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

Leader: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Safety representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **COMMENTS (possible solutions)** |
| **PHYSICAL-ERGONOMIC WORK ENVIRONMENT** |  |  |  |
| Is your workplace suitably arranged with regard to your pregnancy? |  |  |  |
| Do you have the opportunity to adjust your work positions? |  |  |  |
| Are there - in your normal work tasks - physical-ergonomic conditions that are problematic in connection with your pregnancy? (Appendix A) |  |  |  |
|  |  |  |  |
| **CHEMICAL WORK ENVIRONMENT** |  |  |  |
| Do you work with chemicals/products that could pose a danger to you and/or your child (Appendix B)? Check your safety data sheets and contact your occupational health and safety group. |  |  |  |
| Do you work with radioactive substances (Appendix C)? |  |  |  |
|  |  |  |  |
| **BIOLOGICAL WORK ENVIRONMENT** |  |  |  |
| Do you work with biological material (Appendix D)? |  |  |  |
| Do you work with experimental animals (Appendix D)? |  |  |  |
|  |  |  |  |
| **PSYCHOLOGICAL WORK ENVIRONMENT** |  |  |  |
| Do you have enough time to complete your work tasks? |  |  |  |
| Do you get help from your colleagues when you need it? |  |  |  |
| Do you ask for help yourself when you need it? |  |  |  |
| Do you feel safe with your work tasks during your pregnancy? |  |  |  |
|  |  |  |  |
| **RETURNING TO WORK** |  |  |  |
| Are there conditions related to your work tasks that you would like adjusted after returning from maternity leave? |  |  |  |

|  |
| --- |
| **Action plan** |
|  |

|  |
| --- |
| **Follow up** |
| Expected date for the follow up meeting: |

**APPENDIX A: Physical - Ergonomic**

The risk of premature birth or restricted growth in the fetus can increase with physical strain.

• Shocks, vibrations, and risk of violence

• Noise and ultrasound

• Extreme cold and heat

• Manual handling of heavy burdens

• Prolonged standing and walking work

If needed, help from external consultancy can be involved, such as from an Occupational Medicine Clinic. [Klinik for Gravide - Aarhus Universitetshospital (auh.dk)](https://www.auh.dk/afdelinger/kvindesygdomme-og-fodsler/klinik-for-gravide/)

APPENDIX B: Chemicals/Products

Certain chemical substances can be harmful to the health of the pregnant woman and the fetus, as well as pose a risk to the breastfeeding child.

The employer is responsible for conducting an assessment of the risk to the pregnant woman, the fetus, and the nursing process when pregnant or nursing employees work with - or are exposed to substances and materials with the following hazard statements on the label:

• H310 Fatal in contact with skin

• H311 Toxic in contact with skin

• H312 Harmful in contact with skin

• H340 May cause genetic defects

• H341 Suspected of causing genetic defects

• H350 May cause cancer

• H350i May cause cancer if inhaled

• H351 Suspected of causing cancer

• H360 May damage fertility or the unborn child

• H361 Suspected of damaging fertility or the unborn child

• H362 May harm breastfed children

• H370 Causes organ damage

• H371 May cause organ damage

• H372 Causes organ damage through prolonged or repeated exposure by skin contact

• H373 May cause organ damage through prolonged or repeated exposure by skin contact.

Substances and materials that are labeled with other risk statements may also have effects that the fetus's cells are sensitive to. Therefore, the employer must also make an assessment when pregnant and nursing employees work with - or are exposed to the following substances and materials:

• Carcinogenic substances and processes

• Endocrine-disrupting substances

• Volatile substances and organic solvents

• Pesticides

• Heavy metals

• Anesthetic gases

• Asphyxiating gases

• Chemical substances absorbed through the skin

When conducting a risk assessment, the occupational health and safety group (OHS) should be involved, and in case of doubt, the pregnant woman can be referred to the occupational medicine clinic.

When contacting the administrator of the chemical group in KIROS, the administrator can generate a list in KIROS of the group's chemicals, which are relevant in connection with pregnancy and breastfeeding.

See also AT guidance A.1.8-5 on the working environment for pregnant and breastfeeding women. [Gravides og ammendes arbejdsmiljø - Arbejdstilsynet (at.dk)](https://at.dk/regler/at-vejledninger/gravides-ammendes-arbejdsmiljoe-a-1-8/)

APPENDIX C: RADIOACTIVE SUBSTANCES

Women of childbearing age are instructed by the daily leader/supervisor that special rules apply during pregnancy.

The responsible daily leader must - in cooperation with the pregnant woman - assess the size of the radiation dose to the unborn child.

The work of pregnant women must be organized in such a way that there is no risk that the dose to the unborn child during pregnancy exceeds 1 mSv. This includes accounting for the risk of radiation doses as a result of accidental incidents/accidents. If the dose is thus assuredly assessed to be less than 1 mSv, the pregnant woman can continue with her previous tasks without special measures to reduce radiation exposure and monitoring of it.

In case of doubt, the resulting written workplace assessment, APV, can be presented to the National Institute for Radiation Hygiene for a final evaluation.

See also the AT guideline A.1.8-5 on the work environment for pregnant and breastfeeding employees. [Gravides og ammendes arbejdsmiljø - Arbejdstilsynet (at.dk)](https://at.dk/regler/at-vejledninger/gravides-ammendes-arbejdsmiljoe-a-1-8/)

APPENDIX D: BIOLOGICAL AGENTS AND EXPERIMENTAL ANIMALS

The current rules for laboratory classification must always be followed, and thorough instruction must be given by the person responsible for instruction (supervisor/daily manager) before work begins.

Experimental animals can pose a risk to the fetus:

Experimental animals may carry a protozoan, Toxoplasma gondii, which in humans can cause toxoplasmosis (hare fever). It is recommended to have a blood test done by your doctor to determine antibodies against toxoplasmosis. The animals can also be tested. If antibodies are present, work can continue as before; otherwise, a transfer to other work should be arranged.

Avoid working with poultry/birds:

Furthermore, pregnant women should not work with birds/poultry due to the risk of Ornithosis (parrot fever). Both toxoplasmosis and ornithosis can cause fetal damage.

Patient material:

Be cautious when working with blood and tissue samples; all patient material is considered potentially infectious and should be treated accordingly. Vaccination against infectious hepatitis is recommended before starting work/before a possible pregnancy.

Exposure to these microorganisms, among others, can pose a risk to the pregnancy:

• Toxoplasmosis (hare fever)

• Listeria

• Varicella (chickenpox)

• Erythema infectiosum (slapped cheek disease)

• Cytomegalovirus

• Hepatitis A

• Hepatitis B

• Ornithosis (parrot fever)

• Q-fever

• Rubella (German measles) - (Note! Rubella vaccine is included in the Danish childhood vaccination program)

See also the AT guideline A.1.8-5 on the work environment for pregnant and breastfeeding employees. [Gravides og ammendes arbejdsmiljø - Arbejdstilsynet (at.dk)](https://at.dk/regler/at-vejledninger/gravides-ammendes-arbejdsmiljoe-a-1-8/)