% of target population).
	Metric 2:	Attrition	High	$\times 0.4$	0.4	Participants followed through series of six follow-up exam nations from 1968-2000, and less than 1% lost to follow-u (5/8,006). Occupational exposure data available for entire coho based on information collected in first and third examinations.
	Metric 3:	Comparison Group	High	\times 0.2	0.2	Participants identified through WWII selective service record: All were born between 1900-1919 and were aged 45-68 at tim of initial examination (1965-1968). There is no evidence the participants were not similar in health status.
Domain 2: Expo	sure Characte	rization				
	Metric 4:	Measurement of Exposure	Low	× 0.4	1.2	Participants reported present and usual jobs and years worke at these jobs during the first and third examinations. Jobs wer coded according to U.S. Bureau of the Census and unique occu- pation/industry combinations were identified and independent assessed by three industrial hygienists. Likelihood of exposu was assigned by consensus as none, low, medium, and high. A intensity score was calculated using the likelihood of exposu multiplied by number of years worked in usual occupation.
	Metric 5:	Exposure Levels	Medium	$\times 0.2$	0.4	Exposure levels categorized as none, low or medium, and high but corresponding numerical levels not presented.
	Metric 6:	Temporality	Medium	× 0.4	0.8	Exposure based on responses during first and third examination (1965-1968 and 1971-1974). GBM developed during the follow up periods between 1974-1995. However, unclear whether expo sures fall within relevant exposure window for outcome.
Domain 3: Outco	ome Assessm	ent				
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	All GBM cases were confirmed by histological examination The source of initial diagnosis was not reported, but is assume to have come from follow-up examinations, hospital discharg records, and/or death certificates or searches of the Nationa Death Index.
		Continue	d on next page			

8:	_CCL4_glioblastoma_high occupational-Cancer Metric Reporting Bias ing/Variable Control Covariate Adjustment Covariate Characterization	Rating [†] High Medium Medium	$\frac{MWF^{\star}}{\times 0.333}$ $\times 0.5$ $\times 0.25$	Score 0.33	Comments ^{††} HR and 95% CI reported for outcome outlined. Number of case and non-cases also reported for each analysis. All outlined sta tistical analyses were reported with sufficient detail. Adjustment methods not explicitly described, but were made fo other risk factors included in the model (age, education, tricep skinfold, sugar consumption, coffee consumption, tea consump tion, chest surgery, blood transfusion).
ound 9:	Reporting Bias ing/Variable Control Covariate Adjustment	High	× 0.333 × 0.5	0.33	 HR and 95% CI reported for outcome outlined. Number of case and non-cases also reported for each analysis. All outlined statistical analyses were reported with sufficient detail. Adjustment methods not explicitly described, but were made for other risk factors included in the model (age, education, tricep skinfold, sugar consumption, coffee consumption, tea consumption.
ound 9:	ing/Variable Control Covariate Adjustment	Medium	× 0.5		and non-cases also reported for each analysis. All outlined statistical analyses were reported with sufficient detail. Adjustment methods not explicitly described, but were made for other risk factors included in the model (age, education, tricep skinfold, sugar consumption, coffee consumption, tea consumption,
9:	Covariate Adjustment			1	other risk factors included in the model (age, education, tricep skinfold, sugar consumption, coffee consumption, tea consump
				1	other risk factors included in the model (age, education, tricep skinfold, sugar consumption, coffee consumption, tea consump
10:	Covariate Characterization	Medium	V 0 25		tion, enest surgery, blood transfusion).
			× 0.23	0.5	Basic demographic, occupational and socioeconomic data, med ical history (chest surgery, blood transfusion, herpes), and lifestyle factors including usual physical activity, smoking habits alcohol intake, and dietary habits identified from questionnaire completed from the first three examinations (self-reported), bu no report of validation. Exposure based on self-report of job and classification by independent industrial hygienists. Addit tional risk factors (e.g., tricep skinfold thickness) were assesses during the first three examinations, but no detailed description o methods provided.
11:	Co-exposure Confounding	Medium	× 0.25	0.5	Cases and non-cases were similar in exposure to solvents, pest cides, and metals.
12:	Study Design and Methods	Medium	× 0.4	0.8	The study design (prospective cohort) and statistical methods (in cluding a multivariate analysis to estimate the hazard ratio asso ciated with exposure to CCl4, using the Cox proportional hazard regression model) were appropriate for the research question.
13:	Statistical Power	Medium	$\times 0.2$	0.4	Cohort size (8,006) is sufficient to detect an effect, but only cases resulting in low statistical power.
14:	Reproducibility of Analyses	Medium	× 0.2	0.4	Exact logistic regression relating to each potential risk factor wa performed to obtain exact p-values which were then used to as sess linear trend. Multivariate analysis performed using Cox pro portional hazards regression model to estimate hazard ratio.
15:	Statistical Models	Medium	imes 0.2	0.4	Model assumptions were described and met.
ratior					
16:	Use of Biomarker of Exposure		NA	NA	
17:			NA		
18:	•				
19:					
	-				
20:	Method Requirements		NA	NA	
r 1 1	ation 6: 7: 8: 9:	 ations for Biomarker Selection and Measurement 6: Use of Biomarker of Exposure 7: Effect Biomarker 8: Method Sensitivity 9: Biomarker Stability 0: Sample Contamination 11: Method Requirements 	 ations for Biomarker Selection and Measurement 6: Use of Biomarker of Exposure 7: Effect Biomarker 8: Method Sensitivity 9: Biomarker Stability 0: Sample Contamination 11: Method Requirements 	ations for Biomarker Selection and Measurement6:Use of Biomarker of ExposureNA7:Effect BiomarkerNA8:Method SensitivityNA9:Biomarker StabilityNA0:Sample ContaminationNA	ations for Biomarker Selection and Measurement6:Use of Biomarker of ExposureNANA7:Effect BiomarkerNANA8:Method SensitivityNANA9:Biomarker StabilityNANA0:Sample ContaminationNANA11:Method RequirementsNANA

Study Citation:	Nelson, JS; Burchfiel, CM; Fekedulegn, D; Andrew, ME (2012). Potential risk factors for incident glioblastoma multiforme: The Honolulu H Program and Honolulu-Asia Aging Study Journal of Neurooncology, 109(2), 315-321								
Data Type:	HHP-HAAS_CCL4_glioblastoma_high occupational-Cancer								
HERO ID:	3481852								
Domain	Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}				
	Metric 22: Matrix adjustment		NA	NA					
Overall Quality I	Determination [‡]	Medium		1.7					
Extracted		Yes							

* MWF = Metric Weighting Factor
† High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.
‡ The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating =
$$\begin{cases} 4 & \text{if any metric is unacceptable} \\ \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$$

,

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 17: Purdue et al., 2016: Evaluation of Cancer Outcomes

_

Study Citation:	WH; Rothn	nan, N; Hofmann, JN (2016). Occupational expos				d, BI; Davis, F; Ruterbusch, J; Schwartz, K; Chow dney cancer: A case-control study Occupational an
Data Type: HERO ID:		ntal Medicine, 74(4), 268-274 ol study of kidney cancer in workers exposed to chl	lorinated solven	nts - CCl4_9	90% OR-	Cancer
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
Domain 1: Stud	y Participation	1				
	Metric 1:	Participant Selection	High	imes 0.4	0.4	Selection factors unlikely to be related to CCl4 exposures.
	Metric 2:	Attrition	Medium	$\times 0.4$	0.8	77% participation in cases; 54% participation in controls; ratio- nale was provided.
	Metric 3:	Comparison Group	High	imes 0.2	0.2	Age-, gender- and race-matched controls.
Domain 2: Expo	osure Characte					
	Metric 4:	Measurement of Exposure	Medium	imes 0.4	0.8	Job exposure matrix
	Metric 5:	Exposure Levels	Medium	$\times 0.2$	0.4	Indicators of probability, frequency and intensity; tertiles for cu- mulative hours exposed.
	Metric 6:	Temporality	High	$\times 0.4$	0.4	Exposure lagged to account for cancer latency.
Domain 3: Outc	come Assessm					
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	Cases identifies by cancer surveillance system and many histo- logically confirmed.
	Metric 8:	Reporting Bias	High	× 0.333	0.33	Odds ratios reported with 95% confidence intervals for kidney cancer and exposure to TCE, CCL4, DCM and Perc.
Domain 4: Pote	ntial Confound	ding/Variable Control				
	Metric 9:	Covariate Adjustment	High	$\times 0.5$	0.5	Adjusted for age, sex, race, study centre, education level, smok- ing status, BMI and history of hypertension.
	Metric 10:	Covariate Characterization	High	$\times 0.25$	0.25	Some covariate information was self-reported (smoking, hyper- tension, race)
	Metric 11:	Co-exposure Confounding	Medium	$\times 0.25$	0.5	TCE exposure did not confound Perc results.
Domain 5: Anal	lysis					
	Metric 12:	Study Design and Methods	Medium	$\times 0.4$	0.8	Case-control study used to evaluate occupational TCE, Perc. DCM, and CCl4 exposure and kidney cancer.
	Metric 13:	Statistical Power	Medium	$\times 0.2$	0.4	Between medium and unacceptable, medium is the better char acterization. An elevated risk of TCE was detected - it just wasn' statistically significant.
	Metric 14:	Reproducibility of Analyses	Medium	imes 0.2	0.4	Odds ratios calculated with unconditional logistic regression.
	Metric 15:	Statistical Models	Medium	$\times 0.2$	0.4	Adjustments used in determining ORs clearly stated.
Domain 6: Othe	er Consideratio	ons for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
		Continued	d on next page			

Study Citation:	Purdue, MP; Stewart, PA; Friesen, MC; Colt, JS; Locke, SJ; Hein, MJ; Waters, MA; Graubard, BI; Davis, F; Ruterbusch, J; Schwartz, K; Chow,
	WH; Rothman, N; Hofmann, JN (2016). Occupational exposure to chlorinated solvents and kidney cancer: A case-control study Occupational and
	Environmental Medicine, 74(4), 268-274
Data Type:	Case-control study of kidney cancer in workers exposed to chlorinated solvents - CCl4_90% OR-Cancer
HERO ID:	3482059

Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality	Determination	÷	High		1.4	

* MWF = Metric Weighting Factor

Extracted

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

 $Overall rating = \begin{cases} 4 & \text{if any metric is unacceptable} \\ \\ \left[\sum_{i} (Metric Score_{i} \times MWF_{i}) / \sum_{j} MWF_{j} \right]_{0.1} & (round to the nearest tenth) otherwise \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Yes

Table 18: Dow Chemical, Co 1992: Evaluation of Cancer Outcomes

HERO ID:	4215786	Metric	Rating [†]	MWF*	Score	Comments ^{††}
Domain 1: Stud	v Dantiainatian		Kating	101 00 1	Beole	connents
Domain 1. Stud	Metric 1:	Participant Selection	High	× 0.4	0.4	Any former male employee that had one or more years of ser vice between 1940 and Dec 31, 1980. Cases were those wh expired of primary lung cancer prior to Dec 1980. Two control groups were chosen, deceased (died after the case, not more tha 5 years) and living (survived at least as long as the case, but coul die later), chosen from all other members of the cohort withou cancer. Ages were reported. All men. All control cases wer matched for age, race, and year of hire to each case.
	Metric 2:	Attrition	High	$\times 0.4$	0.4	Numbers used in the study were explained in detail. 81.9% completed interviews - 734 subjects.
	Metric 3:	Comparison Group	High	$\times 0.2$	0.2	Controls were matched with cases on race, year of birth (+/- 5 and year of hire.
Domain 2: Expo	osure Characte	erization				
	Metric 4:	Measurement of Exposure	Medium	\times 0.4	0.8	Employee's Dow work history record served as the starting poin for categorizing occupation exposures of interest. Used wor area and chemical and physical agent exposure profiles. Chem ical and physical agent exposure profiles were developed by certified industrial hygienist for each case and control.
	Metric 5:	Exposure Levels	Medium	× 0.2	0.4	For carbon tetrachloride a degree of exposure ranking (higl moderate, or low) was assigned to each job. This was based o limited industrial hygiene monitoring data and therefore was no possible to estimate exposure
	Metric 6:	Temporality	Medium	× 0.4	0.8	Interviews conducted in 1984 on all employed >1 year betwee 1940 and 1980 who were selected for study; onset of diseas is estimated to be 3-5 years from exposure. Analysis was als completed with incorporation of a 15 year latency period
Domain 3: Outc	come Assessm	ent				
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	Death certificates and hospital records when available. Cas must have bronchus, lung or respiratory system as underlyin cause, contributing cause, or as other significant condition
	Metric 8:	Reporting Bias	High	$\times 0.333$	0.33	Ns, ORs, and 95% CIs reported
Domain 4: Poter	ntial Confound	ding/Variable Control				
	Metric 9:	Covariate Adjustment	High	× 0.5	0.5	Adjusted for smoking, vitamin A consumption, migration pa terns, occupational exposures outside the facility, vitamin sup plements, education level. Collected confounding variables b telephone interviews with subject or next of kin; age, race, yea of hire, death (+/-5 yr) all considered

Study Citation: Data Type: HERO ID:		cal Company (1992). Nested case-control study o al_case control_CCl4_lung cancer_High Exposure	•	nong chem	ical work	ers
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	Telephone interview to collect information on participants from participant or next of kin (not as accurate as primary data)
	Metric 11:	Co-exposure Confounding	Medium	× 0.25	0.5	Attempts were made to adjust for confounding exposures; these were collected from phone interviews (smoking status and dura- tion, vitamin A intake, occupational exposures outside the facil- ity, education level)
Domain 5: Analy	/sis					
	Metric 12:	Study Design and Methods	Medium	× 0.4	0.8	The study design is appropriate for the population/outcomes studied. Eligible workers who worked at the plant for over 1 year between 1940-1980, those who died of or with respiratory disease were assessed for exposures to chemicals and develop- ment of lung cancer.
	Metric 13:	Statistical Power	Medium	× 0.2	0.4	308 and 616-28 overlapping individuals; exposure determined from job titles and bucketed into high, medium and low expo- sures. Odds ratios determined for CCl4 exposure with 15 year latency and without regard to year of death as well as across lev- els of occupational exposure.
	Metric 14:	Reproducibility of Analyses	Medium	$\times 0.2$	0.4	Methods are clearly laid out and can be reproduced. Cases and controls were compared with traditional stratification and con- ditional logistic regression. The observation period for each matched set ended at the time of each death of case.
	Metric 15:	Statistical Models	Low	$\times 0.2$	0.6	Statistical methods were not outlined, but indirect evidence shows they are adequate (OR reporting, confounder adjustments)
Domain 6: Other	Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality I	Determination	‡	High		1.5	
Extracted			Yes			
		Continue	d on novt nago			

Continued on next page ...

Study Citation: Do	w Chemical Company (1992). Nested case-control study	of lung cancer am	ong chemi	ical workers	
••	eupational_case control_CCl4_lung cancer_High Exposu 5786	re-Cancer			
Domain	Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}

MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.
[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 19: Davis 1934: Evaluation of Renal Outcomes

Oomain 1: Study P I	articipation		Rating [†]	MWF^{\star}	Score	Comments ^{††}
•	···· · · · ·					
	Metric 1:	Participant Selection	Low	imes 0.4	1.2	Eight controlled experiments were conducted in total. Each experiment consisted of three to four individuals and one group of individuals was used for two experiments. Age and basic clim cal measurements were provided for each subject. Some subject may have been used for multiple experiments, but this is unclea The method of recruitment was not described and demographi details, including sex, were not provided.
1	Metric 2:	Attrition	Medium	$\times 0.4$	0.8	Subjects differed for all experiments but one. The reason for thi change from experiment to experiment is not fully described.
I	Metric 3:	Comparison Group	Low	$\times 0.2$	0.6	No control group was used in this study. The measured outcome were presumably compared to reference values, but the detail are not clear.
Oomain 2: Exposu	re Character	rization				
I	Metric 4:	Measurement of Exposure	Low	× 0.4	1.2	The inhalation chamber was adequately described. The metho of creating the inhalation exposure and the method to monitor th exposure level were not described. Source and purity of the ter- article are not reported. Exposure duration varied by exposur level. The seventh experiment described determining the carbo tetrachloride concentration by the alcohol potassium hydroxid and combustion method, but it is unclear if this was used for othe experiments.
1	Metric 5:	Exposure Levels	Low	× 0.2	0.6	Multiple exposure levels were examined in this study includin 76 ppm, 158 ppm, 317 ppm, 1191 ppm, 2300 ppm and additional unreported levels, but exposure duration varied by exposure con- centration.
I	Metric 6:	Temporality	Low	× 0.4	1.2	This study was a controlled inhalation exposure. The timing c outcome measurement was not fully described in the text an remains unclear, although it is presumed that measurements wer taken after controlled exposure to carbon tetrachloride.
Oomain 3: Outcom	ne Assessme	nt				
I	Metric 7:	Outcome Measurement or Characterization	Low	× 0.667	2	Clinical observations were described, if present. Hematology urinalysis, and vital measurements were taken, but the method or other details on outcome measurement were not reported. was not reported whether outcome investigators were blinded to exposure during treatment.
1	Metric 8:	Reporting Bias	Medium	× 0.333	0.67	Outcomes were outlined throughout the paper and clinical observations were described.

Study Citation: Data Type: HERO ID:		(1934). Carbon tetrachloride as an industrial hazar <u>controlled_inhalation_exposure_renal-Renal</u>	rd Journal of the	American N	Aedical A	Association, 103(13,13), 962-966
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
	Metric 9:	Covariate Adjustment	Low	× 0.667	2	A statistical analysis was not conducted. Age of the test sub- jects was provided, but no other demographic information was presented or adjusted for.
	Metric 10:	Covariate Characterization	Not Rated	NA	NA	Covariates, besides age, were not collected.
	Metric 11:	Co-exposure Confounding	Medium	× 0.333	0.67	There was no indication of co-exposures being present or mea- sured for during the controlled inhalation exposure.
Domain 5: Analy	ysis					
	Metric 12:	Study Design and Methods	Medium	× 0.5	1	This study utilized an inhalation chamber to examine the effects of acute inhalation exposures to carbon tetrachloride. No con- current control group was used and clinical measurements were presumably compared to reference standards. No statistical anal- ysis was applied to the results.
	Metric 13:	Statistical Power	Medium	× 0.25	0.5	Three to four subjects were used in each controlled inhalation experiment. This is a low number of individuals per experiment and results should be interpreted with caution.
	Metric 14:	Reproducibility of Analyses	Low	× 0.25	0.75	The inhalation chamber is described, but the method of used to achieve the inhalation exposure and ensure maintenance of an accurate dose are not described. Also, timings of exposure and measured outcomes were not reported.
	Metric 15:	Statistical Models	Not Rated	NA	NA	Results were compared to reference values and described quali- tatively only.
Domain 6: Other	Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality I	Determination	‡	Low		2.6	
Extracted			Yes			

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

* The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} \left(\text{Metric Score}_{i} \times \text{MWF}_{i} \right) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 20: Davis 1934: Evaluation of Cardiovascular Outcomes

Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
Domain 1: Study	Participation					
	Metric 1:	Participant Selection	Low	$\times 0.4$	1.2	Eight controlled experiments were conducted in total. Each experiment consisted of three to four individuals and one group of individuals was used for two experiments. Age and basic clin cal measurements were provided for each subject. Some subject may have been used for multiple experiments, but this is unclea The method of recruitment was not described and demograph details, including sex, were not provided.
	Metric 2:	Attrition	Medium	$\times 0.4$	0.8	Subjects differed for all experiments but one. The reason for th change from experiment to experiment is not fully described.
	Metric 3:	Comparison Group	Low	$\times 0.2$	0.6	No control group was used in this study. The measured outcome were presumably compared to reference values, but the detai are not clear.
Domain 2: Expos	sure Character	rization				
	Metric 4:	Measurement of Exposure	Low	× 0.4	1.2	The inhalation chamber was adequately described. The metho of creating the inhalation exposure and the method to monitor the exposure level were not described. Source and purity of the ter- article are not reported. Exposure duration varied by exposu- level. The seventh experiment described determining the carbo- tetrachloride concentration by the alcohol potassium hydroxic and combustion method, but it is unclear if this was used for oth experiments.
	Metric 5:	Exposure Levels	Low	× 0.2	0.6	Multiple exposure levels were examined in this study includin 76 ppm, 158 ppm, 317 ppm, 1191 ppm, 2300 ppm and addition unreported levels, but exposure duration varied by exposure co centration.
	Metric 6:	Temporality	Low	× 0.4	1.2	This study was a controlled inhalation exposure. The timing outcome measurement was not fully described in the text ar remains unclear, although it is presumed that measurements we taken after controlled exposure to carbon tetrachloride.
Domain 3: Outco	ome Assessme	ent				
	Metric 7:	Outcome Measurement or Characterization	Low	× 0.667	2	Clinical observations were described, if present. Hematolog urinalysis, and vital measurements were taken, but the methor or other details on outcome measurement were not reported. was not reported whether outcome investigators were blinded exposure during treatment.
	Metric 8:	Reporting Bias	Medium	× 0.333	0.67	Outcomes were outlined throughout the paper and clinical obse vations were described.

Study Citation: Data Type: HERO ID:		(1934). Carbon tetrachloride as an industrial hazar L_controlled_inhalation_exposure_BP-Cardiovascu		American N	Iedical A	Association, 103(13,13), 962-966
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
	Metric 9:	Covariate Adjustment	Low	× 0.667	2	A statistical analysis was not conducted. Age of the test sub- jects was provided, but no other demographic information was presented or adjusted for.
	Metric 10:	Covariate Characterization	Not Rated	NA	NA	Covariates, besides age, were not collected.
	Metric 11:	Co-exposure Confounding	Medium	× 0.333	0.67	There was no indication of co-exposures being present or mea- sured for during the controlled inhalation exposure.
Domain 5: Analy	ysis					
	Metric 12:	Study Design and Methods	Medium	× 0.5	1	This study utilized an inhalation chamber to examine the effects of acute inhalation exposures to carbon tetrachloride. No con- current control group was used and clinical measurements were presumably compared to reference standards. No statistical anal- ysis was applied to the results.
	Metric 13:	Statistical Power	Medium	× 0.25	0.5	Three to four subjects were used in each controlled inhalation experiment. This is a low number of individuals per experiment and results should be interpreted with caution.
	Metric 14:	Reproducibility of Analyses	Low	× 0.25	0.75	The inhalation chamber is described, but the method of used to achieve the inhalation exposure and ensure maintenance of an accurate dose are not described. Also, timings of exposure and measured outcomes were not reported.
	Metric 15:	Statistical Models	Not Rated	NA	NA	Results were compared to reference values and described quali- tatively only.
Domain 6: Other	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality	Determination	÷	Low		2.6	
Extracted			Yes			

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

* The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 21: Siemiatycki 1991: Evaluation of Cancer Outcomes

Study Citation: Data Type: HERO ID:	•	J (1991). Risk factors for cancer in the workplace er andy exposure_rectal cancer-Cancer				
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
Domain 1: Study	y Participation					
	Metric 1:	Participant Selection	High	× 0.4	0.4	Of the 4,576 eligible male cases from the Montreal metropolitan area that were ascertained between 1979-1985, 3,730 completed an interview during this study (initiated in 1979 as a case- control design). Each cancer was coded by the International Classification of Disease for Oncology. Of 541 eligible population male controls, 375 were interviewed and selected from random digit calling, the provincial election of 1981, were noncancer patients hospitalized in the same institutions as those with cancer - a sub-group of control cancer cases unrelated to occupational exposure or with cancer at another site deemed not occupationally relevant was also interviewed.
	Metric 2:	Attrition	High	× 0.4	0.4	81.5% of eligible cases completed interviews. 72% of controls. Non-responses due to refusal, death, no next of kin found, patient discharged, no valid address, psychiatric cases, no translator, or physician refusal.
	Metric 3:	Comparison Group	High	$\times 0.2$	0.2	Population controls, hospital controls and cancer controls (cancer control preferred). Baseline characteristics were collected from participants and adjusted for. Cases and controls were similar in that they were selected from Montreal, Canada, between 35-70 years old, male and recruited from 1979-1985.
Domain 2: Expo	sure Character	ization				
	Metric 4:	Measurement of Exposure	Low	× 0.4	1.2	Exposure determined by questionnaire, no occupational records. Chemist-hygienists interview consultants to better grasp the workings of particular industries, occupations were selected and coded as low medium or high concentrations of exposure to a host of chemicals based on job title.
	Metric 5:	Exposure Levels	Medium	$\times 0.2$	0.4	Any or substantial exposure was assigned to each job title and patients were assigned to one of the two categories for analysis. Assignments made by a chemist-hygienist.
	Metric 6:	Temporality	Low	$\times 0.4$	1.2	Cases aged 35-70, time since first exposure not estimated; study was initiated in 1979 with exposures occurring before or between 1945-1975.
Domain 3: Outco	ome Assessme	nt				
	Metric 7:	Outcome Measurement or Characterization	High	\times 0.667	0.67	Histological or autopsy confirmation of primary tumor site.
	Metric 8:	Reporting Bias	High	× 0.333	0.33	ORs with 90% CIs.
Domain 4: Poter	ntial Confound	ing/Variable Control				
		Continued of	n next page			

Data Type: HERO ID:	CCL4_worl 157954	xer andy exposure_rectal cancer-Cancer				
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
	Metric 9:	Covariate Adjustment	High	$\times 0.5$	0.5	For each association between occupational exposure and cancer type, adjustments included age, height, place of birth, and race.
	N 10			0.05	0.5	Confounders based on literature and questionnaire data.
	Metric 10:	Covariate Characterization	Medium	$\times 0.25$	0.5	Adjustments for other occupational exposure types, smoking,
	Metric 11:	Co-exposure Confounding	Medium	$\times 0.25$	0.5	and alcohol intake were made.
Domain 5: Ana	alysis					
	Metric 12:	Study Design and Methods	Medium	\times 0.4	0.8	This is a case-control study that collected cancer type and life- time occupational history from cancer patients to determine i occupational history effected cancer risk.
	Metric 13:	Statistical Power	Medium	$\times 0.2$	0.4	Table 1 (PDF page 61, in text page 142) results, selected for as- sociations where power was adequate (# participants and at leas 2% exposure). DCM was included in Table 2 which show elevated ORs only (irrespective of power to detect excess risk).
	Metric 14:	Reproducibility of Analyses	Medium	$\times 0.2$	0.4	Analysis was fully described and a Mantel-Haenszel analysis was performed to analyze odds ratios for the data.
	Metric 15:	Statistical Models	Medium	$\times 0.2$	0.4	Method was transparent. A Mantel-Haenszel analysis was per formed to analyze odds ratios for the data. P-values were com puted by the Mantel-Haenszel chi-square test.
Domain 6: Oth	er Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality	y Determination	÷	Medium		1.7	
Extracted			Yes			

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

* The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

^{††} This metric met the criteria for high confidence as expected for this type of study.

Study Citation: Siemiatycki, J (1991). Risk factors for cancer in the workplace

Table 22: Heineman et al., 1994: Evaluation of Cancer Outcomes

		aliphatic hydrocarbons and risk of astrocyt l_Occupational_CCl4_AstrocyticBrainCar				
HERO ID:	194131					
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
Domain 1: Study F	Participation	l				
	Metric 1:	Participant Selection	Medium	× 0.4	0.8	Cases were gathered from death certificates of men who died of brain or other central nervous system tumors during 1978 to 198 in southern Louisiana and 1979 to 1981 in northern New Jerse and Philadelphia, Pennsylvania. Interviews were conducted with next-of-kin regarding occupational information. A total of 30 cases, which reported a hospital diagnosis of astrocytic brain tu- mor, was used.
	Metric 2:	Attrition	Medium	× 0.4	0.8	Among 483 cases with completed interviews (74% of trace next-to-kin) a hospital diagnosis was reported for 300 individ- uals. 229 cases had been pathologically confirmed. Of th matched controls 66 were excluded due to a possible associa- tion between their cause of death and occupational exposure t CAHs. In logistic regression analysis, omitted 30 subjects wit electronics-related jobs.
	Metric 3:	Comparison Group	Medium	$\times 0.2$	0.4	Controls were frequency matched to cases by age, year of death cause of death other than brain tumor/ cerebrovascular disease homicide/ suicide, and study area. 320 total controls.
Domain 2: Exposu	ire Characte	rization				
	Metric 4:	Measurement of Exposure	Low	× 0.4	1.2	Matrices were developed by first identifying the industry and oc cupation considered to entail potential exposure to each of th CAHs based on data from literature, unpublished industrial hy giene reports and inspection and by personal judgment of the project industrial hygienist. Each industry and occupation we assigned a semi-quantitative estimate of probability and of inter sity of exposure to each substance. The matrices were then linke to the work histories of the study subjects. Cumulative exposu- indices were calculated for each subject. Judgments regarding exposure made by industrial hygienists were based on work histories provided by next-of-kin, who are likely to provide less accurate information then subjects them-selves or workplace records. Poor specificity of some work his-tories for specific solvents and the interchangeability of solvents for man applications probably reduced the accuracy of exposure assignments.

Study Citation:		EF; Cocco, P; Gomez, MR; Dosemeci, M; Stewar aliphatic hydrocarbons and risk of astrocytic brain	· · · ·			mas, TL; Blair, A (1994). Occupational exposure t rial Medicine, 26(2), 155-169				
Data Type: HERO ID:	Case-control_Occupational_CCl4_AstrocyticBrainCancer_Q2-Cancer 194131									
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}				
	Metric 5:	Exposure Levels	Medium	× 0.2	0.4	Cumulative exposure score for each subject was calculated as a weight sum of years in all exposed jobs, with weight based on the square of the intensity of exposure (low=1, medium=2, high=3) assigned to each job. Average intensity was calculated over all exposed jobs for each subjects based on same scores without squaring, weighted by duration of employment in each job. Overall probability of exposure was defined as highest prob- ability score for that substance among their jobs.				
	Metric 6:	Temporality	Low	× 0.4	1.2	Each industry and occupation was assigned positive or zero decade indicators for each CAH according to the likely use of the substance during each decade between 1920 and 1980 because the use of CAHs has changed over time. Matrices indicated if the exposure was likely to occur by calendar period and probability and intensity of exposure for each industry and each occupation separately. Latency was considered by lagging exposure by 10 or 20 years.				
Domain 3: Outco	ome Assessme	ent								
	Metric 7:	Outcome Measurement or Characterization	Medium	× 0.667	1.33	Death certificates were obtained for 741 men who died of brain or other central nervous system tumors (ICD-9 codes 191, 192, 225, 239.7) during 1978 to 1980 in southern Louisiana and 1979 to 1981 in northern New Jersey and Philadelphia, Pennsylvania.				
	Metric 8:	Reporting Bias	Medium	$\times 0.333$	0.67	Recall bias was possible.				
Domain 4: Poten	ntial Confound	ling/Variable Control								
	Metric 9:	Covariate Adjustment	High	× 0.5	0.5	Adjusted for age, study area, employment, and probability of ex- posure to other chemicals of interest for the logistic regression analysis.				
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	Characterized within methods, study population section. Con- founders not assessed by method or instrument- used previous analyses to assess. Cases and controls matched by confound- ing factors (age, study area). Controlled for employment in electronics-related occupations or industries (which was associ- ated with an excess risk of astrocytic brain tumors in a previous analysis).				
	Metric 11:	Co-exposure Confounding	Low	× 0.25	0.75	Co-exposure to electromagnetic fields was not assessed or con- sidered in the analysis.				
Domain 5: Analy										
	Metric 12:	Study Design and Methods	Medium	× 0.4	0.8	Used appropriate statistical analyses and study design. Retro- spective case-control included matrices on likelihood of a certain chemical to have been used in each industry and occupation by decade and provided probability and intensity of exposure level. Cumulative exposure indices were calculated for subjects.				
			l on next page							

Study Citation:		EF; Cocco, P; Gomez, MR; Dosemeci, M; Stewa aliphatic hydrocarbons and risk of astrocytic brain				omas, TL; Blair, A (1994). Occupational exposure to rial Medicine, 26(2), 155-169
Data Type: HERO ID:	Case-contro 194131	l_Occupational_CCl4_AstrocyticBrainCancer_Q2	2-Cancer			
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
	Metric 13:	Statistical Power	Medium	$\times 0.2$	0.4	300 cases and 320 controls were used in the analysis.
	Metric 14:	Reproducibility of Analyses	Low	× 0.2	0.6	It would be difficult to reproduce this analysis because of the lack of direct information on exposure to various solvents. Infor- mation acquired from next-of-kin was likely less accurate then information from the subjects themselves or from industries that could have provided it.
	Metric 15:	Statistical Models	Medium	× 0.2	0.4	Used maximum likelihood estimates of the OR and 95% CI ad- justing for age and study area. Used the statistical significance of linear trends by Mantel (1963). Logistic regression was used to evaluate simultaneously the effects of the CAHs.
Domain 6: Other	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality I	Determination	‡	Medium		2.1	
Extracted			Yes			

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

Overall rating = $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 23: Seidler et al., 2007: Evaluation of Cancer Outcomes

Study Citation:		Möhner, M; Berger, J; Mester, B; Deeg, based case-control study in Germany Journ)7). Solvent exposure and malignant lymphoma: . gy, 2 2
Data Type: HERO ID:		ppm*yrs CCl4_Total Lymphoma-Cancer-C				-
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
Domain 1: Study	y Participatior	1				
	Metric 1:	Participant Selection	High	imes 0.4	0.4	Key elements of study design were reported including descrip tion of study area, recruitment methods, and participation rates Rationale and study design were previously published and cite (Becker et al., 2004). Complete details were reported in tha publication. Reported information indicates se-lection in or ou of the study and participation is not likely to be biased.
	Metric 2:	Attrition	Medium	× 0.4	0.8	Medium rating: participation rate among cases and controls wa 87.4% and 44.3%, respectively (controls were recruited until 71 were selected), minimal exclusion from the analysis sample an outcome data and exposure were largely complete.
	Metric 3:	Comparison Group	High	× 0.2	0.2	High rating: cases and controls were similar, for each case, gender, region and age-matched (± 1 year of birth) population control was drawn from the population registration office; differ ences in baseline characteristics of groups were also considered as potential confounding variables and were thereby controlled by statistical analysis.
Domain 2: Expo	sure Characte	rization				
	Metric 4:	Measurement of Exposure	High	× 0.4	0.4	High rating: occupational population, questionnaires adminis tered by trained interviewers that allowed for construction of job-matrix for entire work history of exposure (i.e., cumulative exposures).
	Metric 5:	Exposure Levels	Medium	$\times 0.2$	0.4	Medium rating: exposure was based on intensity ranging from 0.5 to >100 ppm and frequency ranging from 1 to >30 percent which were calculated into cumulative ppm x years exposure These were separated into 3 or more levels of exposure including a no exposure category.
	Metric 6:	Temporality	Medium	× 0.4	0.8	Temporality is established but it is unclear whether exposure fal within relevant windows for the outcome of interest. A complete occupational history was obtained, but there is no information provided to indicate when exposures occurred in relation to the cancer diagnosis.
Domain 3: Outco	ome Assessm	ent				
		Co	ntinued on next page			

Study Citation:	population-	based case-control study in Germany Journal of O				07). Solvent exposure and malignant lymphoma: A gy, 2 2
Data Type: HERO ID:	>0, <= 2.3 p 194429	opm*yrs CCl4_Total Lymphoma-Cancer-Cancer				
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	Hospital and ambulatory physicians involved in the diagnosis and therapy of malignant lymphoma were asked to identify cases; no assessment of validity (or confirmation) of diagnosis was re- ported in the paper but could be available in companion publi- cations that were cited. no evidence of differential misclassifica- tion.
	Metric 8:	Reporting Bias	High	× 0.333	0.33	High rating: all of the study's measured outcomes are reported, effect estimates reported with confidence interval; number of ex- posed reported for each analysis.
Domain 4: Poter	ntial Confound	ling/Variable Control				
	Metric 9:	Covariate Adjustment	High	× 0.5	0.5	High rating: appropriate adjustments or explicit considerations were made for potential confounders in the final analyses through the use of statistical models for covariate adjustment and matching by gender, region and age.
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	Medium rating: primary confounders (excluding co-exposures) were assessed. The paper notes that trained interviewers administered questionnaires (medical history, lifestyle, occupation) to subjects, did not describe if the questionnaire used to collect information on education, smoking, etc. has been previously validated.
	Metric 11:	Co-exposure Confounding	Medium	× 0.25	0.5	Medium rating: co-exposures were measured and modeled sep arately; the authors noted that a high correlation was observed between PCE and TCE (p=0.42). For this reason, it is difficul to disentangle the specific effects of PCE and TCE on risk o lymphoma.
Domain 5: Anal	vsis					
	Metric 12:	Study Design and Methods	Medium	× 0.4	0.8	Medium rating: appropriate design (i.e., case control study of solvent exposure in relation to a rare disease), and appropriate statistical methods (i.e., logistic regression analyses) were employed to analyze data.
	Metric 13:	Statistical Power	Medium	\times 0.2	0.4	Medium rating: authors noted that study power might have been insufficient to detect a slightly elevated lymphoma risk among DCM exposed subjects or to detect an increased lymphoma risk among PCE-exposed subjects.
	Metric 14:	Reproducibility of Analyses	Medium	\times 0.2	0.4	Medium rating: description of the analyses is sufficient to under- stand what has been done and to be reproducible with access to the data.
	Metric 15:	Statistical Models	Medium	$\times 0.2$	0.4	Medium rating: logistic regression models were used to generate Odds Ratios. Rationale for variable selection is stated. Model assumptions are met.
		Continued	d on next page			

Study Citation:	Seidler, A; Möhner, M; Berger, J; Mester, B; Deeg, E; Elsner, G; Nieters, A; Becker, N (2007). Solvent exposure and malignant lymphoma: A population-based case-control study in Germany Journal of Occupational Medicine and Toxicology, 2 2								
Data Type: HERO ID:		pm*yrs CCl4_Total Lymphoma-Cancer-Cancer	1						
HERO ID:	194429								
Domain		Metric	$Rating^{\dagger}$	MWF^{\star}	Score	Comments ^{††}			
Domain 6: Other	Consideration	ns for Biomarker Selection and Measurement							
	Metric 16:	Use of Biomarker of Exposure		NA	NA				
	Metric 17:	Effect Biomarker		NA	NA				
	Metric 18:	Method Sensitivity		NA	NA				
	Metric 19:	Biomarker Stability		NA	NA				
	Metric 20:	Sample Contamination		NA	NA				
	Metric 21:	Method Requirements		NA	NA				
	Metric 22:	Matrix Adjustment		NA	NA				
Overall Quality I	Determination	÷	High		1.5				
Extracted			Yes						

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

 $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} \left(\text{Metric Score}_{i} \times \text{MWF}_{i} \right) / \sum_{j} \text{MWF}_{j} \right]_{0.1} & \text{(round to the nearest tenth) otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 24: Dosemeci et al., 1999: Evaluation of Cancer Outcomes

Study Citation: Data Type:	hydrocarbor	M; Cocco, P; Chow, WH (1999). Gender different as American Journal of Industrial Medicine, 36(1) and occupational CCl4-Cancer		renal cell c	arcinoma	and occupational exposures to chlorinated aliphati
HERO ID:	194813					
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	Comments ^{††}
Domain 1: Study	Participation					
	Metric 1:	Participant Selection	High	$\times 0.4$	0.4	Selection was provided in detail and indicates that selection into or out of the study is not likely biased.
	Metric 2:	Attrition	Medium	× 0.4	0.8	There was an overall 86% response rate that did not differ be- tween cases and controls. For the occupational analysis, 438 of the 690 cases and 687 of the 690 controls with complete per- sonal interviews were included. There does not appear to be any missing data for the included 438 cases and 687 controls. How- ever, all cases who died (35%) were excluded from the analysis to avoid using next-of-kin interviews.
	Metric 3:	Comparison Group	Medium	× 0.2	0.4	For subjects age 20-64 years, an age- and gender-stratified ran- dom sample of white controls was obtained with random digit di- aling. For subjects age 65-85 years, an age-and gender-stratified systematic sample of white controls was obtained from the list- ing of the Health Care Financing Administration. This is a population-based case control study in Minnesota. No informa- tion on characteristics were provided for comparing the cases and controls, but they were similar in terms of age, sex, and ethnicity (all were noted to be white).
Domain 2: Expo	sure Characte	rization				
	Metric 4:	Measurement of Exposure	Medium	× 0.4	0.8	Occupational history was obtained via interview. Duration o employment in 13 specific occupations/industries and seven job with specific exposures were o btained. Occupations and indus tries were codes based on standard classifications and JEMs wer developed by the NCI for nine individual chemicals including Perc, CCl4,TCE, and DCM. Details of the JEM were provide (Dosemeci et al., 1994; Gomez et al., 1994). The JEM is base on probability and intensity scales.
	Metric 5:	Exposure Levels	Low	$\times 0.2$	0.6	Unclear, but appears to be exposed versus unexposed.
	Metric 6:	Temporality	Low	imes 0.4	1.2	The temporality of exposure and outcome is uncertain.
Domain 3: Outco	ome Assessme	ent				
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	RCC were histologically confirmed and identified through the Minnesota Cancer Surveillance System.
	Metric 8:	Reporting Bias	Medium	× 0.333	0.67	All outcomes are reported, but not in a way that would allow fo detailed extraction.
Domain 4: Poter	ntial Confound	ling/Variable Control				
		Continue	d on next page			

Study Citation:		M; Cocco, P; Chow, WH (1999). Gender differents American Journal of Industrial Medicine, 36(1)		renal cell c	arcinoma	a and occupational exposures to chlorinated aliphati
Data Type: HERO ID:	•	and occupational CCl4-Cancer				
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
	Metric 9:	Covariate Adjustment	Medium	× 0.5	1	Results adjusted for age, gender, smoking, hypertension, use of specific drugs, and BMI. There is not enough information pro- vided to know if SES would be a potential confounder, but con- sidering that controls were randomly selected it is unlikely that this would be a major potential confounder.
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	Information was collected via a questionnaire, but validity and reliability were not reported.
	Metric 11:	Co-exposure Confounding	Medium	× 0.25	0.5	There is no evidence to indicate that there were co-exposures that would appreciably bias the results. Although this was occupa- tional exposure, subjects came from different occupations and areas; therefore, it is unlikely that there would have been differ- ential co-exposures.
Domain 5: Analy	ysis					
	Metric 12:	Study Design and Methods	Medium	imes 0.4	0.8	Study design was appropriate for the research question.
	Metric 13:	Statistical power	Medium	$\times 0.2$	0.4	Statistical power should be sufficient.
	Metric 14:	Reproducibility of Analyses	Medium	$\times 0.2$	0.4	The description of the analysis was sufficient to reproduce with access to the analytical data.
	Metric 15:	Statistical Models	Medium	imes 0.2	0.4	Methods are transparent.
Domain 6: Other	r Consideratio	ns for Biomarker Selection and Measurement				
	Metric 16:	Use of Biomarker of Exposure		NA	NA	
	Metric 17:	Effect Biomarker		NA	NA	
	Metric 18:	Method Sensitivity		NA	NA	
	Metric 19:	Biomarker Stability		NA	NA	
	Metric 20:	Sample Contamination		NA	NA	
	Metric 21:	Method Requirements		NA	NA	
	Metric 22:	Matrix Adjustment		NA	NA	
Overall Quality	Determination	‡	Medium		1.9	
Extracted			Yes			

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

if any metric is unacceptable

 $\begin{cases} 4 & \text{if any metric is unacceptable} \\ \left[\sum_{i} (\text{Metric Score}_{i} \times \text{MWF}_{i}) / \sum_{j} \text{MWF}_{j}\right]_{0.1} & (\text{round to the nearest tenth}) \text{ otherwise} \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.

Table 25: Wang et al., 2009: Evaluation of Cancer Outcomes

_

Study Citation: Data Type: HERO ID:	exposure to	hang, Y; Lan, Q; Holford, TR; Leaderer, B; solvents and risk of non-Hodgkin lymphor in Lymphoma_Connecticut women_CCl4-	na in Connecticut wom			
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}
Domain 1: Study	Participation	1				
	Metric 1:	Participant Selection	Medium	× 0.4	0.8	Authors reported that participants in this study were women ages 21-84 years from Connecticut from 1996 to 2000. The cases were histologically confirmed with non-Hodgkins Lymphoma in Connecticut and had no history of any type of cancer (except nonmelanoma skin cancer). Controls with Connecticut addresses (ages 65 or less) were recruited by random digit dialing or by random selection from Centers for Medicare and Medicaid Services files (ages 65 or older). Cases and controls were matched within 5-year age groups. Both cases and controls held 3-4 jobs during their lifetime but no table was provided comparing covariates in cases vs. controls.
	Metric 2:	Attrition	Medium	× 0.4	0.8	Of the NHL cases, 601 out of 832 (72%) completed in person- interviews. Of the controls, the participation rate for those iden- tified via random digit dialing was 69% and it was 47% for those from the Health Care Financing Administration. In-person inter- views were completed for 717 controls. Outcome data included information on all 601 cases and 717 controls.
	Metric 3:	Comparison Group	Medium	× 0.2	0.4	The participants were from the same population (Connecticut women) and they were matched within 5-years of age. They were adjusted for age, family history of hematopoietic cancers, alcohol consumption, and race.
Domain 2: Expo	sure Characte	rization				
	Metric 4:	Measurement of Exposure	Medium	× 0.4	0.8	Exposure was based on the job classification by linking the coded occupational data with a job-exposure matrix updated by industrial hygienists at the NCI. Every occupation and industry was assigned a semiquantitative estimate of intensity and probability according to a scale of 0-3. Intensity was estimated on the basis of expected exposure level and frequency and exposure probability was the likelihood that a specific substance was used by a worker in a given industry or occupation. The final scores for average exposure intensity and probability were categorized as never exposed (0), low (<3), medium (3-5), and high intensity/probability (>=6). This method of exposure, since the occupational histories were self-reported.
	Metric 5:	Exposure Levels	Medium	$\times 0.2$	0.4	The study used three distributions of exposure: never, low, and medium-high which are sufficient to determine an exposure- response relationship.
		Co	ntinued on next page			

Study Citation:	Wang, R; Zhang, Y; Lan, Q; Holford, TR; Leaderer, B; Zahm, SH; Boyle, P; Dosemeci, M; Rothman, N; Zhu, Y; Qin, Q; Zheng, T (2009). Occupational exposure to solvents and risk of non-Hodgkin lymphoma in Connecticut women American Journal of Epidemiology, 169(2), 176-185									
Data Type: HERO ID:	Non Hodgki 626703	in Lymphoma_Connecticut women_CCl4-Cancer								
Domain		Metric	Rating [†]	MWF*	Score	Comments ^{††}				
	Metric 6:	Temporality	Medium	× 0.4	0.8	Participants provided information on their lifetime occupational history. Exposure within 1 year before diagnosis/interview was excluded from the interview process, however since non- Hodgkins Lymphoma takes many years to develop after expo- sure, it is unclear if all exposures fell within the relevant window to see the effect.				
Domain 3: Outco	ome Assessme	ent								
	Metric 7:	Outcome Measurement or Characterization	High	× 0.667	0.67	The study said that cases of Non-Hodgkin Lymphoma were his- tologically confirmed, but presents no further information on the procedure used to confirm the diagnosis				
	Metric 8:	Reporting Bias	High	× 0.333	0.33	The results section presents tables that present the number of cases and controls and the odds ratio and 95% confidence limits for exposure to each solvent at the never, low, and medium-high exposure levels				
Domain 4: Poter	tial Confound	ling/Variable Control								
	Metric 9:	Covariate Adjustment	High	× 0.5	0.5	All participants were Connecticut women. ORs for cases and controls were adjusted for age, family history of hematopoietic cancers, alcohol consumption, and race				
	Metric 10:	Covariate Characterization	Medium	× 0.25	0.5	In-person interviews using a standardized, structured question- naire were used to collect information on confounders. However, the authors don't report that the questionnaire was validated.				
	Metric 11:	Co-exposure Confounding	Medium	× 0.25	0.5	The job histories were divided by potential exposure to 8 spe- cific organic solvents, any organic solvent, or chlorinated sol- vents in general. However, since the occupational histories were self-reported, there is a possibility of exposure misclassification which could have resulted in non-reporting of co-exposures.				
Domain 5: Analy	vsis									
	Metric 12:	Study Design and Methods	Medium	× 0.4	0.8	A case-control study was the appropriate type of study to mea- sure the possible association between occupational exposure and development of Non-Hodgkins Lymphoma and the statistical method used - determination of Odds Ratio was appropriate.				
	Metric 13:	Statistical Power	Medium	$\times 0.2$	0.4	This study consisted of 601 cases and 717 controls which are a sufficient number to detect the effect of non-Hodgkins Lym- phoma.				
	Metric 14:	Reproducibility of Analyses	Medium	$\times 0.2$	0.4	Description of the statistical methods was sufficient to reproduce the logistic regression models and adjustment factors were in- cluded in the footnotes to the tables.				
		Court on the	d on next page							

Study Citation:	Wang, R; Zhang, Y; Lan, Q; Holford, TR; Leaderer, B; Zahm, SH; Boyle, P; Dosemeci, M; Rothman, N; Zhu, Y; Qin, Q; Zheng, T (2009). Occupational exposure to solvents and risk of non-Hodgkin lymphoma in Connecticut women American Journal of Epidemiology, 169(2), 176-185								
Data Type: HERO ID:	-	n Lymphoma_Connecticut women_CCl4-Car							
Domain		Metric	$Rating^{\dagger}$	MWF*	Score	$\operatorname{Comments}^{\dagger\dagger}$			
	Metric 15:	Statistical Models	Medium	× 0.2	0.4	Adjustment factors used in the final model were determined based on logistic regression models and adjustment for other variables, such as level of education, annual family income, to- bacco smoking, and medical history of immune-related disease did not result in material changes for the observed associations and were not included in the final model.			
Domain 6: Other	Consideration	ns for Biomarker Selection and Measurement							
	Metric 16:	Use of Biomarker of Exposure		NA	NA				
	Metric 17:	Effect Biomarker		NA	NA				
	Metric 18:	Method Sensitivity		NA	NA				
	Metric 19:	Biomarker Stability		NA	NA				
	Metric 20:	Sample Contamination		NA	NA				
	Metric 21:	Method Requirements		NA	NA				
	Metric 22:	Matrix Adjustment		NA	NA				
Overall Quality I	Determination	÷	Medium		1.7				
Extracted			Yes						

* MWF = Metric Weighting Factor

[†] High = 1; Medium = 2; Low = 3; Unacceptable = 4; N/A has no value.

[‡] The overall rating is calculated as necessary. EPA may not always provide a comment for a metric that has been categorized as High.

 $Overall rating = \begin{cases} 4 & \text{if any metric is unacceptable} \\ \\ \left[\sum_{i} (Metric Score_{i} \times MWF_{i}) / \sum_{j} MWF_{j} \right]_{0.1} & (round to the nearest tenth) otherwise \end{cases}$

where High: ≥ 1 to < 1.7; Medium: ≥ 1.7 to < 2.3; Low: ≥ 2.3 to ≤ 3.0 . If the reviewer determines that the overall rating needs adjustment, the original rating is crossed out and an arrow points to the new rating.