DEPLETED URANIUM (DU) QUESTIONNAIRE

1. MILITARY TREATMENT FACILITY (MTF):

MTF UIC:

INSTALLATION NAME:

PRIVACY ACT STATEMENT

AUTHORITY: Sections 1074f, 3013, 6013, 8013, Title 10, U.S. Code; and E.O. 9397.

PRINCIPAL PURPOSE(S): To assess your state of health after deployment or for any deployment related concern and to assist military health care providers in identifying and providing present and future medical care to you.

ROUTINE USE(S): To other Federal and State agencies and civilian health care providers as necessary, in order to provide necessary medical care and treatment.

DISCLOSURE: Voluntary; however, if information is not provided, health care WILL be furnished, but comprehensive care may not be possible.

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NAME (Last, First, Middle Initial)	SSN							
PART II (To be completed by Environmental Health Coordinator or Clinician)								
9. Who referred the member for medical evaluation? (Enter one letter code)								
 A - Deployment Health Support Directorate (formerly the Office of the Special Assistant for Gulf War Illness (OSAGWI)) of Department of Defense B - Another Department of Defense Office C - Department of Veterans Affairs (VA) D - Self referred (Including the DD2796 - Post Deployment Health Assessment Form) Answer each question with: Y = Yes; N = No; D = Don' 	ding referring medical							
10. Where did member serve?								
a. Kuwait								
b. Saudi Arabia								
c. Iraq								
d. Only on a ship (not ashore)								
e. Other (Identify)								
11. Was the member a logistics assistance representative (LAR) who inspected depleted ura systems to determine reparability?	nium contaminated							
12. Was the member a member of a battle damage assessment team (BDAT) who examined known or suspected to be damaged or destroyed by DU?	U.S. combat vehicles							
13. If the member served prior to Operation Iraqi Freedom, was he/she a member of the 144 Company who processed damaged equipment, including some with DU contamination d Storm/Desert Shield?								
14. Was the member a member of a radiation control (RADCON), or other radiation survey to Persian Gulf?	eam deployed in the							
15. Was the member involved in the examination or recovery of damaged or destroyed enem	ny vehicles?							
16. Was the member involved in the downloading of equipment or munitions from vehicles k be contaminated by DU?	nown or suspected to							
17. Was the member a member of a unit maintenance team performing maintenance on or ir suspected to be contaminated by DU?	n systems known or							
18. If the member served prior to Operation Iraqi Freedom, was he/she at Doha on July 11, fire?	1991, at the time of the							
a. Was the member directly involved in clean-up operations following the Doha explosion	n and fire?							
b. Was the member exposed to smoke from burning Doha rounds?								
19. Was the member in or on a vehicle hit by enemy fire at the time it was hit? If "No", skip	o to Question 20.							
a. If "Yes", what type of vehicle:								
(1) Abrams battle tank								
(2) Bradley fighting vehicle								
(3) Other <i>(Identify)</i>								
(4) Don't know								
b. Was the vehicle hit by DU munitions?								
20. Did the member enter an Abrams battle tank to perform rescue operations immediately a enemy fire?	after it was struck by							
21. Did the member enter an Abrams battle tank to retrieve sensitive items immediately afte fire?	r it was struck by enemy							
22. Did the member enter a Bradley fighting vehicle to perform rescue operations immediate enemy fire?	ly after it was struck by							
23. Did the member enter a Bradley fighting vehicle to retrieve sensitive items immediately a enemy fire?	fter it was struck by							

NAME (Last, First, Middle Initial)	SSN	
PART II (Continued)		
Answer: $\mathbf{Y} = \text{Yes}; \mathbf{N} = \text{No}; \mathbf{D} = \text{Don't Know}$		
24. Was the member in or on a vehicle hit by friendly fire at the time it was hit? If "No", sk	ip to Question 25.	
a. If "Yes", what type of vehicle:		
(1) Abrams battle tank		
(2) Bradley fighting vehicle		
(3) Other <i>(Identify)</i>		
(4) Don't know		
b. Was the vehicle hit by DU munitions?		
25. Did the member enter an Abrams battle tank to perform rescue operations immediately a friendly fire?	after it was struck by	
26. Did the member enter an Abrams battle tank to retrieve sensitive items immediately afte fire?	r it was struck by friendly	
27. Did the member enter a Bradley fighting vehicle to perform rescue operations immediate friendly fire?	ly after it was struck by	
28. Did the member enter a Bradley fighting vehicle to retrieve sensitive items immediately a friendly fire?	after it was struck by	
29. Did the member enter any enemy vehicle to perform rescue operations immediately after fire? If "No", skip to Question 30. If "Yes", what type of vehicle?	r it was struck by friendly	
a. Tank		
b. Other tracked vehicle (Identify)		
c. Truck		
d. Other wheeled vehicle (Identify)		
e. Other type vehicle (Identify)		
f. Don't know		
30. Did the member enter any enemy vehicle to retrieve sensitive items or intelligence mater was struck by friendly fire? If "No", skip to Question 31. If "Yes", what type of vehicle	rial immediately after it e?	
a. Tank		
b. Other tracked vehicle (Identify)		
c. Truck		
d. Other wheeled vehicle (Identify)		
e. Other type vehicle <i>(Identify)</i>		
f. Don't know		
31. Was the member exposed to smoke from any enemy equipment struck by DU rounds?		
32. Did the member remove equipment or other items from a damaged or destroyed U.S. or If "No", skip to Question 33.	enemy vehicle?	
a. If the member removed something from a vehicle, please describe it:		
b. Does the member still have equipment or other items removed from a damaged or de vehicle?	estroyed U.S. or enemy	

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NAME (Last, First, Middle Initial)	SSN	
PART II <i>(Continued)</i> Answer: Y = Yes; N = No; D = Don't K	Know	
33. Was the member within 50 meters (54.68 yards) of a vehicle when it was hit (no was in or on that were hit)? If "No", skip to Question 34.		
a. If "Yes", what type of vehicle:		
(1) Abrams battle tank		
(2) Bradley fighting vehicle		
(3) Other (Identify)		
(4) Don't know		
b. Was the vehicle hit by DU munitions?		
34. Did the member breathe smoke or dust from vehicles hit by enemy or friendly fire	e? If "No", skip to Question 35.	
a. If "Yes", what type of vehicle:		
(1) Abrams battle tank		
(2) Bradley fighting vehicle		
(3) Other (Identify)		
(4) Don't know		
b. Was the vehicle hit by DU munitions?		
35. Did the member climb on or enter vehicles hit by enemy or friendly fire some tim rescue period? If "No", skip to Question 36.	ne after the immediate post-impact	
a. If "Yes", what type of vehicle:		
(1) Abrams battle tank		
(2) Bradley fighting vehicle		
(3) Other (Identify)		
(4) Don't know		
b. How many times?		
(1) 1 time		
(2) 2 times		
(3) 3 - 10 times		
(4) More than 10 times		
(5) Don't know		
c. How long (in total) was the member on board the vehicle(s)?		
(1) Less than 5 minutes		
(2) 5 - 15 minutes		
(3) 16 - 30 minutes		
(4) More than 30 minutes		
(5) Don't know		

NAME (Last, First, Middle Initial)	SSN							
PART II (Continued)								
Answer: $\mathbf{Y} = \text{Yes}$; $\mathbf{N} = \text{No}$; $\mathbf{D} = \text{Don't Know}$								
36. Did the member pass within 50 meters (54.68 yards) of a damaged or destroyed vehicle? Question 37.	' If "No", skip to							
a. If "Yes", how long (in total) after the destructive event:								
(1) Less than 12 hours								
(2) 12 - 24 hours								
(3) More than 24 hours								
(4) Don't know								
b. What type of vehicle								
(1) Abrams battle tank								
(2) Bradley fighting vehicle								
(3) Other (Identify)								
(4) Don't know								
c. Was the vehicle burning?								
37. Was the member wounded as a result of being in, on, or within 50 meters (54.68 yards) at the time it was hit? If "No", skip to Question 38.	of the damaged vehicle							
a. If "Yes", where was the member wounded:								
(1) Leg/foot								
(2) Arm/hand								
(3) Face/head								
(4) Neck								
(5) Body								
b. Does the member have retained fragments or shrapnel in his/her body?								
38. Did the member fire DU rounds?								
39. Did the member handle bare/damaged DU penetrator rounds? If "No", skip to Question 4	.0.							
a. If "Yes", did the member handle the rounds with gloves?								
b. Did the member handle the rounds with shielding?								
40. Did the member have exposure to DU that is NOT captured by this questionnaire? If "Yes	s", describe:							
41. Does the member have other exposures and experiences to discuss with the provider? If	"Yes", describe:							
42. Is the 24-hour urine collection for Uranium being performed? If "No" or "Don't Know", e. If "Yes", the Service Laboratory or Baltimore DU staff will update this questionnaire with completion of the test.								

NAME (Last, First, Middle Initial)				SSN
43.a. Date(s) of Potential DU Exposure	F/	ART II (Continued	a)	
b. Circle highest level of exposure:				
	Level I	Level II	Level III	
c. Other Comments				
44.a. Name of Examiner (print)			b Tol	
44.a. Name of Examiner (princ)			ט. וכונ	ephone Number of Examiner
45. Title of Examiner		46. Sigr	nature of Examiner	

NAME (Last, First, Middle Initial)	SSN	SSN							
PART III (To be completed by the Service Laboratory or B	altimore	VAMC D	U Follow	-Up Pro	ogram S	Staff)			
If the 24-hour urine collection test is being performed ("Yes" response to Question 42), the Service Laboratory or Baltimore DU staff will update the questionnaire with the results upon completion of the test.									
47. Corrected urine uranium (expressed per mcg per g creatinine)3 digits to the left and 3 digits to the right of the decimal.									
Repeat urine uranium.									
48. Remarks	<u> </u>								