1.0 Purpose

1.1 This procedure outlines the process for radiation workers to voluntarily declare a pregnancy or withdraw a declaration of pregnancy.

1.2 This procedure outlines the basic steps Office of Radiation Safety will take once a radiation workers declares a pregnancy.

1.3 This procedure supports 10 CFR 20.1208, “Dose Equivalent to an Embryo/Fetus” and 10 CFR 20.2106, “Records of Individual Monitoring Results”.

2.0 Applicability

2.1 This procedure applies to all radiation workers at UConn Health.

3.0 References

3.1 10 CFR 20.1208, “Dose Equivalent to an Embryo/Fetus”.

3.2 10 CFR 20.2106, “Records of Individual Monitoring Results”.

4.0 Precautions

4.1 None.

5.0 Procedure

5.1 Declaration of Pregnancy

5.1.1 Fill out Attachment 1, “Declaration of Pregnancy Form”. Indicate estimated date of conception.

5.1.2 Sign and submit completed form to the Office of Radiation Safety (ORS).

5.1.3 Once a signed/approved form has been received, ORS will assess your radiation risk, provide a fetal dosimeter to be worn around the waist, and begin monitoring fetal dose on a monthly basis.

5.1.4 ORS will also take steps to ensure fetal dose is maintained below 500 mrem (5 mSv) for the duration of the pregnancy. ORS will also take steps to avoid substantial variation above a uniform monthly dose of 50 mrem (.5 mSv).

5.1.5 Steps include, but are not limited to, modification of work activities and/or alternate duties.

5.2 Withdrawal of Declaration of Pregnancy

5.2.1 Fill out Attachment II, “Withdrawal of Declaration of Pregnancy Form”.

5.2.2 Submit completed form and fetal dosimeter to the ORS.
5.2.3 Once the signed/completed form and fetal dosimeter are received, ORS will notify the applicant and applicant’s supervisor that the applicant is no longer considered a declared pregnant worker.

5.2.4 Any measures, work restrictions, alternate duties, etc., taken to maintain fetal dose within NRC guidelines will no longer apply.

6.0 Records

6.1 All declaration of pregnancy forms and embryo/fetal dose records will be maintained by the ORS in accordance with 10 CFR 20.2106, “Records of Individual Monitoring Results”.

_________________________________ ___________________
Radiation Safety Officer   Date

_________________________________ ___________________
Radiation Safety Committee Chairperson   Date

_________________________________ ___________________
Director, Radiation Safety   Date
Attachment I
Declaration of Pregnancy Form

I _________________________________________ (printed full name) have read the United States Nuclear Regulatory Commission regulations and understand my rights. I have been advised on radiation risks to an embryo/fetus and on radiation protection measures. I am voluntarily declaring my pregnancy in writing with the understanding that I can withdraw this declaration at any time. I understand that the fetus/embryo exposure limit for the remainder of my pregnancy will be 500 mrem (5 mSv). To track this exposure, I will wear a fetal dosimetry badge for the remainder of the pregnancy.

Estimated date of conception: ___________________

___________________________________________        _______________
Radiation Worker  Date

___________________________________________        _______________
Radiation Safety Officer  Date
Attachment II

Withdrawal of Declaration of Pregnancy

I ______________________________ (printed full name) wish to formally notify the Radiation Safety Officer that as of ____________, (insert date), I am revoking my declaration of pregnancy. I understand the NRC guidelines for embryo/fetus exposure will no longer apply to me with this revocation. With this documentation I am returning my fetal dosimetry badge. I have discussed any radiation safety concerns I might have with the Radiation Safety Officer or designee and have made this decision of my own free will.

__________________________________________     _________________
Radiation Worker  Date

__________________________________________     _________________
Radiation Safety Officer  Date