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Report/Article Title Memorandum: To F. Edward McDonald, Chief of Field Service, From Mark D. Regan, National Field Representative, The American Legion, regarding Agent Orange Processing - VAMC Lebanon, Pennsylvania, dated February 15, 1983

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THE AMERICAN LEGION

1608 K STREET, N.W.
WASHINGTON, D. C. 20006

Memorandum to: Mr. F. Edward McDonald
Chief of Field Service

DATE: 2/15/83

RE: Agent Orange Processing - VAMC Lebanon, Pennsylvania

At the time of the visit, there had been 360 veterans claiming exposure to AO who had received examinations at VAMC Lebanon. Additionally, 650 AO exams were reported to have been performed at the Outpatient Clinic Substation in Harrisburg, Pennsylvania. Essentially the same protocol is followed at both facilities. *Other*

According to policy, examinations are provided within at least three weeks. At the VAMC, they are performed by all the physicians within the Medical Service, but mostly by the admitting physicians. Physicians were deemed knowledgeable about AO. Charts are reviewed by the Environmental Physician at the VAMC, and physician in charge at the clinic.

Standard VA protocol is followed. A questionnaire is given to the veteran to pinpoint exposure. Inquiries are made about radiation and chemical exposure, illness in Vietnam and after returning. A family history is taken. A complete physical exam is provided including ENT, neuro and rectal exams. Blood tests, UA, chest x-ray, and EKG are done. If any abnormalities are discovered, the etiology is pursued. Treatment is provided for any symptoms/illness which a veteran states is related to AO. Depending on the examination results and symptoms, referral is made to a specialist if this is needed.

Veterans are notified by mail of the results of the examination. At the VAMC, 15 veterans have been admitted with conditions possibly related to exposure to AO, and 281 are receiving outpatient care. At the clinic, statistics since approximately April 1981, indicate that 48 veterans have received follow-up care.

There have been two cases where veterans claiming exposure to AO have illness with undetermined causes. One has a skin condition (not chloracne) for which a diagnosis could not be reached. Referral was made to a Dermatologist at VAMC Philadelphia. The other case involved a neurological problem. The veteran has been seeing his own physician, and attempts are being made to get him admitted at the Bronx VAMC on an epilepsy unit for diagnosis.


MARK D. REGAN
National Field Representative