

K2 Community Forum – Open questions & responses

1. Are there any Presumptive conditions for K2?
 - a. Yes. Under the PACT Act there are over 300 disease and cancer presumptions. More information can be found at VA's Public Health K2 website and at VA's PACT Act official website.
 - b. Links to these and other websites have been provided in formal communications and are displayed.

2. What do we know about the potential toxins and effects? Do you have any idea of a dose/response relationship?
 - a. The contaminants identified at K2 and their levels from area sampling (air, water, soil, and soil gas samples) have been documented by DoD (link to briefs) and evaluated by the Agency for Toxic Substances and Disease Registries in their *K2 Contaminants of Concern* report (link).
 - b. The *K2 Contaminants of Concern* report also indicates the health effects that may be associated with each contaminant with sufficient exposure.
 - c. Exposure assessments at the individual level are required to establish a dose-response relationship. The exposure assessments from K2 are based on air, water, and soil samples, not individuals.

3. What is the VA doing to capture and analyze data of service members who served at K2 and the uniquely high incidents of kidney disease and cancers? What extraordinary services is the VA planning to provide, including screenings and treatment?
 - a. The K2 Surveillance Program has identified those who deployed to K2. We have reached out by postal mail and email to all K2 Veterans and Service members for whom we have address information. We have and will continue to encourage the sharing of these letters and emails with your K2 colleagues for whom we may not have contact information. Additionally, our K2 website provides up-to-date information on K2.
 - b. At the present time, 22 cases of kidney cancer have been identified, and the rate of kidney cancer is no different in the K2 cohort from either the OEF deployed or OEF non-deployed comparison groups.
 - c. There are no special tests that screen for military environmental exposures. VA advises that the U.S. Preventive Services Task Force Guidelines for screening be followed. Screening and treatment of diseases and cancers follow the same clinical guidelines regardless of the cause. We encourage all Veterans to enroll in VHA health care and to seek care for their health concerns promptly.

4. I need to know why K2 and Camp Stronghold Freedom in Mazer-e-Sharif, Afghanistan are not both included in the Burn Pit Registry that the VA and the DOD use to qualify Soldiers for burn pit lung damage. I served in K2 in January 2003 until I was involuntarily transferred to Camp Stronghold Freedom at the Mazer-e-Sharif airport to conduct Mossi for the United Nations Hospital located there. I supervised a burn pit everyday where we burned human remains from the hospital and many other items not identified to use. Everything was in red toxic contaminated trash bags from the hospital. Why is this site not included in the Burn Pit List of sites so Soldiers who served there can receive benefits that other Soldiers receive because they were in one of listed sites for hazards?
 - a. Uzbekistan was added as an eligible country location for participation in the Airbourne Hazards and Open Burn Pit Registry (AHBPR).
 - b. The purpose of the AHBPR is research; it is not for care or treatment. Enrollment in the AHBPR is not required for VHA health care or for benefits.
 - c. K2 Veterans are covered by the PACT Act, which includes over 300 cancers and other presumptive conditions,
 - d. We encourage all K2 Veterans to enroll in VHA health care to have all health concerns addressed in a timely manner.
 - e. VA encourages K2 Veterans to submit a claim with VBA for health conditions that a Veteran believes may be related to military service. Conditions not covered under PACT Act are evaluated on a case-by-case basis.
5. Lack of communication from the Dept of Veterans Affairs to K2 Veterans.
 - a. VA has reached out to K2 Veterans and Service members by postal mail and email for whom we have contact information.
 - b. Additionally, VA maintains several websites with information specific to K2 as well as the PACT Act, how to enroll in VHA health care, and where and how to submit benefits claim.
 - c. VA also uses social media to send messages about K2 benefits.
6. How are you tracking service members who were at K2? I only know about this because I follow a Facebook group dedicated to service at K2. I have submitted proof I was at K2 in pervious (*sic*) claims, and I did not receive a letter informing me of this event. I live in Germany how will I get these tests done?
 - a. Working with our DoD colleagues and other VHA and VBA offices, VA has reviewed available deployment data to identify everyone that deployed to K2.
 - b. VA is aware that deployment data for special operations forces and those in the Intelligence Community remain classified, which makes it difficult for us to confirm a K2 deployment for these Veterans.

- c. Initially VA identified 15,035 individuals that deployed to K2 with about 2,700 that we could not confirm because they remained on active duty and/or were special operations/Intelligence Community.
 - d. A recent assessment of K2 deployment has identified 1,000 additional K2 deployers. VA will reevaluate the K2 deployment roster prior to each data extraction and update the K2 Surveillance Program roster.
 - e. VA is pleased that you found out about the K2 Community Forum on the Facebook page and that you are attending today.
VHA/VBA maintains contact information (postal mailing address and email) for Veterans but recognizes that while the information covers the majority of Veterans, there may be some information that is incomplete and does not cover every K2 Veteran; this is why the websites, social media, and VSO groups are so important.
 - f. As a Veteran living or traveling abroad, you can receive medical care for VA service-connected disabilities through VA's Foreign Medical Program. Under this program, VA assumes payment responsibility for the necessary treatment of service-connected disabilities. You can visit VA's Foreign Medical Program page for more information. There are regional toll-free phone numbers on this page that you can call for additional assistance. Please see <https://www.va.gov/health-care/foreign-medical-program/> for more information.
7. What are the physical conditions with a statistically significant increase in percentage of occurrences over those of similar age, situation, and circumstances of non-military American civilians?
- a. The standardized mortality ratios presented earlier compare mortality rates in a target population (K2) to the general population.
 - b. Currently, there is no increased all-cause, disease-specific mortality in the K2 cohort compared to their peers in the general US population.
 - c. We are currently assessing specific cause of death like those reported earlier. These findings will be shared when completed.
8. What conditions have linked to K2, exposure.
- a. At present, there is no evidence to suggest that deployment to K2 is associated with an increase in adverse health outcomes.
 - b. Because the K2 cohort is relatively young and VA only now has an intermediate duration of follow-up, these initial findings are not definitive and will continue to be monitored.
 - c. The K2SP is ongoing and will re-evaluate morbidity and mortality over the next 10+ years. Additionally, the K2SP is designed to allow for rapid response to any new health concerns that may emerge over the life the K2SP.

9. Local community building seminar? To allow everyone else who got the "K2 Veteran" letter an opportunity to have a local meet and greet or virtual meeting space. I think may facilitate better understanding about the past.
 - a. The K2 Veteran Listening Session held on June 18, 2024, was designed for this purpose.
 - b. Additional sessions are planned for the future, and the K2 community will be notified when meetings are scheduled.

10. What efforts are being made to reach out to the Service Members/Civilians stationed and inform them of the hazards they were exposed to? What specific medical tests does the VA recommend are they implementing them, why or why not? Can Veterans of K2 get more frequent Cancer or more in-depth Cancer screenings.
 - a. The K2 community, Veterans, and VSOs are contacted directly via postal mail and emails (for those we have valid contact information) to inform them of issues related to K2, upcoming listening sessions, and Community Forums to present findings. Civilians are covered under Department of Labor and DoD contractual obligations for the contracted entity.
 - b. Notifications of these events are also posted on RallyPoint and social media platforms as well as VA's K2 website.
 - c. There are no K2-specific or special military environmental exposure tests for the screening and treatment of cancers and other diseases. VA advises that the U.S. Preventive Services Task Force Guidelines for screening be followed, and in some cases.
 - d. K2 Veterans with a health concern, whether related to K2 or other military service, are encouraged to enroll in and seek care within the VHA healthcare system for evaluation and intervention if needed.

11. 1) What toxins were detected at Karshi-Khanabad, and when? 2) What was done about the toxins?
 - a. The contaminants documented at K2 can be found in the declassified site survey reports here: [K2 Airbase Exposures- Defense Centers for Public Health - Aberdeen](#) .
 - b. Additional information on contaminants at K2 can be found on VA's K2 website here: [K2 Contaminants.pdf \(va.gov\)](#).
 - c. Remediation efforts are described in the K2 site survey reports noted above.

12. What is the known extent of damage made to service members who served in K2 during this time? I came back worse, with issues I've been having to live with for the last 20 years to have them dismissed by the VA time and time again. I

would like to know what other medical issues have been reported and dismissed by other service members.

- a. To date, analyses from the K2 Surveillance Program have not identified an increased health risk among the K2 population compared to similar Veterans that deployed to only OEF, similar Veterans that served but never deployed to anywhere in SW Asia.
- b. The K2 Surveillance Program is ongoing and will reassess disease outcomes and deaths in the K2 population over the next 10+ years.
- c. You are encouraged to submit a claim with the Veteran Benefit Administration for any health condition that you believe is related to your military service. There are over 300 presumptive conditions under PACT Act that K2 Veterans are eligible for. And if your condition is not included in the PACT Act presumptions, your case will be properly evaluated.

13. Depleted uranium.

- a. Depleted uranium (DU) was detected at K2 at low levels that were not a health risk.
- b. As of JUL 2024, 340 uranium tests (urine analysis which is the gold standard measure) have been completed. This test can distinguish between enriched and depleted uranium. Results from all 340 tests have been negative for depleted or enriched uranium.

14. Can any of your findings or illnesses be passed on to a child if they were born after arriving home from K2?

- a. This may be theoretically possible but would require the parent to have had substantial exposure to a contaminant that has been linked to birth defects in the scientific and medical literature. In such cases, we would have expected to see a health effect in K2 Veterans as well, which we have not seen to date.
- b. The National Academies of Sciences Engineering and Medicine (NASEM) have reviewed birth defects for exposures in the Gulf War and Health series Volume 11. An association of birth defects was found for infectious diseases such as measles and brucellosis, but not for military environmental exposures. Spina bifida, a birth defect that may cause lower body paralysis is a covered benefit for Agent Orange, but this determination was since rescinded, though the benefit remains.
- c. Unfortunately, we do not have data on all the births of K2 Veterans following their deployment. Without a national birth defects registry with information on all births, we are unable to assess if a birth defect(s) that might be related to the parent's K2 experience.

15. What chemicals/bio-hazards/radiation elements have been found at K2?

- a. See the following web sites for a listing of contaminants detected at K2.

- b. [K2 Airbase Exposures- Defense Centers for Public Health - Aberdeen](#)
- c. [Karshi Khanabad \(K-2\) Air Base - Public Health \(va.gov\)](#)

16. How this program works and are there benefits involved for me and my loved ones?

- a. The K2 Surveillance Program is designed to assess the health effects associated with service at K2.
- b. The benefit of the K2 Surveillance Program will be to establish what health conditions (diseases and cancers) are associated with service at K2 and will be used to in the new presumptive decision process mandated under PACT Act.

17. What hazard has been determined existent from the surrounding fields that were barricaded with barbed wire that had NBC warning signs affixed?

- a. See the following web sites for a listing of contaminants detected at K2.
- b. [K2 Airbase Exposures- Defense Centers for Public Health - Aberdeen](#)
- c. [Karshi Khanabad \(K-2\) Air Base - Public Health \(va.gov\)](#)

18. Are there additional benefits to being included in the K2 Veteran Forum?

- a. The K2 Community Forum is informational and designed to keep the K2 community up to date on progress of the K2 Surveillance Program and DoD's efforts to understand the potential health effects of serving at K2.
- b. Additionally, should there be any changes or updates to benefits, new presumptions, of healthcare services these will be presented as well.

19. Is there already a list of presumptive conditions and if so, what are the dates of service?

- a. Under PACT Act there are over 300 presumptive conditions. Service at any time at K2 is covered.
- b. This link provides more details on the presumptive conditions covered under PACT Act and how to apply for benefits: <http://www.VA.gov/PACT>.

20. 1/20 SFGA provided a letter to its members of toxic exposures that members were exposed to and referenced another classified document that list the exact substances it's membered were exposed to. Do you have a copy of either the letter or report and how do any of your study's findings align with the substances listed on the report?

- a. See the following web sites for a listing of contaminants detected at K2.
- b. [K2 Airbase Exposures- Defense Centers for Public Health - Aberdeen](#)
- c. [Karshi Khanabad \(K-2\) Air Base - Public Health \(va.gov\)](#)
- d. The health outcomes assessed in the K2 Surveillance Program were selected based on known health effects associated with the contaminants identified at K2.

21. Breathing troubles.
- We encourage all K2 Veterans with a health concern, whether related to K2 or not, to seek care as soon as present.
 - If you are not currently enrolled in VA health care, you can initiate the process at this site: [Apply For Health Care | Veterans Affairs \(va.gov\)](#).
22. I was there when K2 was stood up. We would pass an area with antifreeze green type liquid that had seeped from the ground. We would kid that we all would be glowing someday but no one did anything. It was quite a while later that I found out they finally did a core sampling and found contamination. This does not make any one of us happy and it concerns me and my future health.
- More can be found on the contaminants detected at K2 at these links.
 - [K2 Airbase Exposures- Defense Centers for Public Health - Aberdeen](#)
 - [Karshi Khanabad \(K-2\) Air Base - Public Health \(va.gov\)](#)
 - The K2 Surveillance Program is designed to track and assess the possible adverse health effects of serving at K2.
 - Findings are shared at the K2 Community Forums, on VA's K2 website, as well as through other direct and indirect communications with the K2 community.
23. How does this affect your VA rating if you already have a 100%.
- A rating of 100% is the maximum rating. You are encouraged to submit claims for all conditions even if currently at a 100% rating.
24. I was the operations officer responsible for building the K2 Force Provider base, starting in November 2001. My team found evidence of nerve, blister, and blood agents. Later, a TEU team from the States came and said their test results were negative, which conveniently matched what the President of Uzbekistan had just said. And now K2 is a place where toxic substances are causing problems for Veterans who served there. What can you say publicly about the existence of chemical agents that we found in the old Soviet aircraft bunkers we operated and slept in?
- DoD is authoritative source for determining the contaminants that were at military bases and installations.
 - Reports from the environmental site surveys conducted during the K2 occupation have been declassified and can be found at this link: [K2 Airbase Exposures- Defense Centers for Public Health - Aberdeen](#)
25. A lot of us were deployed to k2 and had to dig in the ground and lay in that depleted uranium for weeks. I'm personally having anomalies on the skin level and I'm wondering what extensive radiation testing are available to veterans?

The va has yet to schedule me to be tested and I have been saying this since 2006. I'm a oef1 veteran.

- a. There is no specific "radiation testing", but all K2 Veterans are eligible for a uranium urine analyses to test for exposure to enriched and depleted uranium free of charge. This test can be arranged by your primary care provider.
 - b. You can also schedule an appointment to be tested with your local Environmental Health Coordinator:
<http://www.publichealth.va.gov/exposures/coordinators.asp>.
 - c. VA has completed 387 uranium tests, and all have been negative.
26. what toxins that were found at K2 should a Veteran who was stationed at K2 be concerned with.
- a. More can be found on the contaminants detected at K2 at these links.
 - b. [K2 Airbase Exposures- Defense Centers for Public Health - Aberdeen](#)
 - c. [Karshi Khanabad \(K-2\) Air Base - Public Health \(va.gov\)](#)
27. Have there been any results from VA about tremors and or Parkinson's related to the area?
- a. We have included neuropathies and Parkinson's Disease in evaluations by the K2 Surveillance Program.
 - b. At this time, there is not an increased risk for these conditions in the K2 population.
 - c. Given the young age of the K2 population and the intermediate amount of follow-up (about 20 yrs.) more time may be needed to detect these conditions as they typically present in the late 50's and 60's.
 - d. The K2 Surveillance Program will repeat analyses at regular intervals over the next 10+ years to account for this.
28. Is VA working with Congress to update the PACT Act to include Neurological conditions. My understanding is neurological issues were in the original version of the PACT Act then striped out.
- a. We have included a broad range of neurologic conditions in evaluations by the K2 Surveillance Program.
 - b. At this time, there is not an increased risk found for these neurologic conditions in the K2 population.
 - c. Given the young age of the K2 population and the intermediate amount of follow-up (about 20 yrs.) more time may be needed to detect these conditions as they typically present in the late 50's and 60's.
 - d. The K2 Surveillance Program will repeat analyses at regular intervals over the next 10+ years to account for this.
29. Do you have lists of things that this exposure cause on the body?

- a. More can be found on the contaminants detected at K2 at these links.
 - b. [K2 Airbase Exposures- Defense Centers for Public Health - Aberdeen](#)
 - c. [Karshi Khanabad \(K-2\) Air Base - Public Health \(va.gov\)](#)
 - d. The K2 Surveillance Program is designed to address your question. We are evaluating a broad range of cancers and diseases. At this time, we do not see an increased risk in any of the diseases and cancers evaluated.
 - e. Given the young age of the K2 population and the intermediate amount of follow-up (about 20 yrs.) more time may be needed to detect these conditions as they typically present in the late 50's and 60's.
 - f. The K2 Surveillance Program will repeat analyses at regular intervals over the next 10+ years to account for this.
30. Was anyone affected with skin conditions at K2?
- a. We have no evidence to date suggest an increased risk of skin conditions in general in those deployed to K2.
 - b. We did observe a slightly increased risk for all skin cancers combined. However, this most likely a consequence of sun exposure and not so much the contaminants documented at K2.
31. Were there any skin and mental problems after K2 from other members?
- a. We have no evidence to date suggest an increased risk of skin conditions in general in those deployed to K2.
 - b. We did observe a slightly increased risk for all skin cancers combined. However, this most likely a consequence of sun exposure and not so much the contaminants documented at K2.
 - c. Mental or psychiatric outcomes such as PTSD, depression, or anxiety, etc. were not evaluated as these are more likely related to being in a stressful combat environment and not the contaminants documented at K2.
32. Comment: I arrived in K2 October 2001 as the Chief of Contracting. As we started constructing "tent village," during excavation, the ground started fuming and liquid substances were exposed. Being an Environmental Contracting Officer, I immediately had the area cordoned off and a 4' dirt cap placed over area until testing could be done. Results from testing confirmed there was chemical, nuclear and radiological contamination. This contaminated area was one of many, and unfortunately, the right means were not put in place to protect military members who had "boots on the ground." To complicate matters, when it rained, the contamination spread, and there was no protective gear issued or required to be worn. Further, the garbage/burn pit was just outside the major ECP to K2 and was operated by Uzbekistan military and local contractor. The burn pit was active every night during fair weather. Exposure to smoke and smells were a constant.

- a. Thank you for sharing your experience at K2. DoD has documented a number of contaminants at K2. While depleted uranium (the least radioactive form of uranium) was documented, there is no evidence to suggest nuclear or radiological contamination of the K2 site.
 - i. Mined uranium/Natural uranium (U) consists of three isotopes: ~99.3% U238, 0.7% U235 and < 0.01% U234. U235 is the most radioactive form. U238 is weakly radioactive.
 - ii. Depleted Uranium (DU) remains after the more radioactive components/isotopes are removed from natural uranium.
 - iii. DU is 40% less radioactive than natural uranium. It is 1.67 times as dense as lead; only slightly less dense than gold.
 - iv. DU is used for tank armor, armor-piercing bullets and as weight to help balance aircraft.
 - v. “Yellowcake” is a processing step after uranium has been mined, but before enrichment. Yellowcake is >99% U238; it has very low radioactivity; like naturally occurring uranium.
 - vi. Enriched uranium (EU) is 3-5% U235 after concentration. Used in reactors.
- b. More can be found on the contaminants detected at K2 at these links.
- c. [K2 Airbase Exposures- Defense Centers for Public Health - Aberdeen](#)
- d. [Karshi Khanabad \(K-2\) Air Base - Public Health \(va.gov\)](#)
- e. A wide variety of respiratory outcomes are included in the K2 Surveillance program. To date, we do not see an increased risk in these respiratory outcomes in the K2 cohort compared to similar Veterans that deployed elsewhere as part of OEF or similar Veterans that served during the K2 occupation but did not deploy to anywhere in SW Asia.

33. Why has there been so little public discourse on the risks associated with service at Karshi Khanabad? I was one of the first to live there in 2001-2002 as part of Task Force Dagger, and I had to hear about this event from a friend. How are people like me supposed to go back 20 plus years and link our current disabilities to that location? The only record of my service in K2 is my combat tour award.

- a. We have worked closely with our DoD colleagues to identify all 15,000+ Veterans that deployed to K2. Outreach to these Veterans for whom we have mailing, and email addresses began over three years ago in earnest.
- b. Outreach increased dramatically following passage of the PACT Act to ensure they are aware of the benefits they are eligible for.
- c. Further information about the contaminants at K2, efforts by VA and DoD as to what they are doing to address health concerns in those that deployed to K2 have been provided through Community Forums, social media, and on our websites.
- d. [K2 Airbase Exposures- Defense Centers for Public Health - Aberdeen](#)

- e. [Karshi Khanabad \(K-2\) Air Base - Public Health \(va.gov\)](#)
 - f. Representatives from the Veteran Benefits Administration have been reaching out to K2 Veterans that Camp Stronghold Freedom Foundation shared with us to address issues with their benefits claims.
 - g. The VA has created a K2-specific workgroup to further ensure timely communication about healthcare and benefits as well as progress with ongoing efforts to assess the health concerns in the K2 population.
34. As an initial occupier of K2 for the invasion, is there much data on those of us in 5th Special Forces who established used the smaller TF Dagger compound in close proximity to the depleted uranium burial location and those soldiers that have died from cancers?
- a. We did evaluate whether the early deployers to K2 (prior to Jan 2002) that were there before remediation efforts implemented had a higher risk of disease or cancers.
 - b. Findings from this analysis was no different than in the overall analyses and failed to show an increased risk in disease or cancer in the early deployers to K2.
35. What support can I expect from the VA? Why has it taken 20 years to find this out?
- a. VA continues to support K2 Veterans to ensure they get timely and appropriate health care. If not enrolled in VA health care please follow this link to enroll: <https://www.va.gov/find-forms/about-form-10-10ez/>.
 - b. Additionally, VA is committed to ensuring that K2 Veterans are aware of an apply for the benefits they are eligible for. Under PACT Act over 300 conditions and cancers have been designated as presumptive conditions. If you have not applied for benefits, follow this link to begin the process to submit a claim for all the health concerns you believe are related to your military service at K2 and elsewhere: <https://www.ebenefits.va.gov>.
 - c. The VA has created a K2-specific workgroup to further ensure timely communication about healthcare and benefits as well as progress with ongoing efforts to assess the health concerns in the K2 population.
36. Talk about my exposure to toxic fumes while deployed to K2.
- a. Not sure how to respond...
37. My forward operating base was K2, but I performed missions in both Uzbekistan and Afghanistan. The VA regional continues to deny presumptive conditions or acknowledge those who served in Uzbekistan.
- a. K2 is covered by PACT Act. More can be learned about the presumptive conditions covered here: <http://www.VA.gov/PACT>.

- b. There is mandatory training for all VA providers about military environmental exposures and the PACT Act. Feel free to share the above website with your provider to ensure they have documentation to support your concerns and claims.
38. Which human hazardous exposure(s) were the United States of America soldiers exposed to, specifically nuclear, chemical, biological, or petroleum based products).
- a. More can be found on the contaminants detected at K2 at these links.
 - b. [K2 Airbase Exposures- Defense Centers for Public Health - Aberdeen](#)
 - c. [Karshi Khanabad \(K-2\) Air Base - Public Health \(va.gov\)](#)
 - d. There is no evidence of chemical weapons, nuclear, or biological contamination at K2.
 - e. Jet fuel, several volatile organic compounds, and depleted uranium were documented at K2.
39. Why is that my providers never heard of K2?
- a. A number of providers have been newly hired since the passage of the PACT Act and may not have yet completed the mandatory training on PACT Act or K2.
 - b. Below are several websites that you can share with a provider that may not be aware of K2 to help them understand better the contaminants at this site their potential impact on your health.
 - c. [Karshi Khanabad \(K-2\) Air Base - Public Health \(va.gov\)](#)
 - d. <http://www.VA.gov/PACT>
40. Lack of transparency for veterans.
- a. VA continues to support K2 Veterans to ensure they get timely and appropriate health care. If not enrolled in VA health care, please follow this link to enroll: <https://www.va.gov/find-forms/about-form-10-10ez/>.
 - b. Additionally, VA is committed to ensuring that K2 Veterans are aware of and apply for the benefits they are eligible for. Under PACT Act over 300 conditions and cancers have been designated as presumptive conditions. If you have not applied for benefits, follow this link to begin the process to submit a claim for all the health concerns you believe are related to your military service at K2 and elsewhere: <https://www.ebenefits.va.gov>.
 - c. The VA has created a K2-specific workgroup to further ensure timely communication about healthcare and benefits as well as progress with ongoing efforts to assess the health concerns in the K2 population.
41. I was told by flight nurse to have a yearly chest X ray should I have a rash on my lower leg since my deployment several doctors have looked at it different

prescriptions is this common problem from K2 this be automatic parts of my yearly exam I have a rash on my lower legs after my deployment I've had it looked at by several doctors my VA.

- a. Please follow up with your VA provider. If necessary they can refer you to a dermatologist.
42. I've submitted some info/accomplished a test over 1 year ago. When will i know the results ?
- a. Please discuss with your primary care provider. They can review your medical record and provide details about the testing, results, and make any necessary referrals.
43. Is memory loss related to depleted uranium exposure?
- a. There is no scientific evidence to suggest that exposure to depleted uranium is related to memory loss.
44. Has there been many individuals who have been suffering from nasal issues? I have had problems for almost a year now and wondered if any others were experiencing any similar sinus issues.
- a. Asthma, sinusitis, and rhinitis are presumptive conditions for those deployed to OEF/OIF/OND. Additionally, the PACT Act designated several other respiratory conditions for K2 Veterans.
 - b. If not already enrolled in VA for healthcare, you are encouraged to do so. This link provides information and can be used to initiate the enrollment process: <https://www.va.gov/find-forms/about-form-10-10ez/>.
 - c. If you have not applied for benefits, follow this link to begin the process to submit a claim for all the health concerns you believe are related to your military service at K2 and elsewhere: <https://www.ebenefits.va.gov>.
 - d. This link provides more information on the presumptions covered under the PACT Act: <http://www.VA.gov/PACT>.
45. When will a standard of testing be done so us that were there can be properly tested and treated?
- a. Under PACT Act all veterans receiving VA health care are to have a Toxic Exposure Screening (TES) at least every 5 years. The aim of the TES is to ensure Veterans are getting appropriate care based on the exposures they encountered during their military service.
 - b. This screening can be scheduled with your primary care provider or arranged through your local Environmental Health Coordinator. A listing of these Environmental Health Coordinators can be found here: <http://www.publichealth.va.gov/exposures/coordinators.asp>.
46. Help with health issues that occurred from my deployment time there.

- a. Under PACT Act all veterans receiving VA health care are to have a Toxic Exposure Screening (TES) at least every 5 years. The aim of the TES is to ensure Veterans are getting appropriate care based on the exposures they encountered during their military service.
 - b. This screening can be scheduled with your primary care provider or arranged through your local Environmental Health Coordinator. A listing of these Environmental Health Coordinators can be found here: <http://www.publichealth.va.gov/exposures/coordinators.asp>.
47. What type of health effects this exposure could cause? Im in Virginia, where could I go to get tested?
- a. Under PACT Act all veterans receiving VA health care are to have a Toxic Exposure Screening (TES) at least every 5 years. The aim of the TES is to ensure Veterans are getting appropriate care based on the exposures they encountered during their military service.
 - b. This screening can be scheduled with your primary care provider or arranged through your local Environmental Health Coordinator. A listing of these Environmental Health Coordinators can be found here: <http://www.publichealth.va.gov/exposures/coordinators.asp>.
48. My VA doctors are confused when I ask them to look at my Individual Longitudinal Exposure Report (ILER), even though this is supposed to be available so that veterans can receive appropriate care. During a C&P exam a few months ago, the VA rep did have access to my ILER, however it was missing all of the exposures we were advised of last year. How and when will this issue be corrected?
- a. As The individual Longitudinal Exposure Record (ILER) is being integrated into exposure informed care for Veterans. Not all healthcare providers have an account, but ILER is available in the Joint Legacy Viewer and is being incorporated into the new electronic health record. ILER files go back to 2002 and early entries may be limited as the system was just starting with the direct feed from the Defense Manpower Data Center. It improved greatly in about 2008 and became more reliable for deployments after that date.
 - b. VA is working on the Veteran access and believes that by end 2025 there will be an initial solution available for Veteran input.
49. I would like to know how the VA is addressing the need for medical treatment due to the exposures of those soldiers stationed at K2. The problem I am running into is that I am told the VA doctors are so overwhelmed with the Pact Act submissions, testing, screening, appointments, and other administrative VA related issues that they are in triage mode and only the worst of us are able to be seen in a timely fashion. I have not been able to sleep through the night in years

due to an unexplainable growth in my sinus cavity which prevents me from breathing through my nose. I was told that due to the inundation of claims filed that I would have to jump through a dozen attempts to correct the problem before they would remove the growth, for the second time I might add. Why can't local doctors make referrals out to specialists to take care of problems like this?

- a. We are sorry to hear of the difficulties you have experienced in getting timely healthcare. Your medical provider is able to make referrals to Ear, Nose and Throat specialists.
- b. Under PACT Act all veterans receiving VA health care are to have a Toxic Exposure Screening (TES) at least every 5 years. The aim of the TES is to ensure Veterans are getting appropriate care based on the exposures they encountered during their military service.
- c. This screening can be scheduled with your primary care provider or arranged through your local Environmental Health Coordinator. A listing of these Environmental Health Coordinators can be found here:
<http://www.publichealth.va.gov/exposures/coordinators.asp>.

50. My SOCOM PCM believes I have a type of Blood Cancer, and my VA PCM believes I have Thyroid Cancer. I want to know about what the VA found about carcinogenic toxins found at K2.

- a. We are sorry to hear that you may have cancer but are pleased that you are being evaluated by VA to ensure you receive appropriate and timely health care.
- b. A variety of contaminants have been identified at K2 that with sufficient exposure may be related to various types of cancers. More can be found on the contaminants detected at K2 at these links.
 - i. [K2 Airbase Exposures- Defense Centers for Public Health - Aberdeen](#)
 - ii. [Karshi Khanabad \(K-2\) Air Base - Public Health \(va.gov\)](#)

51. Has any other veteran developed sores on their body.

- a. We have no reports from the field about K2 Veterans with sores on their bodies.
- b. Based on VBA claims data, scars from injury and burns are the only reasons for submitting claim that were skin-related conditions.
- c. Please schedule an appointment with your VA health care provider to diagnose this condition.

52. I am still active duty. It does not seem there are clear avenues to have screenings completed on active duty, since this program is focused on veterans. Also Studies show that a urine based DU Laboratory test only shows traces for up to 2 weeks post exposure. Why are not bone marrow tests being conducted to provide an accurate picture of exposure?

- a. The test for assessing prolonged exposure to uranium is the uranium urinalysis. This test assesses for the presences of isotopic signatures for enriched as well as depleted uranium. Without a retained fragment, the likelihood of a positive test is very low, but shows that there is no long-term concern for this exposure. Depleted uranium is the least radioactive of all the uranium forms as the more radioactive components have been removed. Depleted uranium is used in tanks, as ballast in airplanes and for shielding due to its density.
 - b. Bone marrow extraction is an invasive and painful process that is not free of risks. The uranium urinalysis is less invasive with minimal health risks.
53. I have had a consistent cough since my deployments to K-2 in 2002/2003. I also have bothersome sinus issues.
 - a. Asthma, sinusitis, and rhinitis are presumptive conditions for those deployed to OEF/OIF/OND. Additionally, the PACT Act designated several other respiratory conditions for K2 Veterans.
 - b. If not already enrolled in VA for healthcare, you are encouraged to do so. This link provides information and can be used to initiate the enrollment process: <https://www.va.gov/find-forms/about-form-10-10ez/>.
 - c. If you have not applied for benefits, follow this link to begin the process to submit a claim for all the health concerns you believe are related to your military service at K2 and elsewhere: <https://www.ebenefits.va.gov>.
 - d. This link provides more information on the presumptions covered under the PACT Act: <http://www.VA.gov/PACT>.
54. Can we please get tested at least once a year for cancer or any other issues that are linked to K2.
 - a. VA follows accepted clinical cancer screening guidelines.
 - b. In collaboration with your primary care provider, earlier and more frequent screening may be ordered if medically warranted.
55. What type of neurologic adverse effects does DU or air born hazards cause?
 - a. The current scientific evidence does not show that DU and air born hazards have neurologic effects.
 - b. Analysis from the K2 Surveillance Program did not find an increased risk for any neurologic condition, to include neuropathies.
 - c. However, given the young age of the K2 population and intermediate follow-up period we will repeat these analyses at systematic intervals over the next 10+ years.
56. I am noticing adverse effects from my deployment to K2, will the VA approve disability claims associated with health issues stemming from K2? I have been

denied claims related to burn pits and sinus issues. These are contributing factors from the deployment to K2 why are these types of claims being denied?

- a. Asthma, sinusitis, and rhinitis are presumptive conditions for those deployed to OEF/OIF/OND. Additionally, the PACT Act designated several other respiratory conditions for K2 Veterans.
- b. If not already enrolled in VA for healthcare, you are encouraged to do so. This link provides information and can be used to initiate the enrollment process: <https://www.va.gov/find-forms/about-form-10-10ez/>.
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- d. This link provides more information on the presumptions covered under the PACT Act: <http://www.VA.gov/PACT>.

57. Does my skin and other related issues such as; joint management & muscle pains related to my K2 deployment?

- a. We encourage you to see your healthcare provider for a diagnosis and treatment.
- b. You are encouraged to submit a claim for any and all health conditions that you believe may be related to your military service at K2 or elsewhere.
- c. Your claim will be evaluated to determine if the condition(s) you have are covered under PACT Act, and if not, will be evaluated on a case-by-case basis.
- d. The following link will provide more information on submitting a claim: <https://www.ebenefits.va.gov>.
- e. This link provides more information on the presumptions covered under the PACT Act: <http://www.VA.gov/PACT>.

58. When I got back from K2 I had hives and hiccups for about 6 months. I now suffer from some type of Neurological disorder, I've been misdiagnosed with MS twice. My doctors believe it was due to some type of exposure but I'm having trouble getting proper care. I'm wondering if there is a repository of systems others are facing and if there is some special type of treatment offered given these findings are finally coming out.

- a. Asthma, sinusitis, and rhinitis are presumptive conditions for those deployed to OEF/OIF/OND. Additionally, the PACT Act designated several other respiratory conditions for K2 Veterans.
- b. If not already enrolled in VA for healthcare, you are encouraged to do so. This link provides information and can be used to initiate the enrollment process: <https://www.va.gov/find-forms/about-form-10-10ez/>.

- c. If you have not applied for benefits, follow this link to begin the process to submit a claim for all the health concerns you believe are related to your military service at K2 and elsewhere: <https://www.ebenefits.va.gov>.
- d. This link provides more information on the presumptions covered under the PACT Act: <http://www.VA.gov/PACT>.