DECLARATION OF PREGNANCY

Instructions: It is our responsibility to ensure that the dose to an embryo/fetus, during the entire pregnancy, due to occupational exposure of a declared pregnant worker, does not exceed 0.5 rem [§20.1208]. Our policy is to examine your work environment and job responsibilities to assure that you will avoid substantial variation above 0.05 rem each month during your pregnancy. If you have questions, please call Health Physics at 723-3201. Fax this completed form to Health Physics at 723-0632. We will schedule an interview with you to review safety measures and answer your questions.

LAST NAME	FIRST NAME	MI	DELIVERY DATE	❒ STANFORD ❒ VAPAHCS

DEPARTMENT	POSITION*	MAIL CODE	PHONE	CRA OR PRINCIPAL INVESTIGATOR

* POSITION: Faculty, Post-Doc; Visiting Scientist; Student; Staff

Appointment: ❒ 60 Days or less ❒ more than 60 days University ID #: _____

Describe the sources of radiation that you personally work with day to day. For radioactive materials, describe the radionuclides and activities, and hours of use each day. For devices, identify the type of device and hours of use each day. Also describe the level of use for other individuals in your work area.

_____

_____

_____

_____ _____

Signature Date

Review 10 CFR 20.1208 and Radiation Safety Manual, Part I.
Record the worker's dosimetry badge dose for the past 18 months. Add bioassays.

Month:																		
Dose:																		

Workplace interview schedule for date: _____; time: _____; room: _____.

Do you anticipate a change in your workload or uses? _____

Will there be a change in co-workers' workload or uses? _____

Note other questions and answers _____

_____

_____

_____ _____ _____ _____

Health Physicist Date Radiation Safety Officer Date