

**DECLARATION OF PREGNANCY FORM
Nuclear Substance Workers**

I declare that I am pregnant, for the purposes of lowering the dose received by me and/or my embryo/fetus.

I understand and agree that additional monitoring may be required of me during the balance of my pregnancy to ensure that the dose limit of 4 mSv is not exceeded.

Name of Worker (Print)	
Signature of Worker	
Date	
Estimated Due Date	

Name of RSO (Print)	
Signature of RSO	
Date	