



DEPARTMENT OF HEALTH
DIRECTORATE: RADIATION CONTROL



GUIDELINES

MANAGEMENT OF PREGNANT RADIOGRAPHERS AND OTHER STAFF MEMBERS

Introduction

These requirements and recommendations as derived from **ICRP Publication 84 (Vol 30/1)** "*Pregnancy and Medical Radiation*" will do much to remove the unnecessary discrimination against pregnant radiographers, and at the same time remove the disruption of work by reduced staff members due to pregnancy. The safety of the radiographer and foetus or embryo should at the time in fact be improved, provided all parties act sensibly and proper monitoring procedures are followed.

Women of reproductive capacity must at all times and not only when pregnant be well versed in the uses of ionising radiation. However, when a woman is or may be, pregnant additional control has to be considered to protect the unborn child. There is, therefore, a recommended foetal dose (1mGy) limit.

Effective and fair management of pregnant employees exposed to radiation requires the following:

- The protection of the foetus or embryo;
- the needs of the employer and
- the rights of the worker to pursue her career without discrimination based on the pregnancy.

Requirements

1. When pregnancy has been diagnosed the maximum equivalent dose to the surface of the woman's abdomen (lower trunk) may not exceed 2 mSv for the remainder of the pregnancy.
2. The first responsibility lies with the pregnant worker to protect the foetus and therefore once the pregnancy is confirmed the employer must be informed.
3. The licence holder / employer must carefully review the exposure conditions to ensure that the equivalent dose to the abdominal area be restricted to less than 2 mSv.
4. **Pregnant radiation workers must be issued with a direct reading audible dosimeter.**

5. The restriction on the dose to the woman's lower trunk does not mean that it is necessary for the person to avoid work with radiation or radioactive materials completely or that she must be prevented from entering or working in designated radiation areas. It does, however, imply that the licence holder / employer must carefully review the radiation exposure conditions of the pregnant worker. The probability of high accidental doses and radionuclide intakes must be insignificant.
6. There are situations in which the worker wishes to continue with the assigned duties or employer may depend on the worker to continue due to the facility not sufficiently large and flexible to have other employees to fill the vacated position of the pregnant worker. From a radiation point of view the worker may continue with the assigned duties providing the equivalent dose to the lower trunk falls within recommended limit of 2mSv.

References

1. INTERNATIONAL COMMISSION ON RADIOLOGICAL PROTECTION, 1990 Recommendations of the ICRP, Publication 60, Pergamon Press, Oxford (1991).
2. INTERNATIONAL COMMISSION ON RADIOLOGICAL PROTECTION, Pregnancy and Medical Radiation, Annals of the ICRP, Publication 84, Pergamon Press, Oxford (2000).

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