

Dietary Reference Intakes (DRIs): Tolerable Upper Intake Levels, Elements

Food and Nutrition Board, Institute of Medicine, National Academies

| Life Stage Group | Arsenic ^a | Boron (mg/d) | Calcium (mg/d) | Chromium | Copper (µg/d) | Fluoride (mg/d) | Iodine (µg/d) | Iron (mg/d) | Magnesium (mg/d) ^b | Manganese (mg/d) | Molybdenum (µg/d) | Nickel (mg/d) | Phosphorus (g/d) | Selenium (µg/d) | Silicon ^c | Va (m |
|------------------|----------------------|--------------|----------------|----------|---------------|-----------------|---------------|-------------|-------------------------------|------------------|-------------------|---------------|------------------|-----------------|----------------------|-------|
| Infants | | | | | | | | | | | | | | | | |
| 0–6 mo | ND ^e | ND | 1,000 | ND | ND | 0.7 | ND | 40 | ND | ND | ND | ND | ND | 45 | ND | |
| 6–12 mo | ND | ND | 1,500 | ND | ND | 0.9 | ND | 40 | ND | ND | ND | ND | ND | 60 | ND | |
| Children | | | | | | | | | | | | | | | | |
| 1–3 y | ND | 3 | 2,500 | ND | 1,000 | 1.3 | 200 | 40 | 65 | 2 | 300 | 0.2 | 3 | 90 | ND | |
| 4–8 y | ND | 6 | 2,500 | ND | 3,000 | 2.2 | 300 | 40 | 110 | 3 | 600 | 0.3 | 3 | 150 | ND | |
| Males | | | | | | | | | | | | | | | | |
| 9–13 y | ND | 11 | 3,000 | ND | 5,000 | 10 | 600 | 40 | 350 | 6 | 1,100 | 0.6 | 4 | 280 | ND | |
| 14–18 y | ND | 17 | 3,000 | ND | 8,000 | 10 | 900 | 45 | 350 | 9 | 1,700 | 1.0 | 4 | 400 | ND | |
| 19–30 y | ND | 20 | 2,500 | ND | 10,000 | 10 | 1,100 | 45 | 350 | 11 | 2,000 | 1.0 | 4 | 400 | ND | |
| 31–50 y | ND | 20 | 2,500 | ND | 10,000 | 10 | 1,100 | 45 | 350 | 11 | 2,000 | 1.0 | 4 | 400 | ND | |
| 51–70 y | ND | 20 | 2,000 | ND | 10,000 | 10 | 1,100 | 45 | 350 | 11 | 2,000 | 1.0 | 4 | 400 | ND | |
| > 70 y | ND | 20 | 2,000 | ND | 10,000 | 10 | 1,100 | 45 | 350 | 11 | 2,000 | 1.0 | 3 | 400 | ND | |
| Females | | | | | | | | | | | | | | | | |
| 9–13 y | ND | 11 | 3,000 | ND | 5,000 | 10 | 600 | 40 | 350 | 6 | 1,100 | 0.6 | 4 | 280 | ND | |
| 14–18 y | ND | 17 | 3,000 | ND | 8,000 | 10 | 900 | 45 | 350 | 9 | 1,700 | 1.0 | 4 | 400 | ND | |
| 19–30 y | ND | 20 | 2,500 | ND | 10,000 | 10 | 1,100 | 45 | 350 | 11 | 2,000 | 1.0 | 4 | 400 | ND | |
| 31–50 y | ND | 20 | 2,500 | ND | 10,000 | 10 | 1,100 | 45 | 350 | 11 | 2,000 | 1.0 | 4 | 400 | ND | |
| 51–70 y | ND | 20 | 2,000 | ND | 10,000 | 10 | 1,100 | 45 | 350 | 11 | 2,000 | 1.0 | 4 | 400 | ND | |
| > 70 y | ND | 20 | 2,000 | ND | 10,000 | 10 | 1,100 | 45 | 350 | 11 | 2,000 | 1.0 | 3 | 400 | ND | |
| Pregnancy | | | | | | | | | | | | | | | | |
| 14–18 y | ND | 17 | 3,000 | ND | 8,000 | 10 | 900 | 45 | 350 | 9 | 1,700 | 1.0 | 3.5 | 400 | ND | |
| 19–30 y | ND | 20 | 2,500 | ND | 10,000 | 10 | 1,100 | 45 | 350 | 11 | 2,000 | 1.0 | 3.5 | 400 | ND | |
| 61–50 y | ND | 20 | 2,500 | ND | 10,000 | 10 | 1,100 | 45 | 350 | 11 | 2,000 | 1.0 | 3.5 | 400 | ND | |
| Lactation | | | | | | | | | | | | | | | | |
| 14–18 y | ND | 17 | 3,000 | ND | 8,000 | 10 | 900 | 45 | 350 | 9 | 1,700 | 1.0 | 4 | 400 | ND | |
| 19–30 y | ND | 20 | 2,500 | ND | 10,000 | 10 | 1,100 | 45 | 350 | 11 | 2,000 | 1.0 | 4 | 400 | ND | |
| 31–50 y | ND | 20 | 2,500 | ND | 10,000 | 10 | 1,100 | 45 | 350 | 11 | 2,000 | 1.0 | 4 | 400 | ND | |

NOTE: A Tolerable Upper Intake Level (UL) is the highest level of daily nutrient intake that is likely to pose no risk of adverse health effects to almost all individuals in the general population.

Unless otherwise specified, the UL represents total intake from food, water, and supplements. Due to a lack of suitable data, ULs could not be established for vitamin K, thiamin, riboflavin, vitamin B₁₂, pantothenic acid, biotin, and carotenoids. In the absence of a UL, extra caution may be warranted in consuming levels above recommended intakes. Members of the general population should be advised not to routinely exceed the UL. The UL is not meant to apply to individuals who are treated with the nutrient under medical supervision or to individuals with predisposing conditions that modify their sensitivity to the nutrient.

- a Although the UL was not determined for arsenic, there is no justification for adding arsenic to food or supplements.
- b The ULs for magnesium represent intake from a pharmacological agent only and do not include intake from food and water.
- c Although silicon has not been shown to cause adverse effects in humans, there is no justification for adding silicon to supplements.
- d Although vanadium in food has not been shown to cause adverse effects in humans, there is no justification for adding vanadium to food, and vanadium supplements should be used with caution. The UL is based on adverse effects in laboratory animals, and this data could be used to set a UL for adults but not children and adolescents.
- e ND = Not determinable due to lack of data of adverse effects in this age group and concern with regard to lack of ability to handle excess amounts. Source of intake should be from food only to prevent high levels of intake.

SOURCES: *Dietary Reference Intakes for Calcium, Phosphorous, Magnesium, Vitamin D, and Fluoride* (1997); *Dietary Reference Intakes for Thiamin, Riboflavin, Niacin, Vitamin B₆, Folate, Vitamin B₁₂, Pantothenic Acid, Biotin, and Choline* (1998); *Dietary Reference Intakes for Vitamin C, Vitamin E, Selenium, and Carotenoids* (2000); *Dietary Reference Intakes for Vitamin A, Vitamin K, Arsenic, Boron, Chromium, Copper, Iodine, Iron, Manganese, Molybdenum, Nickel, Silicon, Vanadium, and Zinc* (2001); *Dietary Reference Intakes for Water, Potassium, Sodium, Chloride, and Sulfate* (2005); and *Dietary Reference Intakes for Calcium and Vitamin D* (2011). These reports may be accessed via www.nap.edu.

From: Summary Tables



Dietary Reference Intakes for Calcium and Vitamin D.
Institute of Medicine (US) Committee to Review Dietary Reference Intakes for Vitamin D and Calcium; Ross AC, Taylor CL, Yaktine AL, et al., editors.
Washington (DC): National Academies Press (US); 2011.

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