Be Prepared to Treat Service Members Exposed to Airborne Hazards, Such as Open Burn Pit Smoke

The Department of Veterans Affairs (VA) developed the Airborne Hazards and Open Burn Pit Registry to enable service members and veterans to document their potential exposure to airborne hazards while deployed overseas and to facilitate a discussion with their provider. Review this guide to learn how you, as a health care provider, can support service members participating in the registry.

What Are the Health Concerns?

Service members who have been exposed to airborne hazards, such as open burn pit smoke, while deployed may be at risk for short- and long-term health issues. After deployment to locations with open burn pits and other pollution sources, service members have returned with a range of mild to serious respiratory illnesses. At this time, there are no biomarkers specific to the environmental exposure-related health concerns of service members who deployed to eligible theaters of operations.

Conducting the Medical Exam

If the service member is receiving the medical exam after signing up for the registry online, they are encouraged to bring a copy of their completed questionnaire. Providers can also access a copy of their patient's completed questionnaire through the Individual Longitudinal Exposure Record (ILER) or Defense Occupational and Environmental Health Readiness System (DOEHRS).

Providers should start by reviewing the service member’s questionnaire and discussing their medical history with an emphasis on occupational/environmental exposures. Providers should assess the intensity and specific focus of concern of the individual, bearing in mind that patients seeking medical attention may have a variety of symptoms and exposure concerns.

The provider should discuss and document the service member’s exposures in as much detail as possible. Questions to ask include, but are not limited to:

- What type of pollution were you exposed to during deployment (for example, off-base pollution such as factories, cars, burning trash, or dust; or on-base pollution such as burning fuel or burn pits)?
- How many hours per day were you exposed?
- How many days, months, or years were you exposed?
- What airborne pollutants have you been exposed to outside of deployment?

Providers should rely on their own evidence-based knowledge, expertise, and skills to guide a patient-centered evaluation and treat their symptoms according to clinical best practices. If clinically indicated, providers may:

- Perform a physical exam, with focus and extent determined by symptoms and/or health concerns
- Order diagnostics based on clinical signs/symptoms
- Refer the service member to specialists (such as internal medicine, pulmonology, and/or occupational medicine) for further evaluation

Upon completing the exam, providers should document the encounter in the electronic health record; no additional forms are required. Providers should record the following diagnostic codes:

- In AHLTA, ICD-10 codes Z91.82 (personal history of military deployment) and X08.8 (exposure to other specified, smoke, fire)
- In MHS GENESIS, SNOMED-CT codes 3042585015 (history of military deployment) and 165638013 (exposure to environmental pollution, occupational)
- Any additional applicable diagnostic or symptom codes
Research on the Health Effects of Burn Pit Exposures

Some published reports conclude that there are higher rates of self-reported pulmonary symptoms, asthma, sinusitis, and rare, unexpected conditions (like eosinophilic pneumonia and constrictive bronchiolitis) among service members who deployed to eligible theaters of operations. However, there are also publications that report finding no elevation in disease or symptom-reporting.

It is unclear what problems deployed individuals may develop and how widespread these problems are, but current evidence warrants heightened clinical attention to individuals reporting cardiopulmonary symptoms in relationship to these deployments. VA and DoD, as well as external organizations, are continuing to research the short- and long-term health effects of airborne hazards.

How Does the Airborne Hazards and Open Burn Pit Registry Work?

Service members who served in the Southwest Asia theater of operations or Egypt on or after August 2, 1990, or in Afghanistan, Djibouti, Syria, or Uzbekistan on or after September 11, 2001, are eligible for the registry. These regions include the following countries, bodies of water, and the airspace above these locations: Afghanistan, Bahrain, Djibouti, Egypt, Gulf of Aden, Gulf of Oman, Iraq, Kuwait, Oman, Qatar, Saudi Arabia, Syria, United Arab Emirates, Uzbekistan, and the waters of the Arabian Sea, Persian Gulf, and the Red Sea.

STEP 1

Eligible service members first complete an online voluntary health questionnaire; their information is maintained in a secure database and may be used in future research studies.

Upon completion of the questionnaire, service members receive instructions via email and direct mail to contact their Department of Defense (DoD) military hospital or clinic for an optional in-person medical evaluation (Reserve Component members will schedule their exams through VA). Service members are not required to complete the registry questionnaire to receive an exam.

STEP 2

Want to Learn More?

Log in to Joint Knowledge Online (JKO) at https://jkodirect.iten.mil to search for and complete the training course titled DHA-US035 Airborne Hazards and Open Burn Pit Registry Overview. This course is eligible for Continuing Medical Education credit.

For more information on the registry and to download a Clinical Toolbox that goes into more detail on your role as a health care provider, visit Health.mil/AHBurnPitRegistry.