		No CPP	2% HRI at \$50/kW	4.5% HRI at \$50/kW	4.5% HRI at \$100/kW
Avoid	led premature death amo	ng adults			
10	$- \frac{1}{2} + $	470	410	410	350
PM _{2.5}	Krewski et al. (2009)	(320 to 630)	(280 to 550)	(280 to 550)	(240 to 470)
E	Lepeule <i>et al.</i> (2012)	1,100	940	940	800
		(540 to 1,600)	(470 to 1,400)	(470 to 1,400)	(400 to 1,200)
e	Smith <i>et al.</i> (2009)	24	38	16	12
Ozone		(12 to 36)	(19 to 57)	(8 to 25)	(6 to 18)
õ	Jerrett et al. (2009)	86	140	59	43
		(29 to 140)	(47 to 230)	(20 to 98)	(14 to 71)
PM2.5	- related non-fatal heart a	attacks among adults			
Da	tors at al. (2001)	490	430	430	360
Pe	ers et al. (2001)	(120 to 860)	(100 to 750)	(110 to 760)	(89 to 640)
Da	oled estimate	53	46	47	39
FU	oled estimate	(20 to 140)	(17 to 120)	(17 to 120)	(15 to 110)
All of	her morbidity effects				
Ho	ospital admissions—	120	110	110	91
cardiovascular (PM _{2.5})		(53 to 230)	(46 to 200)	(47 to 200)	(40 to 170)
Но	ospital admissions—	130	110	140	87
res	spiratory (PM _{2.5} & O ₃)	(210 to 250)	(26 to 210)	(35 to 280)	(24 to 170)
EI	O visits for asthma	250	210	280	170
	M _{2.5} & O ₃)	(-50 to 620)	(-37 to 530)	(-51 to 690)	(-34 to 410)
Ex	acerbated asthma	44,000	40,000	48,000	29,000
(P	M _{2.5} & O ₃)	(-31,000 to 110,000)	(-29,000 to 96,000)	(-34,000 to 120,000)	(-20,000 to 69,000)
	inor restricted-activity	290,000	230,000	300,000	190,000
	ys (PM _{2.5} & O ₃)	(200,000 to 370,000)	(160,000 to 310,000)	(210,000 to 390,000)	(140,000 to 250,000)
	cute bronchitis	570	500	500	420
	M _{2.5})	(-130 to 1,300)	(-120 to 1,100)	(-120 to 1,100)	(-99 to 940)
UĮ	oper resp. symptoms	10,000	9,000	9,000	7,700
(P	M _{2.5})	(1,900 to 19,000)	(1,600 to 16,000)	(1,600 to 16,000)	(1,400 to 14,000)
	ower resp. symptoms	7,200	6,300	6,300	5,400
	M _{2.5})	(2,800 to 12,000)	(2,400 to 10,000)	(2,400 to 10,000)	(2,000 to 8,700)
	ost work days	48,000	42,000	42,000	35,000
	M _{2.5})	(40,000 to 55,000)	(35,000 to 48,000)	(35,000 to 48,000)	(30,000 to 41,000)
	hool absence days	31,000	60,000	21,000	16,000
(0	(3)	(11,000 to 71,000)	(22,000 to 140,000)	(7,700 to 48,000)	(5,600 to 35,000)

Table 4-6Estimated Incremental PM2.5 and Ozone-Related Premature Deaths and Illnesses in 2030*
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* Values rounded to two significant figures