FORM LETTER FOR DECLARING PREGNANCY

This form letter is provided for your convenience. To make your written declaration of pregnancy, you may fill in the blanks in this form letter, or you may write your own letter. A copy of the reviewed declaration will be returned to you in a confidential envelope. If you do not receive a confirmation of receipt within seven days of submission, please contact our office at 541-737-2227.

If you are currently occupationally exposed to sources of radiation at a place of work other than Oregon State University, please provide the name and address on the back of this form.

DECLARATION OF PREGNANCY

In accordance with the Oregon Department of Human Services regulations, OAR 333-120-0170, “Dose to an Embryo/Fetus,” I am declaring that I am pregnant. I believe I became pregnant in ______________________ (only the month and year need be provided).

The Oregon Administrative Rules for the Control of Radiation limit the dose to an embryo/fetus to 0.5 rem (5 millisievert or 500 millirem) for the entire pregnancy for DECLARED pregnant woman (unless that dose has already been exceeded between the time of conception and submitting this letter). The Radiation Safety Officer will investigate any report of a dose in excess of 0.050 rem (0.5 mSv or 50 mrem) to a declared pregnant worker within 7 working days of receiving knowledge of the dose. I also understand that meeting the lower dose limit may require a change in job or job responsibilities during my pregnancy.

(Your signature)                                               (Date)

(Your printed name)                                            (Your OSU ID number)

Date Received: __________________________

Reviewed by:

(Radiation Safety Representative)                             (Date)