



Urine sampling (biological monitoring) for isocyanate exposure measurement Informed consent

A biological monitoring programme is about to begin in your workplace. The results will be used to check that your exposure to isocyanates at work is being adequately controlled.

Regarding the control of exposure to isocyanates at		(premises)
your agreement is needed to provide a sample of urine	to a representative of	
	(service provider/manager), to decide	whether
further steps are needed to control your exposure.		
Please note:		
 The sample will <u>only</u> be analysed for isocyanat 	e exposure	
The result will indicate your personal exposure	to isocyanates	
Section A: To be completed by the employe	ee	
1 Do you want to receive your own copy of the resul	ts, and be told what it means? YES / NO	
If YES, send the result to:		
(You can show the results to your Trade Union safety re	epresentative, if you wish)	
The result will show whether improvements in cont	rol are needed to reduce your exposure.	
Please select one of the options below:		
1. You can send my personal test result and interpre	etation to my employer.	
2. You can send my anonymised result and interpre	tation to my employer.	
3. You may send only the interpretation to my emplo	oyer.	
Employee's signature	Date	
Section B: To be completed by the biologic	eal monitoring programme man	ager
I agree to abide by the above conditions.		