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RESCISSIONS

The following material is rescinded:

1. Manuals

M-10, Part III, Chapter 2, dated December 7, 1992.

CHAPTER 2. PHASE I, PERSIAN GULF REGISTRY (PGR) EXAMINATION**2.01 PURPOSE**

This chapter sets forth clinical and administrative policies related to the maintenance of Veterans Health Administration's (VHAs) Persian Gulf Registry (PGR) Program for physical examinations of concerned veterans.

2.02 ELIGIBILITY CRITERIA

The Department of Veterans Affairs (VA) will provide a PGR examination to veterans who served on active military duty in Southwest Asia during the Persian Gulf War between August 2, 1990, and the official termination date (to be established). Active duty military personnel who served in Southwest Asia are encouraged to participate in the PGR program, (see par. 2.07).

a. This would include service in one or more of the following areas:

- (1) Iraq;
- (2) Kuwait;
- (3) Saudi Arabia;
- (4) The neutral zone (between Iraq and Saudi Arabia);
- (5) Bahrain;
- (6) Qatar;
- (7) The United Arab Emirates;
- (8) Oman;
- (9) Gulf of Aden,
- (10) Gulf of Oman; and
- (11) Waters of the:
 - (a) Persian Gulf,
 - (b) Arabian Sea; and
 - (c) Red Sea.

NOTE: *Medical Administration Service (MAS) should be consulted to determine whether each veteran applying for this examination meets pertinent eligibility requirements.*

b. Eligible Persian Gulf veterans applying for treatment in a VA medical center and/or outpatient clinic should be encouraged to undergo an initial (i.e., "first-time") PGR examination. The protocol for conducting the physical examination and ordering diagnostic studies is contained in Appendix 2B.

c. Veterans should be advised that examination or treatment does not constitute a formal claim for compensation.

(1) Although the results of a PGR examination may be used to support a compensation claim, the examination will not in and of itself be considered such a claim.

NOTE: *If a compensation examination is performed for a Persian Gulf War veteran and the veteran requests inclusion in the PGR, it is not necessary to schedule an additional registry examination as long as the information is sufficient to adequately complete the PGR code sheet for submission to the Austin Automation Center (AAC).*

(2) Veterans who wish to submit a claim for conditions possibly related to Persian Gulf service should do so via the normal claims process through a Veterans Benefits Counselor (VBC) at the nearest VA medical center or regional office.

2.03 PROGRAM MANAGEMENT

For current information and program activities, Veterans' Registry Physicians (VRPs), Veterans' Registry Coordinators (VRCs) and MAS employees should receive and familiarize themselves with quarterly mailouts and various materials distributed by VA Central Office. In addition, all program officials should attend the periodic Environmental Agents Service (EAS) conference calls from VA Central Office.

2.04 RESPONSIBILITIES

The VRP, or designee, VRC and MAS staff play a significant role in determining the perceptions veterans have concerning the quality of VA health care services and of their individual treatment by VA health care providers.

a. **VRP Responsibilities.** The VRP, or designee, is responsible for clinical management of the veteran on the registry and will serve as their primary health care provider unless another has been assigned. The VRP serves in an advisory capacity for the administrative management of the program. The VRP should be the person to discuss with the patient the results of the examination(s) as well as providing follow-up visits and/or possible referrals to other tertiary medical centers or Persian Gulf Referral Centers (PGRC). Major essential responsibilities include:

- (1) Counseling the veteran as to the purpose of the physical examination;
- (2) Providing focused initial examination and continuum of care to those symptomatic veterans experiencing multiple symptoms after their Persian Gulf experience;
- (3) Conducting and documenting the physical examination in the medical record or Consolidated Health Record (CHR) at the time of the visit;
- (4) Providing a complete medical history including:
 - (a) Family;
 - (b) Occupation;
 - (c) Social, including tobacco, alcohol, and drug use;
 - (d) Civilian exposure to possible toxic agents;
 - (e) Psychosocial condition; and
 - (f) Review of systems.
- (5) Completing Part II (Phase I) and III (Phase II) of VA Form 10-9009A (July 1995), Persian Gulf Registry Code Sheet, and reviewing Part I and completing that section, if necessary.

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**M-10, Part III
Chapter 2**

(a) Reviewing the code sheet to further ensure the form's completeness, the clinical examiner will review the code sheet and, if necessary, obtain and record any missing information from the veteran.
NOTE: Code sheets should be transmitted to AAC no later than 25 working days after initial examination.

(b) Inquiring whether any of the veteran's natural children have any birth defects and noting in Item 22 and the CHR.

(6) Reviewing records of every Persian Gulf veteran examined to ensure that a complete physical examination was performed and documented;

(7) Personally discussing with each veteran the findings of the physical examination and completed diagnostic studies. The interview will be conducted in such a way as to encourage the veteran to discuss any health concerns, as well as concerns expressed by family members;

(8) Personally discussing each veteran's need for a follow-up examination either recommended by VRP or requested by the veteran;

(9) Documenting these discussions and/or findings in each veteran's CHR.

(10) Encouraging the veteran to contact VA medical center to include additional diagnoses in CHR and PGR if the veteran is subsequently diagnosed with a significant health problem by a non-VA physician. This new diagnosis must be submitted under non-VA physician's signature and on official letterhead. A code sheet identified as, follow-up examination, Type C, will be completed with this diagnosis and subsequently forwarded to AAC for inclusion in PGR.

(11) Preparing and signing a follow-up letter to each veteran explaining the results of the examination and associated laboratory tests. **NOTE:** Sample follow-up letters are provided in Appendix 2G.

(a) These letters are to be mailed to the veteran within 2 weeks of the initial examination appointment and follow-up examination when a new diagnosis is determined. The only exception to this timeframe will be when a consultation at a specialty clinic is requested as part of the initial examination process. This exception suspends, but does not remove the requirement for the follow-up letter. The follow-up letter is to be sent no later than 2 weeks after the consultation.

(b) A copy of this dated and signed letter will be filed in the veteran's CHR.

(c) It is essential that this letter be written in language that can be easily understood by the veteran. Inappropriate wording could unduly alarm or confuse the veteran. A great deal of sensitivity and care should be exercised in the preparation of this correspondence.

(d) The letter will explain that:

1. If the veteran who was examined has no detectable medical problems, the follow-up letter should so indicate and suggest that the veteran contact the nearest VA health care facility if health problems appear later.

2. If it is determined upon examination that the veteran does have medical problems, it is not necessary to specify the problems in the letter.

3. The veteran should be advised in the letter that the recent examination indicated a health condition or problem which may require further examination and/or treatment.

4. If the veteran is eligible for VA medical treatment, the letter should so advise and recommend that the veteran seek follow-up medical care at the VA medical facility.

5. If the veteran is not eligible for treatment, the letter should so advise and recommend that the veteran seek appropriate medical care elsewhere.

6. The examination does not automatically initiate a claim for VA benefits. For information relating to claims, refer the Persian Gulf veterans to a VBC at the nearest VA medical center or regional office.

7. The results of the examination will be maintained by VA and will be available for future use as needed; and

8. If the veteran changes place of residence, the veteran should provide the new address to the VRC to be recorded on a computerized record or card file and included on a corrected code sheet (Type "E" examination code) for submission to AAC.

b. Veterans' Registry Coordinator (VRC) Responsibilities

(1) The VRC is responsible for the administrative management of the program, including:

- (a) Scheduling of appointments;
- (b) Monitoring timeframe compliance;
- (c) Reviewing records for accuracy and completeness; and
- (d) Collecting data for reporting purposes.

(2) The VRC is responsible for the following:

1. Scheduling. Facilities should make every effort to give each veteran a PGR examination within 30 days of the request date. If numerous consultations are required, all of these should be scheduled on the same day, whenever possible, so that the veteran will not be unduly inconvenienced. When it is not possible to provide all consultations on the same day, the VRC/scheduler should work with the veteran to minimize disruptions in the veteran's life. If a medical center fails to meet the time standard of 30 calendar days from date of request, the medical center Director in coordination with the Regional Office Director shall work together to explore all alternatives; i.e., referrals to other VA facilities, additional staff hours to perform these examinations; and the possibility of the use of fee-basis sources or contracting out some or all examinations with volume health care providers, to bring the medical center in line with the time standard.

2. Disseminating Information. It is important that each Persian Gulf veteran be fully advised of the PGR examination. Facility staff are encouraged to fully communicate all aspects of the PGR examination by any appropriate means. The following alternatives might be considered:

a. Upon distribution by VA EAS, provide each Persian Gulf veteran reporting to the outpatient area, with a VHA Headquarters (131) handout, "VA Persian Gulf Veterans' Illnesses, Questions and Answers," Information Bulletin IB 10-41, describing the purpose of the examination and its limitations. This can be further clarified by the examining physician prior to and during the course of the physical examination.

b. VRCs will also provide each veteran with a brief oral explanation of the purposes of the PGR and the examination process and respond to any questions the veteran might have. This can be accomplished during the VRCs initial contact with the veteran.

c. Computerized Record or Card File. A computer record or card file will be established to include data on all registry participants. Each computer record or card file should include veteran's full name, address, telephone number, date of birth, Social Security Number (SSN), date of initial examination and date(s) of subsequent follow-up examination(s). **NOTE** : *This record will support the statistics included in the Bi-monthly Report of Persian Gulf War Veteran Registry Examinations (RCS 10-0860). In addition to other information updates, every effort should be made by the VRC to maintain the veteran's current address in*

the computer record or card file for outreach purposes. VHA Headquarters is in the process of establishing a VA system-wide computerization of this card file.

3. Code Sheet Completion

a. The VRC, or designee, will complete Part I of VA Form 10-9009A, and will ensure that all information is entered on the code sheet before the veteran is referred to the clinician for the examination.

b. The VRP will complete Part II and III of VA Form 10-9009A. (Refer to instructions and sample code sheet in App. 2C).

c. In the event that a veteran requests a PGR examination but does not wish to be included in the registry database, a registry examination should be performed. Item 32, "Remarks," should indicate the current date and note that the veteran chose not to participate in the registry. This code sheet should be filed in veteran's CHR. Do not submit this code sheet to the AAC.

2.05 CONSOLIDATED HEALTH RECORD (CHR)

The VRC will ensure that a CHR on each registry participant is created if one does not already exist.

a. All Persian Gulf veterans participating in the registry will have a VA Form 10-9009B (Persian Gulf Identification Sticker) affixed to their CHR. VA Form 10-9009B should be affixed to the front of the record in the lower left-hand corner of the "service connected" block.

b. These Persian Gulf registry records are subject to the same retention and disposition policies as other medical record files, i.e., Records Control Schedule 10-1.

2.06 INCARCERATED VETERANS

VA medical facilities can provide assistance to penal authorities or institutions, which agree to provide examinations to veterans, without reimbursement from VA, for purposes of entry in the PGR.

a. Copies of directives, code sheets, etc., will be provided to penal institutions upon request.

b. Penal authorities must be advised at the time of such requests that the results of the examinations provided at their institutions must be returned to the VA medical facility of jurisdiction for inclusion, in the veteran's behalf, in PGR and in the veteran's CHR.

2.07 VETERANS WITH OTHER THAN HONORABLE DISCHARGES

The requirements of M-1, Part I, Chapter 4, applies to veterans with less than honorable discharges applying for PGR examinations.

2.08 ACTIVE DUTY MILITARY PERSONNEL

When active duty members of the uniformed services apply to VA facilities for a PGR examination, Department of Defense (DOD) must authorize and provide the appropriate DOD Form 2161, Referral for Civilian Care, requesting this examination or provide services under existing DOD/VA sharing agreement. The requirements of M-1, Part I, Chapter 15, regarding the authorization and billing from the appropriate branch of service will apply. Facilities should also reference the current directive providing the interagency billing rates.

a. Procedures for processing the examination are the same as those for a veteran participating in this program.

b. A military facility may perform the PGR examination according to VA instructions or the corresponding military instructions. **NOTE:** DOD has established a Persian Gulf Hot Line, telephone number 1-800-796-9699 to direct active duty personnel to military hospitals for medical examinations and provide other related information. An additional telephone number has been established (1-800-472-6719) for Persian Gulf War veterans to call with their recollection of "incidents" that might be related to health problems.

c. Military facilities may obtain the pertinent VA administrative issue and appropriate forms from the nearest VA facility. The VA Medical Center, 50 Irving Street, N.W., Washington, DC 20422, Attn: Persian Gulf Coordinator (136), is the processing center for all active duty members of uniformed services stationed overseas. Military facilities will complete code sheets with exception of the following which will be filed in by VA coding clerks:

	<u>Blocks</u>	<u>Code Identifier</u>
<u>Part I</u>	2 to 7 137 to 141	Facility number and suffix County and State

d. Military facilities will provide completed copies of the code sheet, physical examination, laboratory tests, etc., to the nearest VA medical center or outpatient clinic. The VRC will:

(1) Prepare a colored card (or computerized facsimile) for the file with similar data as for a veteran and label the card "Active Duty";

(2) Complete the code sheet to include facility number/suffix, if applicable, county and state codes.

(3) Submit code sheet to the VA Office of Financial Management, AAC, 1615 Woodward Street, Austin, TX 78722-0001, in accordance with instructions;

(4) Establish a CHR if one does not already exist and file the PGR examination in this folder; and

(5) If requested, and only with written authorization (release of information) from active duty member, VA may supply a copy of these medical records to the military facility.

2.09 UPDATING VRP AND VRC APPOINTMENTS

Separate listings of VRPs and VRC's are maintained within EAS.

a. In an effort to keep these listings current, facilities are required to notify the EAS of any changes in the status of appointments of VRP's and/or VRC's at their respective facilities.

b. As changes in designation occur, submit in writing the name, title, mail routing symbol, FTS and commercial numbers including area code, to the VRC (103A), EAS, VA Central Office, 810 Vermont Avenue, N.W., Washington, DC 20420 (Facsimile Number FTS 700-565-7572). **NOTE:** In order to provide current Persian Gulf information to concerned VA Registry Staff, it is important that any changes in designation of VRPs or VRCs at VA facilities be provided to VA Central Office (103A) as they occur.

2.10 REPORT TO AAC

The PGR report should be prepared monthly and submitted to the AAC as per instructions contained in Appendix 2D:

a. VA Form 10-9009A (July 1995), Persian Gulf Registry Code Sheet, and VA Form 7252, (originally 30-7252) Transmittal Form for the Use in Shipment of Tabulating Data, should be prepared monthly and

submitted to AAC as per instructions contained in Appendix 2D. **NOTE:** *These code sheets should be submitted, based on the following schedule, but no later than 25 working days following initial examination.*

b. The schedule of mailing dates is:

- (1) Region 1 -- 6th of month;
- (2) Region 2 -- 10th of month;
- (3) Region 3 -- 14th of month; and
- (4) Region 4 -- 18th of month.

DEFINITIONS AND ACRONYMS

1. **AAC** - The Office of Financial Management, Austin Automation Center (AAC) was formerly the Data Processing Center in Austin, TX. It is the location of the computerized registry for code sheet collection and database entry.
2. **AMIS** - Automated Management Information System.
3. **ANA** - Anti-Nuclear Antibody.
4. **BAER** - Brainstem Auditory Evoked Response.
5. **CAPS-PTSD** - Clinical Administered-Post Traumatic Stress Disorder.
6. **CARC** - Chemical Agent Resistant Compound paint.
7. **CBC** - Complete Blood Count.
8. **CHR** - Consolidated Health Record - A file containing medical records relating to patient identity, diagnosis, prognosis or treatment at VA facility.
9. **CPK** - Creatine Phosphokinase.
10. **CT** - Computed Tomography.
11. **D.O.** - Doctor of Osteopathy.
12. **DOD** - Department of Defense.
13. **DOD Form 2161**, "Referral for Civilian Care."
14. **DSM-III-R** - Diagnostic and Statistical Manual of Mental Disorders, Third Edition, Revised.
15. **DU** - Depleted Uranium.
16. **EAS** - Environmental Agents Service - EAS (103A), VA Central Office, has the responsibility to coordinate and monitor all VHA activities, research and otherwise, relating to the Persian Gulf issue.
17. **ECG** - Electrocardiogram.
18. **EEG** - Electroencephalogram.
19. **EGD** - Esophagastroduodenoscopy.
20. **EMG** - Electromyogram.
21. **ENG** - Electronystamogram.
22. **Examinations**
 - a. Initial. The first physical examination which is completed and sent to the AAC for the purpose of entering a veteran into the Persian Gulf Registry system.
 - b. Follow-up. Examination performed subsequent to the initial (first) examination.

23. **Facility** - Any VA entity which provides Persian Gulf Registry examinations to Persian Gulf veterans.
24. **GI** - Gastrointestinal.
25. **GYN** - Gynecology.
26. **HcT** - Hematocrit.
27. **HgB** - Hemoglobin.
28. **HIV** - HumanImmuno-deficiency.
29. **IB-10-41** - VA Information Bulletin entitled "Persian Gulf Veterans' Illnesses, Questions and Answers."
30. **ICD-9-CM** - The International Classification of Diseases, Clinical Modification, 9th Edition provides standardized classification of diseases.
31. **IgG** - Oligoconal.
32. **KIA** - Killed in Action.
33. **KTO** - Kuwait Theater of Operations.
34. **LDH** - Lactic Acid Dehydrogenase.
35. **LP** - Lumbar Puncture.
36. **MAS** - Medical Administration Service.
37. **MIA** - Missing in Action.
38. **MOS**- Military Occupational Specialty.
39. **M.D.** - Doctor of Medicine.
40. **MRI** - Magnetic Resonance Imaging.
41. **MSLT** - Multiple Sleep Latency Test.
42. **NCV** - Nerve Conduction Velocity.
43. **O&P** - Ova and Parasites.
44. **P.A.** - Physician's Assistant.
45. **PFT** - Pulmonary Function Test.
46. **PGR** - Persian Gulf Registry - The PGR is a computerized index of veteran participants, is managed centrally by the EAS in VA Central Office. The coded findings of Persian Gulf Program physical examinations and related diagnostic results are entered into a database by the AAC.
47. **PGRC** - Persian Gulf Referral Centers - Selected tertiary VA Medical Centers (Birmingham, AL, Houston, TX; , Washington, DC; and West Los Angeles, CA), with clinical and academic expertise in such areas a

pulmonary and infectious diseases, immunology, neuropsychology, and toxicology, where medical assistance is provided for those Persian Gulf veterans with symptoms which defy explanation.

48. **Plt** - Platelet.

49. **PPD** - Purified Protein Derivative.

50. **PTF** - Patient Treatment File.

51. **PTSD** - Post Traumatic Stress Disorder.

52. **Persian Gulf Area of Service.** For eligibility purposes, active military duty in Southwest Asia during the Persian Gulf War would include service in one or more of the following areas: Iraq, Kuwait, Saudi Arabia, the neutral zone (between Iraq and Saudi Arabia), Bahrain, Qatar, the United Arab Emirates, Oman, waters of the Persian Gulf, Red Sea, Arabia Sea, and Gulfs of Aden and Oman.

53. **Persian Gulf War Period of Service.** Public Law 102-25 established a Persian Gulf War period of service which will affect persons serving on active duty as of August 2, 1990, with no ending date established by law.

54. **Records Control Schedule (RCS) 10-1.** Provides instructions for record retention and disposition.

55. **Reports Control Symbol (RCS) 10-0860.** Reflects the reporting requirements for VA Form 10-9009A (July 1995), Persian Gulf Registry Code Sheet, Persian Gulf Referral Center Monthly Report, and Bi-monthly Report on Persian Gulf Uniform Case Assessment Protocol.

56. **RCS 10-0875.** The reporting requirements for the Bi-monthly Report on Persian Gulf War Veteran Registry Examinations, under Directive 10-95-053 are rescinded by this manual change.

57. **RHP** - Reproductive Health Problems.

58. **SCID** - Structured Clinical Interview for DSM-III.

59. **SCUDS** - Soviet designed surface to surface missiles.

60. **SED** - Skin Erythema Dose.

61. **SGPT(ALT)** - Transaminase Glutamic Pyruvate.

62. **SGOT(AST)** - Glutamic Oxaloacetic Transaminase.

63. **SMA (6/12)** - SMA is a Manufacturer's Trademark for a Chemistry Analyzer.

64. **SSN** - Social Security Number.

65. **T4** - Thyroxine Total Serum.

66. **TB** - Tuberculosis.

67. **TSH** -Thyroid Stimulating Hormone.

68. **UCAP**- Uniform Case Assessment Protocol.

69. **UGI**- Upper Gastrointestinal.

- 70. **VA** - Department of Veterans Affairs.
- 71. **VBC** - Veterans Benefits Counselor.
- 72. **VDRL** - Venereal Disease Research Laboratory.
- 73. **VHA** - Veterans Health Administration.
- 74. **VRC** - Veterans' Registry Coordinator - A non-physician staff member responsible for the administrative management of the program at each VA facility.
- 75. **VRP** - Veterans' Registry Physician - The VRP is a physician responsible for the clinical management of the Persian Gulf Program at each VA medical facility.
- 76. **VA Form 10-9009A (July 1995)**, Persian Gulf Registry Code Sheet.
- 77. **VA Form 10-9009B** - Identification Sticker entitled "Persian Gulf."
- 78. **VA Form 30-7252** *changed to* **VA Form 7252**, Transmittal Form for Use in Shipment of Tabulating Data.
- 79. **WBC** - White Blood Cells.

September 14, 1995

M-10, Part III
Chapter 2
Change 1
APPENDIX 2A

**PROTOCOL FOR CONDUCTING THE PHYSICAL EXAMINATION
AND ORDERING DIAGNOSTIC STUDIES**

1. It is essential that a complete medical history, physical examination and interview be performed and documented on appropriate forms. The required forms that must be fully completed are: Standard Form (SF) 88, Report of Medical Examination, Department of Veterans Affairs (VA) Form 10-9009A, Persian Gulf Registry Code Sheet, and SF 509, Progress Notes (for follow-up). These are to be maintained in the veteran's Consolidated Health Record (CHR). **NOTE:** *This should be accomplished by or under the direct supervision of the Veterans' Registry Physician (VRP). Examination data will be recorded in the veteran's medical record as routinely as done for any other medical examination.* The complete medical history should address the following:

- (a) Family history;
- (b) Occupational history;
- (c) Social history including tobacco, alcohol, drug use;
- (d) Civilian exposure(s) history to possible toxic agents;
- (e) Psychosocial history; and
- (f) Review of systems.

2. The person actually performing the physical examination will be identified by name, signature and title (i.e., Doctor of Osteopathy, Doctor of Medicine, Physician's Assistant, etc.). A physician's countersignature is required if the examiner is other than a physician. Under normal circumstances, VRP will provide such countersignatures.

3. When a Persian Gulf Registry (PGR) examination is done as part of a compensation and pension examination, the physical examination will be done by/or under the direct supervision of the VRP.

4. The physician should be aware of the variety of exposures endemic to the Persian Gulf area. These are listed in Appendix 2C and on VA Form 10-9009A. There has been a wide distribution of major categories of diagnosis reported by VA VRPs; however, no significant variation in occurrence of major categories of medical problems has been identified. We are listing below (for informational purposes) some of the health problems and/or diseases which should be considered:

NOTE: *Unfortunately the International Classification of Diseases, 9th Edition, Clinical Modification (ICD-9-CM) coding system does not give sufficient codes to correctly identify all symptoms and diagnoses. A number of diagnoses that have been reported by Veterans Registry Physicians do not have ICD-9-CM codes for specific identification in the Veterans Health Administration (VHA) s database. To correct this, three new codes have been created. They are: Apnea, Sleep (99001), Chronic Fatigue Syndrome (CFS) (99002), and Fibromyalgia (99003). Make certain these codes are used when completing the Persian Gulf Registry code sheets for patients who have these diagnoses. As a result of inadequate coding designations, there has been confusion between the symptoms (complaints) and diagnoses listed on the PGR code sheets. Example one: Arthralgia (diagnostic code 7194) has been used for the symptom "pain in the joint," where the symptom code 7819 (other symptoms involving nervous and musculoskeletal systems) would be more appropriate. Example two: Symptom ICD-9-CM code 78051 has been designated for insomnia with sleep apnea; however, sleep apnea is more correctly identified as a specific diagnosis which has the new code 99001. Symptom code 78051 may still be used for insomnia with sleep apnea. Example three: Symptom ICD-9-CM code 7807 has been used to designate CFS and the symptoms of malaise and fatigue. The new code 99002 has been determined for CFS, so ICD-9-CM code 7807 should be used for medical complaints of malaise and fatigue*

<u>DIAGNOSIS</u>	<u>International Classification of Diseases ICD-9-CM Code</u>
(1) Amebiasis	006
(2) Apnea, sleep	99001
(3) Arthralgia	7194
(4) Asthma	493
(5) Brill's Zinsser disease (recrudescence typhus)	0811
(6) Bronchiectasis	494
(7) Bronchopneumonia, organism unspecified	485
(8) Brucellosis	023
(8) Chronic obstructive pulmonary disease, not elsewhere classified	496
(9) Chronic bronchitis	491
(10) Chronic Fatigue Syndrome	99002
(11) Chronic Laryngotracheitis	4761
(12) Chronic respiratory conditions due to fumes and vapors	5064
(13) Emphysema	492
(14) Fibromyalgia	99003
(15) Giardiasis	0071
(16) Leishmaniasis	085
(17) Malaria	084
(18) Other and unspecified diseases of upper respiratory tract	4789
(19) Pneumoconiosis due to other silica or silicates	502
(20) Pneumoconiosis, unspecified	505
(21) Unspecified chronic respiratory disease	5199
(22) Respiratory conditions due to unspecified external agent	5089
(23) Sandfly fever (phlebotomus fever)	0660
(24) Schistosomiasis (bilharziasis)	120
(25) Toxoplasmosis	130

<u>DIAGNOSIS</u>	<u>ICD-9-CM Code</u>
(26) Typhoid fever, also carrier - V02.1	0020
(27) Tuberculosis, specify variant(s)	010-018
(28) Viral hepatitis	070
(29) Memory loss	310
(30) Polyneuropathy	356-357
(31) Skin rash	680-709
(32) Adjustment disorder, including Post Traumatic Stress Disorder (PTSD)	309
(33) Alcohol dependence syndrome	303
(34) Drug dependence	304

5. In gathering these data, it is important to determine and record, the:

- a. Time of onset of the symptoms or conditions,
- b. Intensity,
- c. Degree of physical incapacitation, and
- d. Details of any treatment received.

6. Each veteran will be given the following baseline laboratory studies (Phase I Registry Examination):

- a. Complete Blood Count (CBC);
- b. Electrolyte Glucose (SMA-6, SMA-12), or equivalent blood chemistries and enzyme studies; and
- c. Urinalysis.

7. Appropriate additional diagnostic studies should be performed and consultations obtained as indicated by the patient's symptoms and the physical and laboratory findings. **NOTE:** *If individuals have unexplained illnesses, after a Phase I registry examination is performed, a Phase II examination is mandated. (See Ch. 3, App 3A, for instructions.)*

- a. Other diagnostic studies, such as pulmonary function test, sperm counts, should be performed if medically indicated.
- b. Laboratory tests results should be filed in the CHR.

**SAMPLE AND INSTRUCTIONS FOR COMPLETING
VA FORM 10-9009A (JULY 1995), PERSIAN GULF REGISTRY CODE SHEET, PHASE I**

1. General Instructions for completing Department of Veterans Affairs (VA) Form 10-9009A (July 1995).

a. An original code sheet should be prepared and a legible copy submitted to the Office of Financial Management Austin Automation Center (AAC) in accordance with instructions for the initial and first follow-up examinations (if required). After code sheet data has been reviewed and entered into the computerized database at AAC, the AAC will forward these code sheets to the Senior Registry Coordinator (103A), Department of Veterans Affairs, 810 Vermont Avenue, N.W., Washington, DC 20420, for disposition. These code sheets will not be returned to the medical center of origin unless corrections are required.

(1) The original code sheet will be filed in the medical record with any corrections required by AAC. Additional follow-up examinations, as required, will continue to be documented in the Consolidated Health Record (CHR).

(2) A code sheet for additional follow-up examinations will not be prepared or submitted to the AAC with the exception that if a diagnostic code differs from previously submitted code sheets, then a code sheet will be prepared and submitted for entry into the Persian Gulf Registry (PGR).

b. Print clearly using a BLACK ball-point pen or a BLACK felt-tipped pen. Follow instructions carefully to ensure that all data fields are accurately completed. Enter one letter or number per block. **The numeric zero must be slashed "Ø."** For registry coding purposes, use the International Classification of Diseases - Clinical Modification, 9th Edition, (ICD-9-CM) codes. These must be the codes currently in use by AAC.

(1) Part I of the code sheet should be completed in the presence of the veteran.

(2) Parts II and III of the code sheet should be completed at the time of the examination by the Veterans' Registry Physician (VRP). A completed Parts II and III will be returned to Medical Administration Service (MAS) for assignment of the ICD-9-CM codes in appropriate blocks. **NOTE:** *Careful attention should be paid to assigning the correct code for both complaints (symptoms) and diagnosis. ICD-9-CM code 78999, for uncodable complaints (symptoms), should be assigned only after all coding possibilities have been thoroughly explored. The indiscriminate use of ICD-9-CM code 78999 may result in skewed or misleading statistics of minimal value.*

(3) Date all code sheets with current date in the upper right hand corner of VA Form 10-9009A (July 1995).

2. Instructions for Completing Part I (Initial Examination)

a. **Item 1. Blocks 2-7. Facility Number and Suffix.** Enter facility code as listed in MP-6, Part XVI, Supplement No. 4.1, Appendix A. Use the AMIS suffix (BY, BZ, etc.) to indicate your satellite facility. DO NOT USE Q, R, OR S. **NOTE:** *If veteran requests the inclusion of his Department of Defense (DOD) registry examination records in VA PGR, submit code sheet with Facility Number as 999 in Blocks 2, 3 & 4 and indicate actual VA facility number in upper left margin of codesheet.*

b. **Item 2. Blocks 8-33. Last Name of Veteran.** Beginning in Block 8, enter veteran's current last name. If veteran had an earlier last name used during the veteran's Persian Gulf service, e.g., an unmarried woman, leave one space blank after the current name and enter "E." If veteran has had any other later name, leave another blank space (i.e., after "E"), and enter the later name followed by another

blank space and then enter "L." Do not use apostrophe and/or hyphen in the name or skip blocks between the letters of the last name. Skip a block if the last name is followed with Jr., Sr., I, II, III, etc.

c. **Item 3. Blocks 34-48. First Name of Veteran.** Beginning in Block 34, enter veteran's first name.

d. **Item 4. Blocks 49-58. Middle Name of Veteran.** Beginning in Block 49, enter veteran's middle name or initial.

e. **Item 5. Block 59. Type of Examination.** The following transaction type must be entered in Block 59 as appropriate:

A - Initial examination. Veteran's first Persian Gulf examination.

B - To delete an entire initial examination with a noted error, after it has been accepted into the registry, resubmit the original code sheet with a "B" and submit another code sheet with the correct information with an "A." All fields must be completed on a resubmission. The code sheets can be submitted in the same batch. Examples of this usage are incorrect diagnosis, military statistics, Social Security Number (SSN), etc.

C - Follow-up examination. Veteran's second Persian Gulf examination. Additional follow-up examinations, as required, will continue to be documented in the CHR, but a code sheet will not be prepared or submitted to the AAC with the following exception: if a diagnostic code differs from previously submitted code sheets, then a code sheet should be prepared and submitted for entry into the PGR.

D - To delete an entire follow-up PGR examination with a noted error, after it has been accepted into the registry, resubmit the original code sheet with a "D" and submit another code sheet with the correct information with a "C."

E - To submit change in demographics, i.e., change of address or date of birth enter "E" and complete items with name, SSN, date of birth, and address. No other items need to be completed.

I - To include those veterans whose names are not on the PGR but would like their name and address included on a mailing list for the "Persian Gulf Review" newsletter.

X - When a registry participant has been identified and verified as being deceased, enter "X." Complete items with name, SSN, and date of birth. No other items need to be completed.

f. **Item 6. Blocks 60-69. SSN.** Shaded Block 60 is to be used ONLY if a pseudo SSN is being submitted. In this event, the letter "P" will be entered in Block 60. Leave Block 60 blank when the actual SSN is used. Beginning in Block 61 enter the veteran's actual SSN, or pseudo SSN. (See M-1, Part I, Ch. 5, Par. 5.29, for instructions on pseudo SSN assignment.) **NOTE:** *All efforts should be made to obtain veteran's actual SSN.*

g. **Item 7. Blocks 70-75. Date of Birth.** Beginning in Block 70 enter numerical equivalent for the month, day and year in that order (e.g., 01/19/50). All blocks must be completed.

h. **Item 8. Blocks 76-141. Permanent address.**

(1) **Blocks 76-101.** Beginning in Block 76 enter veteran's permanent street address.

(2) **Blocks 102-127.** Beginning in block 102 enter veteran's city or town.

(3) **Blocks 128-132.** Enter zip code of permanent residence (National Zip Code Directory).

- (4) **Blocks 133-136.** Leave Blank (future extended Zip Code).
- (5) **Blocks 137-139.** Enter appropriate county code as listed in M-1, Part I, Chapter 18, Appendix A.
- (6) **Blocks 140-141.** Enter appropriate state code as listed in M-1, Pt. I, Chapter 18, Appendix A.

i. **Item 9. Block 142. Race/Ethnicity.** Enter one of the following codes in Block 142:

- 1 = American Indian or Alaskan Native
- 2 = Asian or Pacific Islander
- 3 = Black, not of Hispanic Origin
- 4 = White, not of Hispanic Origin
- 5 = Hispanic
- 6 = Unknown

j. **Item 10. Block 143. Marital Status.** Enter one of the following codes in Block 143:

- 1 = Married
- 2 = Divorced
- 3 = Separated
- 4 = Widowed
- 5 = Single, Never Married

k. **Item 11. Block 144. Sex.** Enter one of the following codes in Block 144:

- M = Male
- F = Female

l. **Item 12. Block 145. Current Status.** Enter one of the following codes in Block 145:

- 1 = Inpatient
- 2 = Outpatient
- 3 = Incarcerated
- 4 = Active Duty (Outpatient)
- 5 = Active Duty (Inpatient)

m. **Item 13. Block 146. Branch of Service.** If veteran was in more than one branch of service, code the latest Persian Gulf service. Enter one of the following codes in Block 146:

- 1 = Army (including Reserves & National Guard)
- 2 = Air Force (including Reserves & National Guard)
- 3 = Navy (including Reserves)
- 4 = Marine Corps
- 5 = Coast Guard
- 6 = Other (e.g., Public Health Service, National Oceanic and Atmospheric Administration)

n. **Item 14, 14A and 14B. Blocks 147-163. Military Service in Persian Gulf.**

(1) Block 147. Enter one of the following codes:

Y = Yes (If yes, list the dates of veterans last two periods of service in Persian Gulf.)

N = No (If the veteran did not serve in Persian Gulf, the veteran is not eligible for a Persian Gulf Registry examination.)

(2) Item 14A. Enter the numerical equivalent of the month and also two digits of the year of last period of service in Persian Gulf (e.g., from 02/91 to 05/91) in Blocks 148 through 155.

(3) Item 14B. If veteran had two or more periods of service in Persian Gulf, the longest period of service should be entered in Blocks 156 through 163. If only one period of service in Persian Gulf, enter in 14A and leave 14B blank.

o. Item 15, 15A and 15B. Blocks 164-165. In What Area(s) Did Veteran Serve?

(1) Item 15A. Block 164. Enter one of the following codes:

- 1 = Combat Zone
- 2 = Other Land Area
- 3 = Sea Duty

(2) Item 15B. Block 165. If other service is indicated or, if the response is "Don't Know" enter appropriate code in Block 165.

- 4 = Other (Specify i.e., Air Force: Ground or Air Crew, etc.)
- 5 = Don't Know

p. Item 16, 16A-16E. Military Units, MOS and Block 166. MOS-Different Duties .

(1) Item 16A. Military Units. Enter the military unit in which the veteran served. Specify complete unabbreviated title, that is, company, battalion, corps, ship, division, etc., (e.g., Company C, 1st Battalion, 4th Army).

(2) Item 16B. Military Occupational Specialty (MOS): Enter the veteran's MOS.

(3) Item 16C. Block 166. Were actual duties different from MOS? Enter one of the following codes in Block 166: If no, go to Item 16E

- Y = Yes
- N = No

(4) Item 16D. If yes, enter actual duties which were different from MOS on code sheet and in CHR.

(5) Item 16E. Enter the name of unit with which the veteran had the longest and next to longest period of service while in the Persian Gulf.

NOTE: *Items 16A & 16E: These units could be different from the one to which the veteran was assigned if the veteran was on detached duty.*

q. Items 17, 17A and 17B. Blocks 167-182. Last two periods of service (If different from 14A and 14B). Enter the numerical equivalent of the month and the last two digits of the year for the last two periods of service regardless of whether or not they were in the Persian Gulf (e.g., from 12/90 to 04/91 and 9/90 to 11/90). If veteran did not have more than one period of service, leave blank. For active duty military personnel, enter date when service began (e.g., 12/90) and enter nines (e.g., 99/99) to indicate the veteran is still actively serving in the military.

r. Items 18, 18A-18Z1. Blocks 183-216. Veteran's Exposure to Environmental Factors. Enter the following codes in appropriate blocks.

- Y = Yes
- N = No

(1) Item 18A. Block 183. Are you currently smoking cigarettes? If no, go to Item 18D.

(2) Item 18B. Blocks 184-185. If yes, how many years have you been smoking cigarettes? Enter number of years.

(3) Item 18C. Blocks 186-187. If yes, on the average, how many packs are you smoking per day?

(4) Item 18D. Blocks 188. Have you smoked cigarettes in the past? If no, go to Item 18G.

(5) Item 18E. Blocks 189-190. If yes, how many years did you smoke?

(6) Item 18F. Blocks 191-192. If yes, on the average how many packs did you smoke per day?

(7) Item 18G-Z1. Blocks 193-212. While in the Persian Gulf do you believe you were exposed to any of the following? Enter the following codes:

Y = Yes

N = No

U = Unknown

(8) Item 18G. Block 193. Smoke from oil fires?

(9) Item 18H. Block 194. Smoke or fumes from tent heaters?

(10) Item 18I. Block 195. Cigarette Smoke (passive) from others?

(11) Item 18J. Block 196. Diesel and/or other petrochemical fumes?

(12) Item 18K. Block 197. Exposure to burning trash/feces?

(13) Item 18L. Block 198. Skin exposure to diesel or other petrochemical fumes?

(14) Item 18M. Block 199. Chemical Agent Resistant Compound (CARC) paint?

(15) Item 18N. Block 200. Other paints and/or solvents and/or petrochemical substances?

(16) Item 18O. Block 201. Depleted uranium?

(17) Item 18P. Block 202. Microwaves?

(18) Item 18Q. Block 203. Personal pesticide use, including creams, sprays, or flea collars?

(19) Item 18R. Block 204. Nerve gas or other nerve agents?

(20) Item 18S. Block 205. Drug (pyridostigmine) used to protect against nerve agents?

(21) Item 18T. Block 206. Mustard gas or other nerve agents?

(22) Item 18U. Block 207. Ate or drank food contaminated with smoke, oil or other chemical?

(23) Item 18V. Block 208. Ate food other than provided by Armed Forces?

(24) Item 18W. Block 209. Bathed in or drank water contaminated with smoke, oil or other chemical?

(25) Item 18X. Block 210. Bathed in water other than provided by Armed Forces?

(26) Item 18Y. Block 211. Immunization against anthrax?

(27) Item 18Z. Block 212. Immunization against botulism?

(28) Item 18Z1. Other exposures? Enter on code sheet and in CHR.

s. **Items 19A-F. Blocks 213-218 Persian Gulf Experience.** Did you have any of the following experiences while in the Persian Gulf?

(1) Item 19A. Block 213. Did you ever go on combat patrols or have other very dangerous duty? Enter the following codes:

- 1 = No
- 2 = 1-3X
- 3 = 4-12X
- 4 = 13-50X
- 5 = 51+times

(2) Item 19B. Block 214. Were you ever under enemy fire, including, Soviet designed surface to surface missiles (SCUDS)? Enter the following codes:

- 1 = Never
- 2 = less than 1 day
- 3 = less than 1 week
- 4 = 1-4 weeks
- 5 = 4 weeks or more

(3) Item 19C. Block 215. What percentage of people in your unit (your immediate group) were Killed in Action (KIA), wounded or Missing In Action (MIA)? Enter the following codes:

- 1 = None
- 2 = 1-25%
- 3 = 26-50%
- 4 = 51-75%
- 5 = 76% or more

(4) Item 19D. Block 216. How often did you see someone hit by incoming or outgoing rounds? Enter the following codes:

- 1 = Never
- 2 = 1-2X
- 3 = 3-12X
- 4 = 13-50X
- 5 = 51 or more

(5) Item 19E. Block 217. How often were you in danger of being injured or killed (i.e., pinned down, overrun, ambushed, near miss, etc.)? Enter the following codes:

- 1 = Never
- 2 = 1-2X
- 3 = 3-12X
- 4 = 13-50X
- 5 = 51 or more

(6) Item 19F. Block 218. Witnessed chemical alarms? Enter the following codes:

- Y = Yes
- N = No
- U = Unknown

t. **Item 20. Block 219. Veteran's Health** (Veteran's evaluation).

(1) Item 20A. Enter one of the following codes which best describes veteran's health after Persian Gulf Service:

- 1 = Very good
- 2 = Good
- 3 = Fair
- 4 = Poor
- 5 = Very poor

u. **Item 21. Block 220. Veteran's Functional Impairment.**

(1) Item 21A. Enter code which describes veteran's assessment of the veteran's functional impairment, after Persian Gulf Service, using the following scale:

- 1 = No impairment
- 2 = Slight impairment
- 3 = Moderate impairment
- 4 = Severe impairment

(2) Item 21B. Blocks 221-222. How many workdays were lost by veteran due to illness in the past 90 days? Enter number of days lost in Blocks 221-222 (e.g., 8/Ø). If none fill in the blocks with Øs. If the veteran does not work outside the home, annotate this information in item 32, Remarks.

v. **Item 22. Blocks 223-262. Evidence of Birth Defects and Infant Death(s) among veteran's children and problems with pregnancy and infertility.** *NOTE: Where blanks are indicated complete blocks with Øs.*

(1) Item 22A. Blocks 223-224. How many children does the veteran have? If none, enter Øs, and go to 22C.

(2) Item 22B. Blocks 225-226. Birth Defects. *NOTE: Birth defects are any structural, functional, or biochemical abnormality at birth whether genetically determined or induced during gestation that is not due to injuries suffered during birth.* How many of these children were born with birth defects? Enter number of children in Blocks 225-226. If none, go to Item 22C.

(a) Item 22B1. Blocks 227-228. How many of these children were conceived before Gulf service? If none, enter Øs, and go to Item 22B2.

(b) Item 22B1(a). Blocks 229-230. State maternal age at conception of first child conceived before Gulf service. Enter age in Blocks 229-230.

(c) Item 22B2. Blocks 231-232. How many children were conceived during or after Gulf service? Enter number in Blocks 231-232. If none, enter Øs, and go to Item 22C.

(d). Item 22B2(a) Blocks 233-234. State maternal age at conception of first child conceived during or after Persian Gulf service? Enter age in Blocks 233-234.

(3) Item 22C. Blocks 235-241. Infertility (Problems of veteran or spouse becoming pregnant). *NOTE: Infertility=relative sterility defined as inability to conceive after 12 or more months of intercourse without use of contraception when neither spouse is surgically sterilized.* Has veteran or spouse had infertility problems? Enter one of the following codes in Block 235. If none, go to Item 22D.

- Y = Yes
- N = No

(a) Item 22C1. Block 236. Has veteran or spouse had infertility before Gulf service? Enter one of the following codes:

Y = Yes
N = No

If no, go to Item 22C2.

(b) Item 22C1(a). Blocks 237-238. State maternal age during first attempts to conceive. Enter age in Blocks 237-238.

(c) Item 22C2. Block 239. Has veteran or spouse had infertility after return from Gulf service? Enter one of the following codes.

Y = Yes
N = No

If no, go to Item 22D.

(d) Item 22C2(a). Blocks 240-241. State maternal age during first attempts to conceive. Enter age in Blocks 240-241.

(4) Item 22D. Blocks 242-248. Miscarriage(s). **NOTE:** *Miscarriages are spontaneous expulsion of the products of conception before 20 weeks of gestation (spontaneous abortion).* Has veteran or spouse had miscarriage(s)? Enter one of the following codes in Block 242.

Y = Yes
N = No

If no, go to Item 22E.

(a) Item 22D1. Block 243. If yes, has veteran or spouse had miscarriage(s) before Gulf service? Enter one of the following codes:

Y = Yes
N = No

If no, go to Item 22D2.

(b) Item 22D1(a). Blocks 244-245. State maternal age at conception. Enter age in Blocks 244-245.

(c) Item 22D2. Block 246. Has veteran or spouse had miscarriage(s) after return from Gulf service? Enter one of the following codes:

Y = Yes
N = No

If no, go to Item 22E.

(d) Item 22D2(a). Blocks 247-248. State maternal age at conception. Enter age in Blocks 247-248.

(5) Item 22E. Blocks 249-255. Still Birth(s). **NOTE:** *Still births are births after 20 weeks of gestation of an infant who showed no evidence of life after birth.* Has veteran or spouse had still birth(s)? Enter one of the following codes in Block 249:

Y = Yes
N = No

If no, go to Item 22F.

(a) Item 22E1. Block 250. Has veteran or spouse had still birth(s) before Persian Gulf service? Enter one of the following codes in Block 250.

Y = Yes
N = No

If no, go to Item 22E2.

(b) Item 22E1(a). Blocks 251-252. State maternal age at conception. Enter age in Blocks 251-252.

(c) Item 22E2. Block 253. Has veteran or spouse had still birth(s) after return from Persian Gulf service? Enter one of the following codes in Block 253:

Y = Yes
N = No

If no, go to Item 22F.

(d) Item 22E2(a). Blocks 254-255. State maternal age at conception. Enter age in Blocks 253-254.

(6) Item 22F. Blocks 256-262. Infant Death(s). **NOTE:** *Death that occurred within 1 year of birth among babies born alive.* Has veteran or spouse had babies with infant death(s)? Enter one of the following codes in Block 256:

Y = Yes
N = No

If no, go to Item 22G.

(a) Item 22F1. Block 257. Has veteran or spouse had babies with infant death(s) before Gulf service? Enter one of the following codes in Block 257:

Y = Yes
N = No

If no, go to Item 22F2.

(b) Item 22F1(a). Blocks 258-259. State maternal age at conception. Enter age in Blocks 258-259.

(c) Item 22F2. Block 260. Has veteran or spouse had babies with infant death(s) after return from Gulf service? Enter one of the following code in Block 260: If no, go to Item 22G.

Y = Yes
N = No

(d) Item 22F2(a) Blocks 261-262. State maternal age at conception. Enter age in Blocks 261-262.

(7) Item 22G. If a woman veteran reports she was pregnant in the Persian Gulf, record the date of child's birth and hospital of birth on code sheet and in the veteran's CHR to facilitate follow-up, if needed.

3. Instructions for Completing PGR Code Sheet, Part II (Initial Examination). *To be completed by the examining physician)*

a. **Item 23. Blocks 263-270. Date of Examination.** Enter the numerical equivalent for the month, day, and year in that order (e.g., 09/22/1992).

b. **Item 24. Blocks 271-272. Total Number of Veteran's Complaints.**

c. **Item 25, 25A-M. Blocks 273-417. Veteran's Complaints, Month and Year of Onset, Duration in Months, Whether Symptom is Currently Present, and Most Severe Complaint.**

(1) Item 25A-J. Blocks 273-417. Columns: (1) Veteran's Complaints/Symptoms; (2) ICD-9-CM codes; (3) Month and Year of Onset; (4) Duration in months; and (5) State whether symptom is still present. List up to ten major and current symptoms/complaints. If veteran has more than 10, enter most severe. Any additional symptoms should be listed in CHR. **NOTE: MAS coders, use ICD-9-CM "Symptom" codes in first five numbered blocks of each line. For uncodable symptoms use "78999." For no known complaints, use "78000." (All zeros are to be slashed.) However, ICD-9 code 78999 should ONLY be used if all possible codes have been reviewed, and if necessary, seek physician consultation to make a correct choice.**

(2) Item 25A-J(1). Give a narrative description of ten major, current symptoms as stated by veteran.

(3) Item 25A-J(2). Blocks 273-322. MAS coders are to complete the ICD-9-CM codes as they relate to each symptom.

(4) Item 25A-J(3). Blocks 323-382. For each symptom listed in 25A-J, state month and year of onset.

(5) Item 25A-J(4). Blocks 383-402. For each symptom listed in 25A-J, state duration in months that veteran has been experiencing this symptom.

(6) Item 25A-J(5). Blocks 403-412. For each symptom listed in 25A-J, indicate if symptom is currently present, using one of the following codes:

Y = Yes

N = No

(7) Item 25K. Block 413-417. Most Severe Symptom/Complaint. List ICD-9-CM code for most severe symptom (A symptom from Item A-J, which VETERAN considers the most severe; i.e., Chief Complaint).

d. **Item 26, A-S. Blocks 418-435. Diagnostic workup/consultation.** Enter one of the following codes in Blocks 418-435. All blocks must be completed.

1 = No workup. No consultation done.

2 = Workup/consultation done. Unexplained illness.

3 = Workup/consultation done. Diagnosis established.

4 = Workup/consultation done. No diagnosis.

(1) Item 26A. Block 418. Allergy/Immunology.

(2) Item 26B. Block 419. Audiology.

(3) Item 26C. Block 420. Cardiology.

(4) Item 26D. Block 421. Dentistry.

(5) Item 26E. Block 422. Dermatology.

- (6) Item 26F. Block 423. Ear, Nose and Throat.
- (7) Item 26G. Block 424. Endocrinology.
- (8) Item 26H. Block 425. Gastroenterology.
- (9) Item 26I. Block 426. Hematology/Oncology.
- (10) Item 26J. Block 427. Infectious Diseases/Parasitology.
- (11) Item 26K. Block 428. Nephrology.
- (12) Item 26L. Block 429. Neurology.
- (13) Item 26M. Block 430. Occupational Medicine.
- (14) Item 26N. Block 431. Pulmonary.
- (15) Item 26O. Block 432. Psychiatry.
- (16) Item 26P. Block 433. Psychology/Psychometric Testing.
- (17) Item 26Q. Block 434. Rheumatology.

(18) Item 26R. Block 435. Other. Were any additional workups/consultations performed as part of Persian Gulf examination which were not listed in Items 26A-Q. Enter one of the following codes:

Y = Yes
N = No

(19) Item 26S. Specify on code sheet and CHR any additional workups/consultations performed as part of Persian Gulf examination, which were not listed in Item 26A-Q.

e. Item 27, 27A-B. Blocks 436-485. Diagnoses.

(1) Item 27A. List up to ten major definite medical diagnoses on lines 27A-J. The examining physician will select the 10 most significant/serious in the examining physician's opinion, **listing the primary diagnosis in Item A**. The additional diagnosis(es) should be included in patient's CHR. Blocks 436-485 are to be used for ICD-9-CM coding of each diagnosis listed. Leave blank if no diagnosis is made. **NOTE:** *Diagnostic coding assignment will be completed by MAS. DO NOT REPEAT OR LIST SYMPTOM CODE ALREADY LISTED UNDER ITEM 25A-J.*

f. **Item 28. Block 486. No Diagnosis Made.** If no diagnosis is made, enter a "1" in Block 486; otherwise, leave this block blank. This item must be considered in conjunction with Item 27, "Diagnoses." A "1" should be entered for Item 28 only when no diagnosis is given in Item 27 indicating that no significant defect, disease, injury or history of a relevant diagnosis in the past is detected.

g. Item 29, 29A-F. Blocks 487-494. Disposition. Enter one of the following codes in Block 487-494.

Y = Yes
N = No

- (1) Item 29A. Block 487. Examination completed?
- (2) Item 29B. Block 488. Hospitalized at the VAMC for further tests?

(3) Item 29C. Block 489. Hospitalized at the VAMC for treatment?

(4) Item 29D. Block 490. Referred for outpatient care?

(5) Item 29E. Block 491. Referred to private physician, non-VA clinic or non-VA hospital?

(6) Item 29F. Block 492. Biopsy?

h. Item 30. Block 493. Phase I examination, refer to paragraph 5, has been completed and the physician has determined that veteran has unexplained illness. Enter one of the following codes:

Y = Yes

N = No

i. Item 31. Block 494. Has Phase II examination (refer to Ch. 3) been initiated? Enter the following codes:

Y = Yes

N = No

j. Item 32. Remarks. Utilize this section for any additional information (e.g., see par. 1.07).

k. Item 33. Name of Examiner. Print full name.

l. Item 34. Title of Examiner. Full title of Examiner.

m. Item 35. Signature of Examiner. Signature of examiner.

n. Item 35a. Signature of Physician. Signature of VRP.

4. Follow-up Examinations. Instructions for completing Parts I and II. In addition to initial registry submissions, VA Form 10-9009A, Parts I, II and III (if applicable) will be completed in reporting the first follow-up examination, and subsequent follow-up examinations if diagnostic code is different from previous examinations as follows:

a. Items 1-12 must be completed - Control Data.

b. Items 13-22 require no entry, unless you have follow-up data to report in any of these items.

c. Items 23 must be completed.

d. Items 25-26 may be blank unless you have follow-up data to report in any of these items.

e. Item 27-35 must be completed.

March 21, 1996

**M-10, Part III
Change 2
Chapter 2
APPENDIX 2C**

SAMPLE OF COMPLETED VA FORM 10-9009A (JULY 1995), PART I, II & III

March 21, 1996

**M-10, Part III
Change 2
Chapter 2
APPENDIX 2C**

March 21, 1996

**M-10, Part III
Change 2
Chapter 2
APPENDIX 2C**

March 21, 1996

**M-10, Part III
Change 2
Chapter 2
APPENDIX 2C**

REPORTING REQUIREMENTS

1. **Submission.** **NOTE:** *The use of Persian Gulf Code Sheet, VA Form 10-9009A, December 1991, will be discontinued on September 24, 1995. Existing stock must be destroyed. All completed Persian Gulf Code Sheets dated December 1991, and submitted to Austin Automation Center (AAC) on and after September 24, 1995, will be rejected and returned to the submitting VA facility. The use of revised VA Form 10-9009A, dated July 1995, must be implemented on September 25, 1995.* Requirements for the submission of Department of Veterans Affairs (VA) Form 10-9009A (July 1995), Persian Gulf Registry Code Sheet are as follows:

- a. Legible copies of completed code sheets are submitted to the Office of Financial Management Austin Automation Center (AAC), Austin, TX, for data entry into the Persian Gulf Registry (PGR).
- b. Originals are to be maintained in veteran's Consolidated Health Record (CHR).
- c. Code sheets need to be scanned to ensure all required fields are completed.
- d. No medical record documentation should be attached to these code sheets.
- e. Code sheets will not be returned to facility of origin unless corrections are required.
- f. AAC will send copies of code sheets, once entered into the PGR, to the Senior Registry Coordinator, Environmental Agents Service (103A), Department of Veterans Affairs, 810 Vermont Avenue, N.W., Washington, DC 20420, for disposition.

2. **Batching of Code Sheets**

a. Preparation

(1) VA Form 10-9009A (July 1995) code sheets, Parts I through III, are provided in booklet form. If any of the pages are removed, they should be stapled in the upper-left hand corner.

(2) Completed code sheets must be batched in groups of no more than 25.

(3) Facilities and/or a division of a consolidated facility must keep submissions separate, i.e., each batch will include code sheets from one facility. These code sheets should be arranged in numerical order according to the Social Security Number (SSN), i.e., lowest SSN first and highest SSN last).

NOTE: *Corrected code sheets do not have to be batched separately. They can be mailed with the regular code sheets as long as they are from the same facility.*

b. If a veteran has had two examinations within the same mailing period, that is, an initial and a follow-up examination, only the initial examination code sheet should be submitted in the batch. Hold the follow-up examination code sheet until you are certain the AAC has processed and accepted the initial examination code sheet. If submitted simultaneously, an error message may occur.

3. **Transmittal Form** (See App. 2E.)

a. Three copies of VA Form 7252 (formerly VA Form 30-7252), Transmittal Form for the Use in Shipment of Tabulating Data, must accompany each batch of code sheets. One copy must be retained at the AAC and the other copy will be returned by the AAC to the transmitting facility acknowledging receipt of code sheets and the third will include any rejected code sheets and the edit analysis printout, entitled "Transaction Change and Error (Reject) Listing."

b. If there were no examinations or code sheets processed for each month, a transmittal form must be completed indicating "0" for the "Code Sheet Count" and sent to the AAC. This will assist the AAC in maintaining a control on the code sheets transmitted by each facility.

(1) As batches are prepared for submission to the AAC an entry should be made on the batch control log.

(2) Using the control log, assign the appropriate number and record it on the transmittal form.

(a) Begin with batch number 001 for January of each year and continue with sequential numbers throughout the year.

(b) **Example:** If there are 50 code sheets to be submitted to the AAC during the month of January, prepare two batches of 25 per batch, with the control log number 001 and 002.

c. The Persian Gulf control log must consist of the following:

(1) Facility code number,

(2) Batch number assigned sequentially by facility beginning with 001 in January of each year (also to be recorded on transmittal sheet);

(3) Number of code sheets in the batch (also to be recorded on the transmittal sheet),

(4) Date the batch(es) was(were) mailed to the AAC, and

(5) Date the batch(es) and associated edit output was(were) returned from the AAC.

4. Mailing

a. Code sheets must be submitted to the AAC monthly according to the following schedule:

(1) Region 1, the 6th of the month.

(2) Region 2, the 10th of the month.

(3) Region 3, the 14th of the month.

(4) Region 4, the 18th of the month.

b. The mailing address for the AAC is:

Department of Veterans Affairs
Automation Center (200/397A)
ATTN: PERSIAN GULF CLERK
1615 Woodward Street
Austin, TX 78772-0001

c. It is not appropriate to call the AAC in regard to questions on code sheet completion or correction. These questions should be referred to the Veterans Registry Coordinator(s), the Environmental Agents Service, VA Central Office.

d. The AAC will process the data from the code sheets twice each month (10th and 25th). The AAC will return all batches with the printout "Transaction Change and Error (Reject) Listing" to the transmitting facility.

5. Transaction Change and Error (Reject) Listing

a. A computerized printout "Transaction Change and Error (Reject) Listing" will be returned to the transmitting facility with the processed code sheets.

(1) This printout will reflect:

(a) Rejected records, i.e., edit errors identified by an asterisk(*);

(b) Other messages not necessarily rejecting records; and

(c) The number of records inputted, i.e., accepted as well as rejected.

(2) Facilities must verify the number of code sheets sent to the AAC against the printout.

b. Corrections are to be made on the returned code sheet with RED pen or RED felt-tipped pen or a new code sheet can be made with the correction in the appropriate field(s). If a new code sheet is prepared for the return of a correction, do not complete just the corrected fields. **NOTE:** *All of the fields must be completed as if it were an initial input.*

c. Examples of the messages on the listing and the corrective action to be taken are listed as follows:

(1) Message. "This record rejected for edit errors."

Action: Correct error(s) (*) and resubmit code sheet.

(2) Message. "Transaction accepted, initial examination already established at (facility number); transaction will be processed as a follow-up examination for your facility."

Action: AAC will not return a code sheet to the facility since it has been accepted as a follow-up examination. Original code sheet on file at facility should be corrected and card file or computerized record should reflect the facility number where initial examination was performed.

(3) Message. "Transaction accepted but an initial examination is needed. Action Required."

Action: The registry does not contain an initial examination record for this veteran, but the registry has accepted the follow-up examination record that was submitted. Reconstruct, if possible, the initial examination record and submit to the AAC. A code sheet will not be returned to the facility on this transaction since it has been accepted in the PGR as a follow-up examination.

(4) Message. "Duplicate Follow-up Segment."

Action: This message will appear if the examination date on the code sheet submitted on the veteran is identical to an examination date already existing in the registry. There is the possibility of a coding or entry error. Examination date should be verified using the veteran's medical record. If there is a duplicate record, it should be deleted by submitting a code sheet in accordance with instructions for deleting a record.

(5) Message. "No matching initial examination."

Action: When deletion of an initial record in the registry is attempted, the code sheet submitted with a type "B" must have the identical information as on the original record previously accepted into the registry, otherwise deletion process cannot be carried out.

6. Miscellaneous

a. Forms Acquisition. Forms can be obtained from the VA Forms and Publication Depot through local channels. VA Form 30-7252 has been changed to VA Form 7252. The form itself has not been revised.

(1) Facilities can use either form when submitting reports. An initial supply of VA Form 10-9009A (July 1995), has been provided to each facility.

(2) Additional forms can be obtained from the Depot.

b. Reports Control Symbol. Reports Control Symbol (RCS) 10-0860 applies to this reporting requirement.

(1) The original code sheet will be filed in the veteran's CHR with the documentation, i.e., laboratory test results, etc., from the PGR examination and one legible copy sent to the AAC to be entered in the PGR.

(2) If a CHR does not already exist for a veteran, one will be established. A locator card will be created with the establishment of the CHR. **NOTE:** *It is highly recommended that all registry records are maintained in a separate section of CHR where they are easily identifiable for quality monitoring and research availability.*

c. Record Disposition. Refer to Records Control Schedule 10-1, Section XXII, Item No. 136-5 for record disposition (see Medical Administration Service).

d. Records Retention. Refer to Records Control Schedule 10-1 for records retention. Persian Gulf examination information will be made part of the perpetual medical record at medical facilities following the same retention requirements specified for VA CHR's Agent Orange and Ionizing Radiation examinations. This includes:

(1) VA Form 10-9009A (July 1995),

(2) Progress notes,

(3) Laboratory reports,

(4) Patient locator cards, and

(5) Any other documentation that may have been part of a PGR examination.

September 14, 1995

**M-10, Part III
Chapter 2
Change 1
APPENDIX 2D**

**INSTRUCTIONS AND SAMPLE OF COMPLETED VA FORM 7252,
TRANSMITTAL FORM FOR USE IN SHIPMENT OF TABULATING DATA**

1. **Item 1. Addressee.** Department of Veterans Affairs Automation Center (200/397), 1615 Woodward Street, Austin, TX 78722-0001, ATTN: Persian Gulf Clerk.
2. **Item 2. Facility name and address.** - Enter facility name and address.
3. **Item 3. Reply reference.** - Enter facility number and routing symbol.
4. **Item 4.** Leave blank.
5. **Item 5. Number of packages.** - Enter number of batches.
6. **Item 6. Dispatch Date.** - Enter date submitting to the Office of Financial Management Austin Automation Center (AAC).
7. **Item 6a. Final Batch.** - Leave blank.
8. **Item 7. Official Responsible for Shipment.** - Enter name, title and FTS telephone number of individual responsible for transmitting code sheets to the AAC.
9. **Item 8. Tabulating Data.**
 - a. Column A. Enter Records Control Symbol number 10-0860.
 - b. Column B. Job Number. Enter "1Ø" in first segment and "2ØA1" in second segment.
 - c. Column C. Description.
 - (1) First line enter "PERSIAN GULF;"
 - (2) Second line enter "Facility Number;"
 - (3) Third line enter "Batch Number;"
 - (4) Fourth line enter "Code Sheet Count;" and
 - (5) Fifth line enter "Cumulative Count." **NOTE:** *This figure should be the total number of veterans who have had registry examinations since the onset of the Persian Gulf Registry Program in 1992.*
 - (d) Columns D and E. Leave blank.
10. **Item 9. Remarks.** Enter number of VA Form 10-9009A's uly 1995).

SAMPLE OF COMPLETED VA FORM 7252

August 8, 1995

**M-10, Part III
Chapter 2
APPENDIX 2E**

**INSTRUCTIONS AND SAMPLE FORMAT FOR COMPLETION OF BI-MONTHLY REPORT ON PERSIAN GULF
WAR VETERANS REGISTRY
EXAMINATIONS (RCS 10-0860)**

A bi-monthly report is required from all Department of Veterans Affairs (VA) facilities providing up-to-date statistical information on Persian Gulf Registry (PGR) examinations. Instructions are provided below for the completion and submission of this report.

1. **Date of Report.** Each report should include the date the report was prepared and submitted to the following address:

2. **Mailing Address.** This report should be transmitted to the following address:

Department of Veterans Affairs
Environmental Agents Service (131)
ATTN: Persian Gulf Coordinator
810 Vermont Avenue, N.W.
Washington, DC 20420

3. **Mailing Date.** This report should be sent to the above address NO LATER THAN 5 WORKING DAYS FOLLOWING THE END OF EACH BI-MONTHLY REPORTING PERIOD.

4. The following statistical information is required (see sample 2F-3 and 2F-4).

a. **Initial Examination.** (The first physical examination of the Persian Gulf veteran.) List the total number of completed initial examinations performed during the current 2-month reporting period. **NOTE:** *A completed code sheet has already been sent to Austin Automation Center (AAC) which was completed for the purpose of entering a Persian Gulf veteran into the PGR. This count should be verified with the computerized or card file records maintained at each facility (see par. 2.04) describing the computerized or card file requirement.*

b. **Cumulative Initial Examinations.** The total number of cumulative initial examinations listed in the previous bi-monthly report.

c. **Cumulative Initial Examination.** The total number of "first-time" examinations performed by the medical facility since the beginning of the PGR in 1992. This number should include the current month's initial examinations (par. 4a) plus the sum of the previous month's cumulative initial examinations (par. 4b). **NOTE:** *Examinations performed by satellite outpatient clinics should be included in the total cumulative figure for VA medical center of jurisdiction. Justification for exceptions to this requirement should be directed to EAS (131), VHA Headquarters. Independent outpatient clinics should report in a manner similar to VA medical centers.*

d. **Initial Incomplete Examinations (In process).** The total number of incomplete (code sheet(s) that has/have not been sent to AAC) initial examinations in process during the period of the current report.

e. **Follow-up Examinations.** (A first-time examination subsequent to the initial examination-a completed initial examination code sheet has been sent to AAC.) The total number of follow-up examinations during the period of the current report.

f. **Cumulative Follow-up Examinations.** The total number of follow-up examinations performed by the medical facility since the beginning of the registry in 1992. This total should be the sum of the previous months' cumulative follow-up examination total and the current bi-monthly follow-up examinations.

g. **Follow-up Examinations in Process.** The total number of follow-up examinations being processed (completed code sheet(s) has/have not been sent to AAC).

h. **Pending Examination Appointments.** The total number of initial Persian Gulf examinations for which appointments have been scheduled beyond the end of the bi-monthly report period. **NOTE:** *This is not cumulative and applies to the current bi-monthly report.*

i. **Next Appointment Date.** Indicate the next available appointment date.

j. **Number of Veterans Failing to Keep an Initial Examination Appointment.** The total number of veterans who failed to keep a scheduled appointment during the bi-monthly reporting report. **NOTE:** *This is not cumulative and applies to reporting period only.*

k. **Comments or Problems Regarding Pending Examination Appointments.** Problems or challenges should be documented with comments regarding examination workload. An explanation and action plan to alleviate delays should be provided in situations where a facility has 50 or more examinations pending, and/or the next available appointment is more than 30 days beyond the date of request. If statistics have been adjusted due to AAC acceptance of code sheets, the message "Cumulative statistics adjusted per transaction acceptance at AAC" need to be included in this paragraph.

l. **Name and Telephone Number:** The name and telephone number of the person preparing the report must be indicated.

**SAMPLE FORMAT FOR BI-MONTHLY REPORT ON PERSIAN GULF VETERANS
(RCS-10-0860)**



**DEPARTMENT OF VETERANS AFFAIRS
Medical Center
Anywhere, USA 85012**

In Reply Refer To:

August 7, 1995

Department of Veterans Affairs
Environmental Agents Service (131)
ATTN: Persian Gulf Coordinator
810 Vermont Avenue, N.W.
Washington, DC 20420

SUBJECT: Bi-monthly Report of Persian Gulf War Veteran Registry Examinations,
(RCS-10-0860) - Period Ending July 31, 1995 (Station #600)

The subject report is submitted for the 2-month period ending July 31, 1995:

- a. **Initial Examination (Current Bi-Monthly Reporting Period):**
List total number of completed initial examinations performed for 2-month period ending July 31, 1995 (i.e. total number of Persian Gulf Registry code sheets submitted to Austin Automation Center (AAC): 100
 - b. **Cumulative Initial Examinations from Previous Bi-Monthly Report:** +450
 - c. **Cumulative Number of Completed Initial Examinations Performed Since Onset of Program (August, 1992):**
Total of numbers listed in Paragraphs 1-a and 1-b. 550
- Note: This should be the total number of all initial examination code sheets submitted to AAC since onset of program. If code sheets have not been sent to AAC, do not include in this total.*
- d. **Initial Incomplete Examinations (In process):**
Total number of initial (incomplete) examinations in process: (code sheets have not been sent to AAC): 75
 - e. **Follow-Up Examinations (Code Sheets Sent To AAC):**
Total number of follow-up examinations performed for current reporting period (follow-up examinations are those performed subsequent to the initial examination where a completed code sheet for an initial examination has been sent to AAC): 15
 - f. **Cumulative Follow-up Examinations:**

Includes the total of follow-up examinations performed (this total includes the number listed in above (par. 1-e) and all follow-up examinations previously reported since August, 1992): 75
 - g. **Follow-up Examinations in Process:**

Total number of follow-up examinations in process (code sheets have not been sent to AAC during this reporting period): 12

h. Pending Examination Appointments:

Total number of initial examinations for which appointments have been scheduled beyond the end of the bi-monthly report period: 20

i. The next Available Appointment Date: 8/10/95

j. Number of Veterans Failing to Keep an Initial Examination Appointment:

Total number of veterans who failed to keep a scheduled appointment during the current bi-monthly reporting period. This is not cumulative. 10

k. Comments/problems regarding pending examinations: None

l. The name, address and telephone number of the person preparing this report:

(Signature)

John Doe
Medical Center Director

EXAMPLES OF PERSIAN GULF REGISTRY FOLLOW-UP LETTERS

SAMPLE PERSIAN GULF REGISTRY FOLLOW-UP LETTER
(MEDICAL PROBLEMS INDICATED)



DEPARTMENT OF VETERANS AFFAIRS
Medical Center
Anywhere, U.S.A. Zip

In Response Reply To:

(Date)

(Name/Address)

Dear _____:

We sincerely appreciate your recent participation in the Department of Veterans Affairs (VA) Persian Gulf Registry. This effort should prove to be helpful in assisting us to serve you and other veterans who are concerned about the possible health problems which may have resulted from service in Southwest Asia during the Persian Gulf War.

As discussed at the conclusion of your visit, results of your examination and laboratory tests showed certain problems (optional--these findings may be described in lay terms). In view of these findings, we have scheduled you for treatment of these health problems on (date). If for any reason you cannot keep this appointment, please call (telephone number) at the earliest possible time to cancel and reschedule.

The results of your examination will be maintained by VA and will be available for future use as needed. If you have any questions or concerns about your Persian Gulf Registry examination, please contact the Veterans' Registry Coordinator at (telephone number) for assistance.

Whether you are entitled to cost-free treatment or will be responsible for partial co-payment will be determined by your income and other factors unless the VA determines that your health problems are service connected. You may wish to file a claim for compensation to establish possible service connection. The injury or illness need not have been incurred in combat; the law requires only that a disease or disability was incurred or aggravated during military service.

Please remember that this examination does not automatically initiate a claim for VA benefits. If you wish to file a claim, please contact your nearest VA Regional Office. In your area, the Regional Office is located at (address). Their telephone number is (telephone number). If you need any further assistance, you may contact a Veterans' Benefits Counselor by calling the VA toll-free telephone number 1-800-827-1000.

An outreach program has been implemented by which VA notifies all individuals listed in the Registry of significant VA activities, including the health consequences of military service in the Persian Gulf theater of operations during the Persian Gulf War. You will be receiving a "Persian Gulf Review" which is published periodically by VA's Environmental Agents Service. A copy of this "Review" is enclosed for your reference.

We trust this information is helpful to you. Once again, your participation in the registry is appreciated.

Sincerely,

(Signature)

Name of Veterans' Registry Physician

Enclosure

**SAMPLE PERSIAN GULF REGISTRY FOLLOW-UP LETTER
(NO MEDICAL PROBLEMS INDICATED)**



**DEPARTMENT OF VETERANS AFFAIRS
Medical Center
Anywhere, U.S.A. Zip**

In Response Reply To:

(Date)

Name/Address

Dear _____:

We sincerely appreciate your recent participation in the Department of Veterans Affairs (VA) Persian Gulf Registry. This effort should prove to be helpful in assisting us to serve you and other veterans who are concerned about the possible health problems which may have resulted from service in Southwest Asia during the Persian Gulf War.

As discussed at the conclusion of your visit, results of your examination and laboratory tests indicate that there are no detectable medical problems. At this time you have no reason to be concerned about any adverse health effects resulting from your service in the Persian Gulf. However, in the future if you have a medical problem, I would encourage you to seek the help and advice of your nearest VA medical center or outpatient clinic. You may reach us at (telephone number).

The results of your examination will be maintained by VA and will be available for future use as needed.

Please remember that this examination does not automatically initiate a claim for VA benefits. If you wish to file a claim, please contact your nearest VA Regional Office. In your area, the Regional Office is located at (address). Their telephone number is (telephone number). If you need any further assistance, you may contact a Veterans' Benefits Counselor by calling the VA toll-free telephone number 1-800-827-1000.

An outreach program has been implemented by which VA notifies all individuals listed in the Registry of significant VA activities, including the health consequences of military service in the Persian Gulf theater of operations during the Persian Gulf War. You will be receiving a "Persian Gulf Review" which is published periodically by VA's Environmental Agents Service. A copy of this "Review" is enclosed for your reference.

We trust this information is helpful to you. Once again, your participation in the registry is appreciated.

Sincerely,

(Signature)

Name of Veterans' Registry Physician

Enclosure