

**DISCONTINUATION OF FETAL BADGE
(WITHDRAWAL OF PREGNANCY DECLARATION FORM)**

The Texas Regulations for Control of Radiation define Declared Pregnant Woman as

"A woman who has voluntarily informed her employer, in writing, of her pregnancy and the estimated date of conception."

By completing and returning this form, you have voluntarily decided to discontinue fetal dosimetry surveillance at Texas A&M.

Name: _____

TAMU Universal ID # _____

Permittee/Department _____

Phone No. _____

Signature _____

Date _____

"State law requires that you be informed of the following: (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you." Contact: radiological-safety@tamu.edu or call EHS and ask for Radiological Safety at (979) 845-2132.

RETURN COMPLETED FORM TO EHS, MS 4472 or email radiological-safety@tamu.edu.