
EMORY UNIVERSITY POLICY ON RADIATION AND PREGNANCY

As soon as a radiation worker determines that she is pregnant, she should (unless privacy is desired) advise her supervisor and declare her pregnancy in writing to the Environmental Health and Safety Office giving approximate date of conception. A Radiation Safety professional from the Environmental Health and Safety Office will review past radiation exposure history of the declared pregnant radiation worker and her job function and determine if radiation restrictions should be applied. If so, these restrictions will be discussed with the individual and her supervisor and will be provided to both in writing. A copy of the document "Guide for Instruction Concerning Prenatal Radiation Exposure" will be given to the declared pregnant radiation worker as required by the State, NRC and OSHA. The employee and supervisor (unless privacy is desired) will sign documentation that this information has been given.

The Environmental Health and Safety Office will issue a monthly fetal monitor for the declared pregnant radiation worker to wear at the waist in addition to her regular dosimeter.

All lead barriers in the university are designed so an individual, if she were behind the barrier for the full 40 hours of a week, would receive less than 10 mrem to the surface of her body and much less to the fetus. NCRP, NRC and the State of Georgia allow the fetus of a declared pregnant radiation worker to receive 500 mrem, sum of internal and external exposure, during the nine months of pregnancy.

It is recommended that pregnant nurses not care for patients containing therapeutic quantities of a radionuclide or brachytherapy sources.



Michael "Ike" Hall, CHP, CSP
Emory Radiation Safety Officer



FORM LETTER FOR DECLARING PREGNANCY

DECLARATION OF PREGNANCY

To: _____
(Name of your supervisor or other employer representative)

I am declaring that I am pregnant. I believe I became pregnant in _____, _____.
(Month) (Year)

I understand that my occupational radiation dose during my entire pregnancy may not exceed 0.5 rem (5 millisieverts) (unless that dose has already been exceeded between the time of conception and submitting this letter). I also understand that meeting the lower dose rate may require a change in job or job responsibilities during my pregnancy.

I will notify Radiation Safety when the fetal badge is no longer needed so that it may be discontinued.



Principal Investigator and/or Department: _____

Spare Badge Series Code: _____ Location: _____

Bin #/Badge Type: _____

Bin #/Badge Type: _____

Monthly / Quarterly

EMORY RADIATION SAFETY CONSULTATION

I understand that I have the option of not declaring my pregnancy without the risk of termination. I also understand that if I were to declare my pregnancy, it would be in writing. I also have the option of undeclaring my pregnancy, should I change my mind later.

I have received a pregnancy packet from the Environmental Health and Safety Office. This packet contains:

- Emory University Policy on Radiation and Pregnancy
- Guide for Instruction Concerning Prenatal Radiation Exposure

I have reviewed the packet. Mr./Ms. _____ of the Environmental Health and Safety Office explained the different risks incurred when working with or around radiation while I am pregnant. I was shown the commonly asked questions and statistics comparing radiation risks to other activities. I was also assigned a badge and instructed on where the badge should be worn.

If I should have any questions, I can call the Environmental Health and Safety Office at _____ or 727-5922. My signature indicates that I understand the issues discussed above.

PRINT NAME: _____

EMORY ID: _____

EMPLOYEE SIGNATURE: _____

DATE: _____