



Information for Veterans Exposed To Ionizing Radiation and Their Families

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Ionizing Radiation Registry Exam Total Nears 25,000

VA officials indicate that almost 25,000 Ionizing Radiation Registry examinations have now been completed at VA medical facilities nationwide.

Helen Malaskiewicz, Senior Program/Management Analyst and National Registry Coordinator, Environmental Agents Service, reported that as of December 1, 2005, a total of 24,381 Ionizing Radiation Registry examinations had been completed for 23,377 veterans.

Further analysis reveals that of the 23,377 veterans, 150 were female; and that 1,004 followup examinations were conducted, including seven for female veterans. Annual examination totals for the past 5 years ranged from a low of 333 in 2001 to a high of 571 the following year.

The examination program, initiated by VA in 1978, was not required until enactment of Public Law 99-576, the "Veterans Benefits Improvement and Health Care Authorization Act of 1996." The Registry includes a medical history, physical examination, and baseline laboratory tests. Registry participants are also asked about their possible exposure to ionizing radiation during their military service. Additional specialized tests and consultations are provided when the clinician performing the exam determines them medically necessary.

It is important to recognize that while the information gathered during the examination may be used to make a determination on a claim for disability compensation, the examination, in and of itself, will not be considered a claim.

Veterans who have a condition or multiple health problems that may be related to radiation exposure or some other aspect of their military service may wish to file a claim for disability compensation. They are encouraged to do so via the regular claims process at the nearest VA regional office or through a veterans service representative at the nearest VA medical center.

Ms. Malaskiewicz estimates that about 400,000 veterans were eligible for a Registry examination. *(Continued on page 2, Registry)*

VA Launches Multiple Myeloma Initiative

Information in this article was provided by Dr. Nikhil Munshi of the VA Medical Center in Boston, MA.

In May 2005, Dr. Nikhil Munshi, a VA hematologist who specializes in myeloma treatment and research, and Bruce Holmberg, an Agent Orange related myeloma patient, met with VA Secretary R. James Nicholson to propose that VA use the issue of multiple myeloma among veterans as a pilot program to do three things:

- Educate VA patients on the disease, emerging treatments, and clinical trial opportunities;
- Educate VA health care providers on the disease, emerging treatments, and clinical trial opportunities; and
- Establish a collaborative research program within the VA to combine the efforts of various centers so that the resulting research has direct benefit to the patients. This will help patients to enroll in clinical trials for treatment options that might not otherwise be available.

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Eligibility

To qualify for the Registry program, individuals must meet specific criteria. By law, eligible veterans include those who:

- Participated in atmospheric nuclear weapons testing;
- Participated in American occupation of Hiroshima and Nagasaki, Japan;
- In some cases, were held as prisoners of War in Japan;
- In some cases veterans who served at gaseous diffusion plants in Paducah, KY, Portsmouth, OH, and area K25 at Oak Ridge, TN, during a specified period; or
- Participated in certain underground nuclear weapons tests at Alaska.

Individuals in the first three groups are sometimes referred to as “Atomic Veterans.”

Veterans who received nasopharyngeal (NP) radium treatments during their military service are also eligible to participate in VA’s Ionizing Radiation Registry examination program.

How It Works

The Registry consists of physical examinations combined with supplemental data on compensation claims and radiation exposures from VA and Department of Defense (DoD) agencies. VA compiles and consolidates all pertinent information maintained by VA and DoD. The program also serves as an entry point for veterans into VA health care.

Ms. Malaskiewicz encourages all eligible veterans to participate in the program. If you are eligible and interested, contact the nearest VA medical center for an appointment. You can also learn more about the program online at www.VA.gov/EnvironAgents.

(Continued from page 1, Multiple Myeloma)

Secretary Nicholson endorsed the idea and has asked VA officials to implement this program.

Multiple Myeloma Defined

Multiple myeloma, the second most common hematologic or blood cancer, affects cells important for normal immune function called the plasma cells. Myeloma cells grow in the bone marrow and crowd out normal cells, leading to loss of white cells, and an increased risk of infection. It also leads to the loss of the red cells, causing anemia.

Myeloma cells produce proteins that can make blood thick and affect the bone by destroying the bone structure.

This, in turn, causes other serious medical issues such as kidney failure and immune system problem.

A Rare Cancer

Multiple myeloma is not a very common cancer, and represents one percent of all cancer diagnoses and two percent of all cancer deaths. Approximately 50,000 people in the United States are living with multiple myeloma, and an estimated 14,600 new cases are diagnosed each year. Although the peak age of multiple myeloma symptoms to begin is 65 to 70 years of age, recent statistics suggest that it is increasingly common at an earlier age. Despite recent advances in the treatment of myeloma with significantly improved 5-year survival rates, about 11,000 people die from myeloma each year.

VA medical centers care for approximately 10-12 percent of all cases of multiple myeloma in the United States. The rate of multiple myeloma in the veteran population may be high because men are twice as likely as women to develop the disease, and the vast majority of VA patients are men. Additionally, myeloma occurs more frequently with increasing age, and the average age of veteran patients is above 50 years. Other complications such as smoking, substance abuse, and exposure to radiation and toxic agents (i.e., Agent Orange), increase the risk of multiple myeloma as well.

Agent Orange and Ionizing Radiation Presumption

Based on clinical research, multiple myeloma, similar to other lymphoid cancers is one of the diseases on VA’s Agent Orange list of presumptive disabilities. This means that if you served in Vietnam between 1962 and 1975, VA automatically presumes you were exposed to Agent Orange. And if you are in this category and you are diagnosed with multiple myeloma, federal law presumes your multiple myeloma is related to that exposure.

Multiple myeloma is similarly presumed by VA to have been associated with ionizing radiation for “Atomic veterans” and for veterans who participated in “other radiation risk activities” as defined in VA regulations.

This so-called “presumptive policy” simplifies the process of receiving compensation for these diseases since VA eliminates the usual requirements that a veteran prove that an illness began or was worsened during military service. Veterans who served in Vietnam during the war are also eligible for a complete physical examination. If a VA physician suspects a disease might be related to Agent Orange or ionizing radiation, VA may provide free medical care.

Multiple Myeloma Diagnosis Challenging

One of the most difficult challenges to diagnosing myeloma is that the disease has no unique symptoms. Consequently, the chance of misdiagnosis is large. Two readily identifiable symptoms are anemia and bone pain/fracture. But both of these symptoms sometimes result in misdiagnosis and patients may go undiagnosed or misdiagnosed for significant periods of time. Below is a summary of common symptoms:

- Kidney problems. Symptoms can present as loss of appetite, fatigue, muscle weakness, restlessness, difficulty in thinking or confusion, constipation, increased thirst, increased urine production, and nausea and vomiting.
- Pain in the lower back, ribs, or long bones.
- Effects of anemia including fatigue, weakness, shortness of breath and sleepiness.
- Recurrent infection because of decreased immune function.
- Lesions and tumors in patient's bones; otherwise unexplained fractures.

Multiple myeloma is most readily diagnosed by a blood test called a serum protein electrophoresis, or SPEP for short. It is not a routine test, so it must be specifically ordered if the provider suspects myeloma. This test may show a marker called an M-spike, which suggests the presence of cancerous myeloma cells. A bone marrow biopsy and x-rays of the entire skeleton usually follows to confirm the presence of multiple myeloma.

Treatment

Multiple myeloma treatment has changed a lot in the last several years with what have become known as "targeted therapies." Whereas chemotherapy, the once standard myeloma treatment, attacks the entire body as well as the cancer cells, targeted therapies attack either the cancer cells directly or the environment in which they grow and live.

The first of these new treatments was really an old drug called thalidomide, which had been withdrawn in the 1960s for causing birth defects. However, recently this old drug has been found to be very useful for treating myeloma, especially when combined with dexamethasone, a powerful steroid. Its use in myeloma however, is carefully controlled to guard against pregnancy-related complications

Other new treatments include Velcade and Revlimid. Revlimid is a derivative of thalidomide in the final phases of FDA clinical trials and is expected to be approved soon. In addition, there are a number of other new therapies either in trial now or being considered for

therapies either in trial now or being considered for trials. Stem cell transplants, both autologous (one's own stem cells) and allogenic (a donor's stem cells) are also effective treatments for some people.

Additionally, almost all myeloma patients are given periodic infusions of a bisphosphonates, a drug that strengthens bone structure and appears to help suppress bone-related complications in myeloma.

How to Get Disability Compensation from VA

Like all veterans, veterans exposed to ionizing radiation are eligible for monthly payments, called disability compensation, from VA if they are suffering with illnesses or injuries that VA determined to have been incurred or aggravated during active military service. Veterans exposed to ionizing radiation also have special access to disability compensation for illnesses or injuries related to exposure to ionizing radiation. The service of the veteran must have been terminated from military service through separation or discharge under conditions that were other than dishonorable.

The amount of disability compensation varies according to the degree of disability and the number of dependents. Benefits are not subject to Federal or state income tax. The receipt of military retirement pay, disability severance pay, and separation incentive payments known as SSB and VSI (Special Separation Benefits and Voluntary Separation Incentives) affects the amount of VA compensation paid.

The disability ratings range from 0 to 100 percent (in increments of 10 percent). For example, in 2006, a veteran with a disability rating of 10 percent receives \$112; a veteran with disability rating of 50 percent gets \$757; and a veteran who is totally disabled and therefore, evaluated at 100 percent, receives \$2,393 monthly.

Veterans with disability ratings between 30 and 100 percent are also eligible for monthly allowances for a spouse ranging from \$40 to \$135, and for each child, \$20 to \$98. (The amount depends on the disability rating of the veteran.)

A veteran who is in need of regular aid and attendance of another person, or who is permanently housebound, may be entitled to additional benefits. VA must make the determination before the veteran can get these benefits.

Presumptive Service Connection

VA presumes a veteran exposed to ionizing radiation under certain conditions to have a service-connected illness. The current list of presumed conditions is provided on page 5 of this newsletter. This list and information about the diseases associated with ionizing radiation also are available online at www.VA.gov/IRAD.

Nonpresumptive Compensation – Direct Service Connection

To determine service connection for other conditions or exposures not eligible for presumptive compensation, VA adjudicators consider each case individually, looking at a number of factors, including the amount of radiation exposure, duration of exposure, elapsed time between exposure and onset of the disease, gender, family history, age at the time of exposure, the extent to which a nonservice-related exposure could contribute to the disease, and the relative sensitivity of exposed tissue.

VA regulations define all cancers as possibly caused by radiation. Other non-malignant conditions that might be caused by radiation include certain types of cataracts; non-malignant thyroid nodular disease; parathyroid adenoma; and tumors of the brain and central nervous system. For a given individual, VA will consider the possibility that other diseases were caused by radiation, if supported by medical/scientific evidence. To be eligible for compensation, VA must determine that it is at least as likely as not that a veteran's illness was caused by his/her exposure to radiation during military service.

Must Apply to Be Considered

Compensation is not automatically given to any veteran. VA veterans service representatives (VSRs) can provide the necessary application and assist veterans who need help in completing it. VSRs are located at all VA Regional Offices, in VA medical centers, and at most VA clinics. For help in locating a VSR near you, call the following toll-free telephone number: **1-800-827-1000**. You may also apply online at the Web site listed below

Other Benefits

In addition to the compensation program described above, individual veterans may be eligible for health care and the full range of other benefits offered by VA, including education and training, vocational rehabilitation, home loan guarantees, life insurance, pension, burial benefits, and more.

To learn more about VA's programs, visit the VA home page at <http://www.VA.gov>, or call **1-800-827-1000**.

National Association of Atomic Veterans Plan Convention in September in St. Louis

NAAV is planning its 2006 Convention for September 24-27, 2006, at the Holiday Inn, St. Louis Airport (4545 N. Lindbergh Boulevard, St. Louis, MO 63044). Additional details are not yet available.

About the Review”

The “Ionizing Radiation Review” is written by VA’s Environmental Agents Service to provide information to former military service members who may have been exposed to ionizing radiation during their military service. The “Review” describes the possible long-term health consequences of such exposure and VA’s programs to respond to this health risk.

The newsletter is intended to help provide information to veterans and their families concerned about the health risks of exposure to ionizing radiation in military service.

This is the fourth issue of the “Ionizing Radiation Review” newsletter. The first three issues were published in February 2004, December 2004, and August 2005. We anticipate publication once or twice annually, depending on the amount of news on this subject, budgetary considerations, and interest. This newsletter was completed in late December 2005, and does not include developments that occurred after that time.

Questions, comments, and suggestions for future issues are encouraged and can be sent to the editor of the Ionizing Radiation Review, Donald J. Rosenblum, Deputy Director, Environmental Agents Service (131), VA Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420.

Requests for additional copies of the newsletter should also be sent to Mr. Rosenblum. Supplies are limited. Please specify the quantity and issue date requested.

Current and back issues of the “Reviews” are posted on the Internet at www.VA.gov/IRAD.

Readers’ Survey Results

From time to time the editor of this newsletter takes a brief survey of its readers to ensure that we are on the right track and are responding to their needs. Also we ask for suggestions about additions and deletions, and for general comments about the publication. In the third issue of this newsletter, dated August 2005, we included such a survey.

Readers were asked whether he or she was a veteran, spouse of a veteran, or other relation, and whether they were a first-time reader of the Ionizing Radiation Review. Readers were also asked what they thought of the newsletter, whether it met their needs, what changes they would like to see in the publication, and what additional comments and suggestions they might have regarding the newsletter.

The respondents were invited to use the form included in the Review or to use their own paper. We have received more than three dozen replies, with nearly all positive comments. Typical comments were “very informative,” “thanks,” “well written,” “very well done,” “much appreciated,” “excellent,” and “very good.” Several people wrote, “Keep up the good work.” One individual (HJ from Warrenton, MO), wrote, “I read it from cover to cover.” Another (BB from Cathedral City, CA) exclaimed, “Thank you! Thank You! Thank You!” describing the three issues to date as “excellent.”

Review editor Donald J. Rosenblum indicated that he was very pleased with the survey response and other feedback he had received since publication of the first issue in early 2004. He reported that there were few suggestions for improvement of the newsletter.

If you have any comments or suggestions, we would really like to hear from you. Send your comments to Editor, IR Review, Environmental Agents Service (131), Environmental Agents Service, VA Central Office, Washington, DC 20420. We read and consider all comments and suggestions, but due to the volume of correspondence received, we are unable to reply to each individual directly.

Disability Compensation Rates for 2006

No Dependents	Veteran & Spouse
10% - \$112	-
20% - \$218	-
30% - \$337	\$ 377
40% - \$485	\$ 539
50% - \$690	\$ 757
60% - \$873	\$ 954
70% - \$1,099	\$1,193
80% - \$1,277	\$1,385
90% - \$1,436	\$1,557
100% - \$2,393	\$2,528

These rates were effective December 1, 2005, in accordance with Public Law 109-111, enacted November 22, 2005. Veterans with disability ratings of at least 30 percent are eligible for additional allowances for dependents. Dependents include spouses, minor children, children between ages 18 and 23 who are attending school, children who are permanently incapable of self-support because of disability arising before age 18, and dependent parents. The additional amount depends on the disability rating.

Veterans with certain severe disabilities may also be eligible for additional special monthly compensation. For additional rate information, see compensation rate tables online at www.vba.va.gov/bln/21/Rates/comp01.htm.

Conditions Recognized for Service Connection Based on Exposure to Ionizing Radiation

(Note: This publication is new to some readers. Because of the high level of interest, this article repeats information included in earlier “Reviews.” There are no additional conditions since the last issue.)

The following conditions have been presumptively recognized by VA for service-connection. That means that veterans with certain types of exposures to ionizing radiation who have one of the illnesses listed below are eligible for disability compensation from VA and do not have to prove that their condition was caused by ionizing radiation exposure to be eligible for disability compensation from VA.

- Leukemia other than chronic lymphocyte leukemia;
- Cancer of the thyroid;
- Cancer of the breast;
- Cancer of the pharynx
- Cancer of the esophagus;
- Cancer of the stomach;
- Cancer of the small intestine;
- Cancer of the pancreas;
- Multiple myeloma;
- Lymphomas (except Hodgkin’s disease)
- Cancer of the bile ducts;
- Cancer of the gall bladder;
- Primary liver cancer except if cirrhosis or hepatitis B is indicated;
- Cancers of the salivary gland;
- Urinary tract cancer (kidney/renal, pelvis, ureter, urinary bladder, and urethra);
- Bronchiolo-alveolar cancer (a rare form of lung cancer);
- Cancer of the brain;
- Cancer of the colon;
- Cancer of the lung; and
- Cancer of the ovary.

Please Note: To be considered for disability compensation, a veteran must specifically apply for that benefit. Participation in the Ionizing Radiation Registry does not automatically constitute an application for compensation benefits.

Two Advisory Groups Assist VA Secretary on Ionizing Radiation Issues

At present, two advisory committees have been asked by Congress to give advice to the Secretary of Veterans Affairs on ionizing radiation matters.

The Veterans Advisory Committee on Environmental Hazards (VACEH) was established by Public Law 98-542 in 1984. Initially, the VACEH was responsible for advising VA on dioxin (a chemical found in Agent Orange), as well as ionizing radiation issues, but Public Law 102-4, enacted in 1991, eliminated herbicides from its mandate, asking instead that the National Academy of Sciences take over the dioxin function.

The VACEH has nine members, including nationally recognized health and scientific professionals who constitute the committee's Scientific Council and representatives of veterans and the general public. The committee typically meets 2-4 times annually. At least one meeting is held each year. Its meetings are open to the public and announced in the *Federal Register*.

The Council is responsible for evaluating scientific studies relating to the possible adverse effects of exposure to ionizing radiation. Questions and information relating to radiation compensation claims and other radiation-related issues also have been presented to the VACEH for its consideration and recommendations. In addition, they provide advice on proposed standards and guidelines regarding VA benefit claims based upon exposure to ionizing radiation.

The VACEH submits to the Secretary of Veterans Affairs recommendations it considers appropriate for administrative or legislative action.

The Executive Secretary for the VACEH is Ms. Ersie Farber-Collins in the Veterans Benefits Administration. (Her telephone number is **202-273-7268 or 7210**. She can also be contacted via email at ersie.farber@va.gov.)

The Veterans Advisory Board on Dose Reconstruction (VBDR) was established by the Departments of Defense and VA in accordance with Public Law 108-183, enacted in 2003. The board is intended to provide guidance and independent oversight of the dose reconstruction program for Atomic Veterans. The VBDR also works to improve communications with veterans and resolve claims adjudication issues.

The VBDR consists of 16 members including nationally recognized medical and scientific experts, veterans, and representatives of the Defense Threat Reduction Agency (DTRA) and VA. The board is divided into four subcommittees: DTRA Dose Reconstruction Procedures, VA Claims Adjudication Procedures, Quality Management and VA Process Integration with DTRA Nuclear Test

Personnel Review Program, and Communications and Outreach.

VBDR meetings are open to the public. Additional information about the VBDR, including meetings and how to contact the board, may be found on its website: www.vbdr.org.

Veterans Who Have Radiation Exposure

This newsletter is primarily for veterans who

- were present during the construction and/or atmospheric testing of bombs,
- served in the occupation of Japan shortly after World War II,
- were treated with nasopharyngeal (NP) radium during military service,
- participated in the following radiation risk activities: at the Department of Energy gaseous diffusion plants at Paducah, KY, Portsmouth, OH, or K25 area at Oak Ridge, TN, at least 250 days before February 1, 1992, and those present at underground nuclear tests at Amchita Island, AK, before January 1, 1974.
- may have been exposed to radiation during military service in other ways, such as service as a nuclear submariner, x-ray or dental technician, etc.

Please note that some of these veterans may not necessarily be eligible for health care from VA.

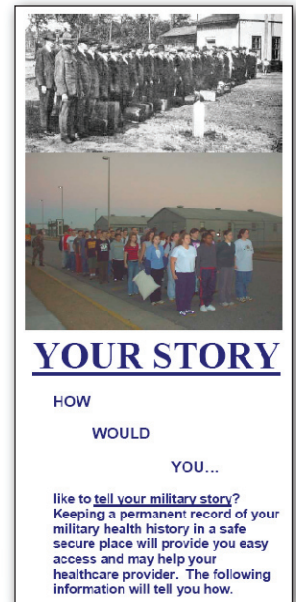
“YOUR STORY” Brochure Shows Veterans How to Record Their Military History

VA recently produced a brochure that explains how a veteran can record his or her military history online with “MyHealthVet.” The brochure is available online at most VA locations and is online at www.va.gov/EnvironAgents.

The program lets veterans record their personal military history in privacy and at their convenience. The information is permanently and confidentially retained in MyHealthVet.

If they wish, veterans can choose to share their history with their health care providers and others. This is a totally voluntary program. Veterans are not required to participate.

Details of incidents that may involve exposures to occupational and military hazards, including ionizing radiation, can be of value to veterans and their health care providers as part of understanding a veteran's medical problems and complaints, and to help establish rapport.



Straight from the Source - VA's Environmental Agents Service is Serious about Communicating with Veterans

This article was jointly authored by Environmental Agents Service intern Tiffany Anzalone and Matt Bristol, Assistant Editor of the VA's employee Magazine VAnguard. It appeared in the September/October 2005 issue of VAnguard.

Communication is an important part of every relationship. For nearly 25 years, VA has been communicating with a special group of veterans who might have been exposed to environmental hazards while serving in combat.

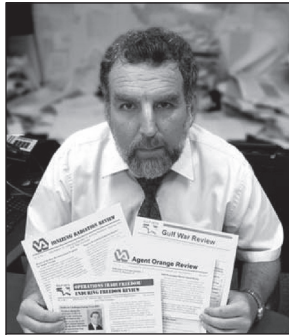
Debuting in 1982, the *Agent Orange Review* was the first VA national newsletter designed to inform Vietnam veterans of health issues specifically related to their military service. It quickly proved to be "an invaluable resource of information for veterans and others," according to Layne Drash, former director of Environmental Agents Service in the Office of Public Health and Environmental Hazards.

Back in the early 1980s, there was little knowledge in the veterans community about Agent Orange and the long-term effects of exposure to dioxin, Drash noted. So the newsletter was filling a communication void.

But to be effective, it had to present complicated information in an easy-to-read format. This was one of the toughest challenges, according to the newsletter's first editor, Donna St. John, who now works for the USO.

The VA Office of Public Affairs published the *Review* throughout the mid-1980s. In 1989, responsibility was transferred to Donald Rosenblum in Environmental Agents Service. Under his watch, the concept of communicating directly with veterans has blossomed. "Veterans want and need this information to protect their health. We owe them as much information as we can find," he explained.

Today, Rosenblum produces four national newsletters for veterans who may have been exposed to environmental hazards: the *Agent Orange Review*, *Gulf War Review*, *Operation Iraqi Freedom/Enduring Freedom Review*, and *Ionizing Radiation Review*. Each newsletter is published about twice a year, depending on the amount of new information available.



Donald Rosenblum with the newsletters he produces for veterans who may have been exposed to environmental hazards.

The newsletters are sent directly to veterans registered on VA's four health registries, which offer physical examinations tailored to address specific health issues, as well as VA medical centers, vet centers, regional offices and other interested parties.

The first issue of the *Gulf War Review* was released in October 1992. It was originally called the *Persian Gulf Review* but the name was changed in 1997 to be sensitive to individuals of Persian ethnicity. It offers up-to-date information on new clinical programs and the research agenda concerning health issues that arose during and after the 1991 Gulf War.

In 2003, Rosenblum began working on a newsletter for veterans of the wars in Iraq and Afghanistan, because their environmental exposures differed from veterans of the first Gulf War. So far he has produced three 12-page issues with information on the possible long-term health consequences of military service in Iraq and Afghanistan.

With the publicity on Agent Orange and Gulf War health concerns, a group of veterans involved in the testing of nuclear weapons after World War II recently contacted VA to urge creation of a newsletter relating to their health concerns. In response, Rosenblum started the *Ionizing Radiation Review*.

Veterans seem to appreciate and benefit from the newsletters. One who receives the *Ionizing Radiation Review* responded in a reader survey that he liked having research findings compiled into a single source. He previously had to sift through reams of literature to find information and sometimes had to turn to "relatively obscure sources."

Electronic Notification of Newsletter Availability

You can sign up to receive electronic notification of the publication and availability of future issues of the *Ionizing Radiation Review* online by logging on to our Web page, www.va.gov/EnvironAgents and following the instructions.

Where to Go For Information and Help

Veterans concerned about their exposure to radiation and its possible long-term health consequences -- nearly every VA medical center offers the VA's Ionizing Radiation Registry health examination. Eligible veterans who were exposed to radiation during their military service are encouraged to participate in this voluntary program. Call the nearest VA medical center for an appointment. The telephone number should be included in your local telephone directory under the "U.S. Government" listings. VA medical centers have designated an Environmental Health Clinician and an Environmental Health Coordinator. The Clinician performs (or supervises) the registry examination; the Coordinator is responsible for handling the administrative aspects of the program.

For general information about VA health benefits and enrollment in the VA health care system, call **1-877-222-8387**. Eligible veterans are not required to enroll in the system in order to receive the registry examination. They can contact the nearest VA medical center or look at our Web site at www.VA.gov/EnvironAgents to find out who the Environmental Health Coordinator and Clinician are.

Veterans who need prompt medical treatment for conditions that may be related to their exposure to radiation during military service -- contact the nearest VA medical center for eligibility information and possible medical treatment. Atomic veterans seeking care solely for health problems associated with exposure to radiation have been assigned to

category six in the enrollment priorities system. Call the number above for information on this subject.

Veterans with illnesses incurred in or aggravated by exposure to radiation or some other aspect of military service -- contact a VA veterans services representative (VSR) at the nearest VA regional office or health care facility and apply for disability compensation. The national toll-free telephone number for information regarding VA benefits is **1-800-827-1000**. Also, VA applications are available on the Internet at <http://vabenefits.vba.va.gov/vonapp>.

Veterans who encounter difficulties at a VA medical center -- contact the Patient Advocate or Patient Representative at that facility for assistance in resolving the problem.

Representatives of various **Veteran Service Organizations**, including The American Legion (**1-800-433-3318**, www.legion.org), Paralyzed Veterans of America (**1-800-424-8200**, www.pva.org) Veterans of Foreign Wars of the United States (**1-800-VFW-1899**, www.vfw.org), Disabled American Veterans (**1-877-426-2838**, www.dav.org), National Association of Atomic Veterans (www.naav.com), and others have been helpful to veterans exposed to radiation who are seeking disability compensation. (These organizations are cited as examples. There are many other very helpful organizations. VA does not endorse or recommend any specific group over another.)

Country and State **Veteran Service Officers** also have been of great help to many military veterans.

