

Control of Lead at Work Regulations (Northern Ireland) 2003

Surveillance record for person exposed to lead

Medical in Confidence

Name and address of employer (including postcode)

Name

D.O.B.
(eg 01/01/16)

Consent given to disclosure of biological test results to employer Yes No

Name of Laboratory

Is the laboratory included in HSE list? Yes No

Assess- ment date (eg 01/01/16)	Work activity and reason for surveillance	Sample taken	Results of laboratory analyses					Clinical notes and assessment including review of medical history, details of certification of unfitness/fitness for work involving exposure to lead or other action	Other action	Date for next review (eg 01/01/16)	Blood-lead range code - see footnote overleaf
			Blood lead (µg/dl)	Haemo- globin	Urinary lead (units to be specified)	ZPP	Other analyses (units and types to be specified)				
		Blood									
		Urine									
		Blood									
		Urine									

(Continued overleaf)

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		Blood									
		Urine									
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		Urine									

Footnote: Blood-lead (µg/dl) range codes:

- A under 30
- B ≥ 30 < 40
- C ≥ 40 < 50
- D ≥ 50 < 60
- E 60 and over