PROCEDURE STATEMENT

If a pregnant radiation worker (anyone working with radiation-emitting equipment or radioisotopes) wishes to participate in a fetal radiation monitoring program, she must declare her confirmed pregnancy by written notification to the Radiation Safety Officer or Radiation Safety Technologist, who will provide information on biological effects and radiation protection, and will establish a radiation monitoring program specific to her pregnancy.

PURPOSE OF PROCEDURE

To ensure that radiation level to the fetus of a declared pregnant female is maintained below regulatory limits and as low as reasonably achievable.

PROCEDURE

1. After confirmation of pregnancy, the radiation worker verbally notifies her supervisor.

2. A written declaration of pregnancy form provided by Radiation Safety Office must be completed by the radiation worker and hand delivered to the Radiation Safety Office for further instructions and education (see attachment).

3. The radiation worker meets with the Radiation Safety Office to receive information and establish a program of radiation monitoring.

4. The radiation worker's radiation exposure will be reviewed monthly and any radiation level that requires action will be discussed with the radiation worker and her supervisor. A plan of action will be documented at that time.

Source: Radiation Safety Office

Effective Date: 1/2/94

Review/Revision Date: 3/21/95
5/21/96
1/27/99
7/8/02
2/22/05
2/18/08
2/3/11
12/10/13
09/29/16
CONTROL OF RADIATION EXPOSURE DURING PREGNANCY

NAME (print) ____________________________________________________________

Last                  First                  Middle Initial

DEPARTMENT ______________________________________________________________

Other employment as radiation worker. If none, initial here _____.

INSTITUTION ______________________________________________________________

ADDRESS ________________________________________________________________

CONTACT PERSON __________________________________________________________

TELEPHONE ______________________________________________________________

In signing this form, it is acknowledged that:

1. I voluntarily declare my pregnancy. My estimate of the date of conception is ________________________ .

2. I have received oral instruction and have read and understood the material presented in U.S. Nuclear Regulatory Commission Guide 8.13, Revision 3 (June 1999).

3. The University of Toledo radiation safety officer or his designate provided a discussion period following the above instruction, during which my questions, if any were answered satisfactorily.

4. I understand that NCRP recommendations and the Ohio Department of Health/Bureau of Radiation Protection rules limit the radiation dose to the embryo/fetus to 0.5 rem during the term of pregnancy. The primary method of monitoring exposure from external radiation sources will be a dosimeter properly worn by me near the waist and under any protective device.

5. I acknowledge that my personal dosimetry records indicate a whole body exposure of ____________ mrem from the time of conception through the date of my declaration of pregnancy.

Signed ___________________________          Date ___________________________