



## Declared Pregnant Worker Radiation Exposure Evaluation

### Instructions and information for the declared pregnant radiological worker:

1. As a declared pregnant worker, you have several options. These options are detailed in Article 951 of the Fermilab Radiological Control Manual. Please select one of the options below that you would like to follow during your pregnancy.  
  

ρ **Option 1** You may request a temporary reassignment to work in areas involving a lower potential for radiation exposure. If a transfer is recommended by the Medical Department and Radiation Safety, Fermilab shall make a reasonable attempt to find an assignment of equal pay and status for the employee.

ρ **Option 2** You may ask for a leave of absence. A leave of absence under such circumstances is subject to the requirements of the Personnel Policy Guide, as administered and interpreted by the Laboratory Services Section.

ρ **Option 3** You may continue working at the same job assignment and reducing your exposure to less than 500 mrem throughout the duration of the pregnancy, where practical, by using shielding, increasing distances from radiation sources and decreasing the amount of time spent in radiologically controlled areas. Fermilab radiation safety personnel shall make recommendations to your supervisor so that reasonable steps can be taken to minimize your radiation exposure.

ρ **Option 4** You may terminate employment at the Laboratory.
2. If you choose to continue performing radiological work, or working with Radioactive Sources, the following applies: The dose limit for the embryo/fetus from conception to birth is 500 mrem. Efforts will be made to avoid exceeding 50 mrem/month. **You must wear both a dosimetry badge and a pocket dosimeter while working in areas controlled for radiological purposes. Weekly pocket dosimeter readings must be recorded and forwarded to the appropriate radiation safety personnel or supervisor for dose tracking.**
3. You have the option of an additional badge for fetal monitoring if your working conditions are such that the fetal dose might differ from your whole body dose.
4. Authorized radiation safety personnel will make recommendations to you and your supervisor so that reasonable steps can be taken to minimize radiation exposure to you and your unborn child. During your pregnancy, use of time, distance and shielding techniques and changes in current work practices (if applicable) should be emphasized to maintain exposures ALARA.
5. You may revoke your declaration of pregnancy, in writing, at any time.
6. You must submit this form to the authorized radiation safety personnel within your division/section. These contacts are attached to this form. An evaluation of your work area to assess the potential radiation exposure to your unborn child during your pregnancy will be conducted. Alternatively, the Associate Head of Radiation Protection may be contacted to perform this evaluation. This evaluation will be documented on the back of this form. When this evaluation is complete, it will be forwarded to you for your concurrence.

My signature confirms my option choice as indicated above and provides consent to obtain the information required to perform the radiation exposure evaluation.

Declared Pregnant Worker \_\_\_\_\_ Date \_\_\_\_\_  
**TO BE COMPLETED BY RADIATION SAFETY OFFICER OR DIVISION/SECTION CONTACT**

Declared Pregnant Worker Name: \_\_\_\_\_ Fermilab ID: \_\_\_\_\_

Division/Section \_\_\_\_\_ Phone Ext: \_\_\_\_\_ Mail Station: \_\_\_\_\_  
 :

Email Address: \_\_\_\_\_

Date that Pregnancy was Declared to the Medical Department: \_\_\_\_\_

Estimated Due Date: \_\_\_\_\_

Date that Declaration of Pregnancy was Revoked: \_\_\_\_\_

Radiation Exposure Evaluation:

Area Type	Occupancy Time (Hrs/Wk)	Average Dose Rate (mR/Hr)	Estimated Weekly Exposure	Total Estimated Weekly Exposure
Uncontrolled Area				
Controlled Area				
Radioactive Materials Area				
Radiation Area				

Total weeks remaining in pregnancy (# of weeks between declaration date and due date): \_\_\_\_\_

Total estimated (or actual if known) exposure during pregnancy, prior to declaration: \_\_\_\_\_

Total estimated exposure during pregnancy: \_\_\_\_\_

If total estimated exposure is determined to **exceed 500 mrem**, the declared pregnant worker shall not be assigned to tasks where additional occupational exposure is likely for the remainder of her pregnancy.

If total estimated exposure is determined to **approach 500 mrem**, it is recommended that the declared pregnant worker seek task reassignment for the remainder of her pregnancy.

**Fetal monitor requested ?** Yes  No

RSO Comments: (Attach additional sheets if necessary)

Forward completed evaluation form, dosimetry records and other supporting documentation to the Declared Pregnant Worker, the Medical Department (MS 204) and the ES&H Section Dosimetry Manager (MS 119).

RSO Signature: \_\_\_\_\_ ID # \_\_\_\_\_ Date: \_\_\_\_\_

Concurrence of Declared Pregnant Worker: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewed by Dosimetry Program Manager: \_\_\_\_\_

Date: \_\_\_\_\_

## **Radiation Safety Officers and/or Division/Section Contacts**

### **Accelerator Division**

Mike Gerardi           X4570  
Gary Lauten            X8360

### **Business Services Section**

Susan McGimpsey   X8386

### **Environment, Safety and Health Section**

Susan McGimpsey   X8386

### **Facilities Engineering Services Section**

Susan McGimpsey   X8386

### **Particle Physics Division**

Wayne Schmitt       X4407

### **Technical Division**

Rich Ruthe            X5424

### **Computing Division**

Amy Pavnica          X8493

### **Work Force Development and Resources Section**

Kathy Graden         X4939

### **Directorate**

Kathy Graden         X4939

### **Associate Head of Radiation Protection**

Don Cossairt         X3465