Department of Veterans A	Department of Veterans Affairs Depleted Uranium Worksheet								
Name						SS			
1		DE	EMOGF	RAPHICS					
LAST NAME		FIRST NAME				N	IIDDLE NAME		
SOCIAL SECURITY NUMBER		,		DATE OF BI	IRTH				
ADDRESS									
CITY	COUNT	Y			STATE		ZIP CODE		PLUS FOUR
PHONE NUMBER (DAYTIME)				PHONE NUMBER (EVENII			<u> </u>		
							,		
SEX F=FEMALE M=MAR	ITAL STATU	S 1=MARRIED 2	2= DIVOR	CED 3= SEPERA	TED 4= WI	DOWED 5=	SINGLE, NEVER MA	ARRIED	
III III/CEE			RA	CE					,
RACE CODE						C	COLLECTION METHOD		
1 = AMERICAN INDIAN OR ALASKAN NATIVE 2 = ASIAN 3 = BLACK OR AFRICAN AMERICAN 4 = NATIVE HAWAIIAN OR OTHER PACIFIC ISL	6	5 = WHITE 5 = DECLINED TO A 7 = UNKNOWN BY F					1 = OBSERVER 3 = SELF-IDENTIFICATION 2 = PROXY 4 = UNKNOWN		
			ETHN	ICITY					
ETHNICITY CODE						C	DLLECTION MI	ETHOD	
1 = HISPANIC OR LATINO 2 = NOT HISPANIC OR LATINO 3 = DECLINED TO ANSWER 4 = UNKNOWN BY PATIENT						1 = OBSERVER 3 = SELF-IDENTIFICATION 2 = PROXY 4 = UNKNOWN			
	107.07.0.			F SERVICE		55.445.	10		
### BRANCH OF SERVICE 1 = ARMY	START DA	.TE	END D	DATE		REMAR	(S		

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Department of Veterans Aft	ment of Veterans Affairs Depleted Uranium Worksheet						
Name					SSN		
		(GENERAL				,
FACILITY NUMBER		FACILITY SUFFIX	<		DATE OF EX	KAM	
EXAMINER NAME		1	EXA	AMINER TITLE			
REMARKS							
CURRENT STATUS		1 = INPA		4 = ACTIVE DUTY			
DDANGU OF CEDVICE		3 = INCA	2 = OUTPATIENT 5 = ACTIVE DUTY (OUTPATIENT) 3 = INCARCERATED 1 = ARMY 4 = MARINES				
BRANCH OF SERVICE		2 = AIR F 3 = NAV	ORCE	5 = COAST GUAF 6 = OTHER	RD		
DDANOU OF CEDVICE	LOCATION		MILITARY		CTART RATE	IEND D	TE
	LOCATION	DESCRIPTION			START DATE	END DA	AIE
8 = PERSIAN GULF AREA 4 = OTHER							
			FERRED	BY			
9. Who referred veteran to VA Medical Center	for evaluat	A = For B = And C = Dep D = Sel	ther Depar	rotection & Readine tment of Defense of Veteran's Affairs	ess Programs of DoD fice		

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\bigcirc D	epartment of Veterans Affairs Depleted Uraniur	n Worksheet
Name	SS	SN
	AREAS	
0. Where	did the veteran serve?	
KU	WAIT	Y = YES N = NO U = UNKNOWN
SAL	JDI ARABIA	Y = YES N = NO U = UNKNOWN
IRA	Q	Y = YES N = NO U = UNKNOWN
ON	LY ON A SHIP (NOT ASHORE)	Y = YES N = NO U = UNKNOWN
ОТІ	HER	Y = YES N = NO
IF `	YES, DESCRIBE OTHER AREA	
		Y = YES N = NO
	ne veteran a Logistics Assistance Representative (LAR) who inspected depleted uranium contaminated o determine repairability?	U = UNKNOWN
	ne veteran a member of the battle damage assessment team (BDAT) who examined U. S. combat nown, or suspected to be, damaged or destroyed by DU?	Y = YES N = NO U = UNKNOWN
Company	eteran served prior to Operation Iraqi Freedom, was he/she a member of the 144th Service and Supply who processed damaged equipment, including some with DU contamination during Operation Desert sert Shield?	Y = YES N = NO U = UNKNOWN
4. Was the	ne veteran a member of a radiation control (RADCON), or other radiation survey team deployed in the ulf?	Y = YES N = NO U = UNKNOWN
5. Was th	ne veteran involved in the examination or recovery of damaged or destroyed enemy vehicles?	Y = YES N = NO U = UNKNOWN
	ne veteran involved in the downloading of equipment or munitions from vehicles known or suspected to inated by DU?	Y = YES N = NO U = UNKNOWN
	ne veteran a member of a unit maintenance team performing maintenance on or in systems know or to be contaminated by DU?	Y = YES N = NO U = UNKNOWN
8. If the vhe fire?	reteran served prior to Operation Iraqi Freedom, was he/ she at Doha on July 11, 1991, at the time of	Y = YES N = NO U = UNKNOWN
	Was the veteran directly involved in clean-up operations following the Doha explosion and fire?	Y = YES N = NO U = UNKNOWN
If yes	Was the veteran exposed to smoke from burning Doha rounds?	Y = YES N = NO U = UNKNOWN

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Ø	Department of Veterans Affairs Depleted Uranium Worksheet					
Nam	e S	SN				
	ENEMY FIRE					
19. W	as the veteran in or on a vehicle hit by enemy fire at the time it was hit?	Y = YES N = NO U = UNKNOWN				
	What type of vehicle?	9				
lf Vas	Abrams battle tank	Y = YES N = NO U = UNKNOWN				
	Bradley fighting vehicle	Y = YES N = NO U = UNKNOWN				
	Other	Y = YES N = NO				
f Yes	If yes, identify other					
	Don't know	Y = YES N = NO U = UNKNOWN				
	Was the vehicle hit by DU munitions?	Y = YES N = NO U = UNKNOWN				
	d the veteran enter an Abrams battle tank to perform rescue operations immediately after it was struck by y fire?)/)/E0 N NO				
	d the veteran enter an Abrams battle tank to retrieve sensitive items immediately after it was struck by y fire?	Y = YES N = NO U = UNKNOWN				
	d the veteran enter a Bradley fighting vehicle to perform rescue operations immediately after it was struck emy fire?	Y = YES N = NO U = UNKNOWN				
	d the veteran enter a Bradley fighting vehicle to retrieve sensitive items immediately after it was struck by y fire?	Y = YES N = NO U = UNKNOWN				
	FRIENDLY FIRE					
24. W	as the veteran in or on a vehicle hit by friendly fire at the time it was hit?	Y = YES N = NO U = UNKNOWN				
	What type of vehicle?					
	Abrams battle tank	Y = YES N = NO U = UNKNOWN				
	Bradley fighting vehicle	Y = YES N = NO U = UNKNOWN				
	Other	Y = YES N = NO U = UNKNOWN				
If Yes	If yes, identify other					
	Don't know	Y = YES N = NO U = UNKNOWN				
	Was the vehicle hit by DU munitions?	Y = YES N = NO U = UNKNOWN				
	d the veteran enter an Abrams battle tank to perform rescue operations immediately after it was struck by ly fire?	V VEO N NO				
	d the veteran enter an Abrams battle tank to retrieve sensitive items immediately after it was struck by ly fire?	Y = YES N = NO U = UNKNOWN				
	d the veteran enter a Bradley fighting vehicle to perform rescue operations immediately after it was struck endly fire?	Y = YES N = NO U = UNKNOWN				
	d the veteran enter a Bradley fighting vehicle to retrieve sensitive items immediately after it was struck by ly fire?	Y = YES N = NO U = UNKNOWN				

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Na:	Depleted Urani	CON
Nam	e	SSN
	FRIENDLY FIRE (continued)	
9. Di ire?	d the veteran enter any enemy vehicle to perform rescue operations immediately after it was struck by o	our Y = YES N = NO U = UNKNOWN
	What type of vehicle?	
	Tank	Y = YES N = NO U = UNKNOWN
	Other tracked vehicle	Y = YES N = NO U = UNKNOWN
	If yes, identify other	G Grantenin
	Truck	Y = YES N = NO U = UNKNOWN
f Yes	Other wheeled vehicle	Y = YES N = NO U = UNKNOWN
	If yes, identify other	U - UNKNOWN
	Other type of vehicle	Y = YES N = NO U = UNKNOWN
	If yes, identify other	o chillown
	Don't know	Y = YES N = NO U = UNKNOWN
	d the veteran enter any enemy vehicle to retrieve sensitive items or intelligence material immediately af struck by our fire?	
	What type of vehicle?	
	Tank	Y = YES N = NO U = UNKNOWN
	Other tracked vehicle	Y = YES N = NO
	If yes, identify other	U = UNKNOWN
	Truck	Y = YES N = NO U = UNKNOWN
f Yes	Other wheeled vehicle	Y = YES N = NO U = UNKNOWN
	If yes, identify other	U - UNKNOWN
	Other type of vehicle	Y = YES N = NO U = UNKNOWN
	If yes, identify other	O - OMINIOVIN
	Don't know	Y = YES N = NO

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Ø	Department of Veterans Affairs Depleted Uran	eted Uranium Worksheet			
Nam	e	SSN			
,	EQUIPMENT	,			
31. W	as the veteran exposed to smoke from any enemy equipment by DU rounds?	Y = YES N = NO U = UNKNOWN			
32. Di	d the veteran remove equipment or other items from a damaged or destroyed U.S. or enemy vehicle?	Y = YES N = NO U = UNKNOWN			
If Yes	Description				
	Does the veteran still have equipment or other items removed from a damaged or destroyed U.S. or enemy vehicle?	Y = YES N = NO U = UNKNOWN			
	NEAR				
	as the veteran within 50 meters (45.72 yards) of a vehicle when it was hit (not including vehicles the n was in or on that were hit)?	Y = YES N = NO U = UNKNOWN			
	What type of vehicle?				
	Abrams battle tank	Y = YES N = NO U = UNKNOWN			
	Bradley fighting vehicle	Y = YES N = NO U = UNKNOWN			
If Yes	Other	Y = YES N = NO U = UNKNOWN			
11 162	If yes, identify other				
	Don't know	Y = YES N = NO U = UNKNOWN			
	Was the vehicle hit by DU munitions?	Y = YES N = NO U = UNKNOWN			
34. Di	d the veteran breath smoke or dust from vehicles hit by enemy or friendly fire?				
	What type of vehicle?				
	Abrams battle tank	Y = YES N = NO U = UNKNOWN			
	Bradley fighting vehicle	Y = YES N = NO U = UNKNOWN			
	Other	Y = YES N = NO U = UNKNOWN			
If Yes	If yes, identify other	1			
	Don't know	Y = YES N = NO U = UNKNOWN			
	Was the vehicle hit by DU munitions?	Y = YES N = NO U = UNKNOWN			

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©	Department of Veterans Affairs Depleted Urai	Depleted Uranium Worksheet				
Name	SSN					
<u> </u>	POST					
	the veteran climb on or enter vehicles hit by enemy or friendly fire sometime after the immediate apact rescue period?	Y = YES N = NO U = UNKNOWN				
	What type of vehicle?					
	Abrams battle tank	Y = YES N = NO U = UNKNOWN				
	Bradley fighting vehicle	Y = YES N = NO U = UNKNOWN				
Ī	Other	Y = YES N = NO U = UNKNOWN				
-	If yes, identify other					
-	Don't know	Y = YES N = NO U = UNKNOWN				
Ī	How many times?	V - VEON - NO				
	1 time	Y = YES N = NO U = UNKNOWN				
	2 times	Y = YES N = NO U = UNKNOWN				
If Yes	3-10 times	Y = YES N = NO U = UNKNOWN				
Ī	More than 10 times	Y = YES N = NO U = UNKNOWN				
	Don't know	Y = YES N = NO U = UNKNOWN				
	How long (in total was the veteran aboard the vehicle(s)?	0 - UNKNOWN				
	Less than 5 minutes	Y = YES N = NO U = UNKNOWN				
Ī	5-15 minutes	Y = YES N = NO U = UNKNOWN				
	16-30 minutes	Y = YES N = NO U = UNKNOWN				
ŀ	More than 30 minutes	Y = YES N = NO U = UNKNOWN				
ŀ	Don't know	Y = YES N = NO				
	Was the vehicle hit/contaminated by DU munitions?	U = UNKNOWN Y = YES N = NO				
	<u> </u>	U = UNKNOWN Y = YES N = NO				
36. Did	the veteran pass within 50 meters (45.72 yards) of a damaged or destroyed vehicle?	U = UNKNOWN				
F	How long (in total) after the destructive event?	Y = YES N = NO				
	Less than 12 hours	U = UNKNOWN				
	12- 24 hours	Y = YES N = NO U = UNKNOWN				
	More than 24 hours	Y = YES N = NO U = UNKNOWN				
Ī	Don't know	Y = YES N = NO U = UNKNOWN				
	What type of vehicle?					
If Yes	Abrams battle tank	Y = YES N = NO U = UNKNOWN				
	Bradley fighting vehicle	Y = YES N = NO U = UNKNOWN				
Ī	Other	Y = YES N = NO U = UNKNOWN				
-	If yes, identify other	1				
-	Don't know	Y = YES N = NO U = UNKNOWN				
	Was the vehicle burning?	Y = YES N = NO U = UNKNOWN				

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Ø	Department of Veterans Affairs	partment of Veterans Affairs Depleted Uranium Worksheet		
Nam		-	SSN	
		WOUND	1	
	as the veteran wounded as a result of being in, on, or within e at the time it was hit?		Y = YES N = NO U = UNKNOWN	
	Where was the veteran wounded?			
	leg/foot		Y = YES N = NO U = UNKNOWN	
	arm/hand		Y = YES N = NO U = UNKNOWN	
If Yes	face/head		Y = YES N = NO U = UNKNOWN	
	neck		Y = YES N = NO U = UNKNOWN	
	body		Y = YES N = NO U = UNKNOWN	
	Does the veteran have retained fragments or shrapnel in his	s/her body?	Y = YES N = NO U = UNKNOWN	
		OTHER EXPOSURE	0 - ONIGNOWIA	
38. Di	d the veteran fire DU rounds?		Y = YES N = NO U = UNKNOWN	
39. Di	d the veteran handle bare/damaged DU penetrator rounds?		Y = YES N = NO U = UNKNOWN	
	Did the veteran handle the rounds with gloves?		Y = YES N = NO U = UNKNOWN	
If Yes	Did the veteran handle the rounds with shielding?		Y = YES N = NO	
40. Di	I d the veteran have exposure to DU that is not captured by th	is questionnaire?	U = UNKNOWN Y = YES N = NO	
	describe	1	U = UNKNOWN	
			Y = YES N = NO	
	d the veteran have other exposures and experiences to discr	uss with the provider?	U = UNKNOWN	
	describe			
		URINE URANIUM	Y = YES N = NO	
42. Is	the 24-hour urine collection for Uranium being performed?		U = UNKNOWN	
If no unkno				
Corre	cted urine uranium (expressed per mcg per g creatinine) 3 d	igits to the left and 3 digits to the right of the	e decimal (999.999)	
Repe	at urine uranium			
Rema	ırks			
Note:	-Baltimore DU Follow-up group will enter urine uranium i			

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