



Name	SSN
<input type="text"/>	<input type="text"/>

DEMOGRAPHICS

LAST NAME	FIRST NAME	MIDDLE NAME
<input type="text"/>	<input type="text"/>	<input type="text"/>

SOCIAL SECURITY NUMBER	DATE OF BIRTH
<input type="text"/>	<input type="text"/>

ADDRESS
<input type="text"/>

CITY	COUNTY	STATE	ZIP CODE	PLUS FOUR
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PHONE NUMBER (DAYTIME)	PHONE NUMBER (EVENING)
<input type="text"/>	<input type="text"/>

SEX F=FEMALE M=MALE	MARITAL STATUS 1=MARRIED 2= DIVORCED 3= SEPERATED 4= WIDOWED 5= SINGLE, NEVER MARRIED
<input type="text"/>	<input type="text"/>

RACE

RACE CODE 1 = AMERICAN INDIAN OR ALASKAN NATIVE 2 = ASIAN 3 = BLACK OR AFRICAN AMERICAN 4 = NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER 5 = WHITE 6 = DECLINED TO ANSWER 7 = UNKNOWN BY PATIENT	COLLECTION METHOD 1 = OBSERVER 2 = PROXY 3 = SELF-IDENTIFICATION 4 = UNKNOWN
<input type="text"/>	<input type="text"/>

ETHNICITY

ETHNICITY CODE 1 = HISPANIC OR LATINO 2 = NOT HISPANIC OR LATINO 3 = DECLINED TO ANSWER 4 = UNKNOWN BY PATIENT	COLLECTION METHOD 1 = OBSERVER 2 = PROXY 3 = SELF-IDENTIFICATION 4 = UNKNOWN
<input type="text"/>	<input type="text"/>

PERIODS OF SERVICE

BRANCH OF SERVICE 1 = ARMY 2 = AIR FORCE 3 = NAVY 4 = MARINES 5 = COAST GUARD 6 = OTHER	START DATE	END DATE	REMARKS
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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GENERAL

FACILITY NUMBER	FACILITY SUFFIX	DATE OF EXAM

EXAMINER NAME	EXAMINER TITLE

REMARKS

CURRENT STATUS	1 = INPATIENT 4 = ACTIVE DUTY (INPATIENT) 2 = OUTPATIENT 5 = ACTIVE DUTY (OUTPATIENT) 3 = INCARCERATED	
BRANCH OF SERVICE	1 = ARMY 4 = MARINES 2 = AIR FORCE 5 = COAST GUARD 3 = NAVY 6 = OTHER	

MILITARY

BRANCH OF SERVICE <small>8 = PERSIAN GULF AREA 4 = OTHER</small>	LOCATION DESCRIPTION	START DATE	END DATE

REFERRED BY

9. Who referred veteran to VA Medical Center for evaluation?	A = Force Health Protection & Readiness Programs of DoD B = Another Department of Defense office C = Department of Veteran's Affairs D = Self referred E = Other sources	
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AREAS

10. Where did the veteran serve?

	KUWAIT	Y = YES N = NO U = UNKNOWN	
	SAUDI ARABIA	Y = YES N = NO U = UNKNOWN	
	IRAQ	Y = YES N = NO U = UNKNOWN	
	ONLY ON A SHIP (NOT ASHORE)	Y = YES N = NO U = UNKNOWN	
	OTHER	Y = YES N = NO	
	IF YES, DESCRIBE OTHER AREA		

11. Was the veteran a Logistics Assistance Representative (LAR) who inspected depleted uranium contaminated systems to determine repairability?	Y = YES N = NO U = UNKNOWN	
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12. Was the veteran a member of the battle damage assessment team (BDAT) who examined U. S. combat vehicles known, or suspected to be, damaged or destroyed by DU?	Y = YES N = NO U = UNKNOWN	
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13. If the veteran served prior to Operation Iraqi Freedom, was he/she a member of the 144th Service and Supply Company who processed damaged equipment, including some with DU contamination during Operation Desert Storm/ Desert Shield?	Y = YES N = NO U = UNKNOWN	
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14. Was the veteran a member of a radiation control (RADCON), or other radiation survey team deployed in the Persian Gulf?	Y = YES N = NO U = UNKNOWN	
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15. Was the veteran involved in the examination or recovery of damaged or destroyed enemy vehicles?	Y = YES N = NO U = UNKNOWN	
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16. Was the veteran involved in the downloading of equipment or munitions from vehicles known or suspected to be contaminated by DU?	Y = YES N = NO U = UNKNOWN	
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17. Was the veteran a member of a unit maintenance team performing maintenance on or in systems know or suspected to be contaminated by DU?	Y = YES N = NO U = UNKNOWN	
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18. If the veteran served prior to Operation Iraqi Freedom, was he/ she at Doha on July 11, 1991, at the time of the fire?	Y = YES N = NO U = UNKNOWN	
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If yes	Was the veteran directly involved in clean-up operations following the Doha explosion and fire?	Y = YES N = NO U = UNKNOWN	
	Was the veteran exposed to smoke from burning Doha rounds?	Y = YES N = NO U = UNKNOWN	

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ENEMY FIRE

19. Was the veteran in or on a vehicle hit by enemy fire at the time it was hit?		Y = YES N = NO U = UNKNOWN	
If Yes	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	
	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	
20. Did the veteran enter an Abrams battle tank to perform rescue operations immediately after it was struck by enemy fire?		Y = YES N = NO U = UNKNOWN	
21. Did the veteran enter an Abrams battle tank to retrieve sensitive items immediately after it was struck by enemy fire?		Y = YES N = NO U = UNKNOWN	
22. Did the veteran enter a Bradley fighting vehicle to perform rescue operations immediately after it was struck by enemy fire?		Y = YES N = NO U = UNKNOWN	
23. Did the veteran enter a Bradley fighting vehicle to retrieve sensitive items immediately after it was struck by enemy fire?		Y = YES N = NO U = UNKNOWN	

FRIENDLY FIRE

24. Was the veteran in or on a vehicle hit by friendly fire at the time it was hit?		Y = YES N = NO U = UNKNOWN	
If Yes	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, identify other		
	Don't know	Y = YES N = NO U = UNKNOWN	
	Was the vehicle hit by DU munitions?	Y = YES N = NO U = UNKNOWN	
25. Did the veteran enter an Abrams battle tank to perform rescue operations immediately after it was struck by friendly fire?		Y = YES N = NO U = UNKNOWN	
26. Did the veteran enter an Abrams battle tank to retrieve sensitive items immediately after it was struck by friendly fire?		Y = YES N = NO U = UNKNOWN	
27. Did the veteran enter a Bradley fighting vehicle to perform rescue operations immediately after it was struck by friendly fire?		Y = YES N = NO U = UNKNOWN	
28. Did the veteran enter a Bradley fighting vehicle to retrieve sensitive items immediately after it was struck by friendly fire?		Y = YES N = NO U = UNKNOWN	



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FRIENDLY FIRE (continued)

29. Did the veteran enter any enemy vehicle to perform rescue operations immediately after it was struck by our fire? Y = YES N = NO U = UNKNOWN

Table with columns for vehicle type (Tank, Truck, Other tracked vehicle, Other wheeled vehicle, Don't know) and response options (Y = YES, N = NO, U = UNKNOWN).

30. Did the veteran enter any enemy vehicle to retrieve sensitive items or intelligence material immediately after it was struck by our fire? Y = YES N = NO U = UNKNOWN

Table with columns for vehicle type (Tank, Truck, Other tracked vehicle, Other wheeled vehicle, Don't know) and response options (Y = YES, N = NO, U = UNKNOWN).

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EQUIPMENT

31. Was the veteran exposed to smoke from any enemy equipment by DU rounds?	Y = YES N = NO U = UNKNOWN	
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32. Did the veteran remove equipment or other items from a damaged or destroyed U.S. or enemy vehicle?	Y = YES N = NO U = UNKNOWN	
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	Description	
If Yes	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

33. Was the veteran within 50 meters (45.72 yards) of a vehicle when it was hit (not including vehicles the veteran was in or on that were hit)?	Y = YES N = NO U = UNKNOWN	
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	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

34. Did the veteran breath smoke or dust from vehicles hit by enemy or friendly fire?		
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	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

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POST

35. Did the veteran climb on or enter vehicles hit by enemy or friendly fire sometime after the immediate post-impact rescue period?	Y = YES N = NO U = UNKNOWN	
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If Yes	What type of vehicle?	Y = YES N = NO U = UNKNOWN	
	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, identify other		
	Don't know	Y = YES N = NO U = UNKNOWN	
	How many times?		
	1 time	Y = YES N = NO U = UNKNOWN	
	2 times	Y = YES N = NO U = UNKNOWN	
	3-10 times	Y = YES N = NO U = UNKNOWN	
	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)?)		
	Less than 5 minutes	Y = YES N = NO U = UNKNOWN	
	5-15 minutes	Y = YES N = NO U = UNKNOWN	
16-30 minutes	Y = YES N = NO U = UNKNOWN		
More than 30 minutes	Y = YES N = NO U = UNKNOWN		
Don't know	Y = YES N = NO U = UNKNOWN		
Was the vehicle hit/contaminated by DU munitions?	Y = YES N = NO U = UNKNOWN		

36. Did the veteran pass within 50 meters (45.72 yards) of a damaged or destroyed vehicle?	Y = YES N = NO U = UNKNOWN	
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If Yes	How long (in total) after the destructive event?	Y = YES N = NO U = UNKNOWN	
	Less than 12 hours	Y = YES N = NO U = UNKNOWN	
	12- 24 hours	Y = YES N = NO U = UNKNOWN	
	More than 24 hours	Y = YES N = NO U = UNKNOWN	
	Don't know	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, identify other		
	Don't know	Y = YES N = NO U = UNKNOWN	
	Was the vehicle burning?	Y = YES N = NO U = UNKNOWN	

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WOUND

37. Was the veteran wounded as a result of being in, on, or within 50 meters (45.72 yards) of the damaged vehicle at the time it was hit?		Y = YES N = NO U = UNKNOWN	
If Yes	Where was the veteran wounded?		
	leg/foot	Y = YES N = NO U = UNKNOWN	
	arm/hand	Y = YES N = NO U = UNKNOWN	
	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/her body?	Y = YES N = NO U = UNKNOWN	

OTHER EXPOSURE

38. Did the veteran fire DU rounds?		Y = YES N = NO U = UNKNOWN	
39. Did the veteran handle bare/damaged DU penetrator rounds?		Y = YES N = NO U = UNKNOWN	
If Yes	Did the veteran handle the rounds with gloves?	Y = YES N = NO U = UNKNOWN	
	Did the veteran handle the rounds with shielding?	Y = YES N = NO U = UNKNOWN	
40. Did the veteran have exposure to DU that is not captured by this questionnaire?		Y = YES N = NO U = UNKNOWN	

If yes, describe

41. Did the veteran have other exposures and experiences to discuss with the provider?		Y = YES N = NO U = UNKNOWN	
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If yes, describe

URINE URANIUM

42. Is the 24-hour urine collection for Uranium being performed?		Y = YES N = NO U = UNKNOWN	
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If no or unknown	Explain
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Corrected urine uranium (expressed per mcg per g creatinine) 3 digits to the left and 3 digits to the right of the decimal (999.999)

Repeat urine uranium

Remarks

Note: -Baltimore DU Follow-up group will enter urine uranium results in EAS registry database;
 -VA facility EH Coordinators are responsible for entering all other data in EAS registry database