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About the DU Library

[Force Health Protection & Readiness](#) maintains this Web site to provide a source of readily accessible information on [depleted uranium \(DU\)](#) to Service members and their families, other Federal agencies, and members of the public. Included here are [fact sheets](#) on DU from the Deployment Health and Family Readiness Library, results of medical and scientific [research projects and publications](#), [reports](#) from organizations and government agencies; DoD [policies](#) related to depleted uranium; and important [related links](#) to other offices and agencies. We also provide a link to the [Veterans Affairs \(VA's\) DU Medical Follow-up Program](#). It is one more element of FHP&R's highest priority – ensuring the good health of our Service members through a partnership for health among the Service members, their families, their leaders, and their health care professionals.

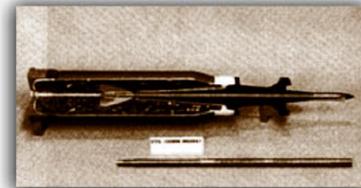
What are natural and depleted uranium?

[Uranium](#) is a naturally-occurring element that is one of the hardest and densest metals known. Because it is found everywhere on earth, we eat and breathe a small amount every day. People have been mining uranium and using it commercially for over 60 years, so there is a great deal of information available on this metal. The [Toxicological Profile for Uranium](#) contains a complete description of the metal, and its known health hazards.



Natural uranium becomes [depleted uranium \(DU\)](#) after most of a more radioactive [isotope](#) is removed for nuclear fuel production. DU is a heavy metal that is almost twice as dense as lead, having the same chemical properties as natural uranium, but 40 percent less radioactivity.

DoD began testing DU about 40 years ago, and first used it in a military operation in 1991. It has fewer risks than natural uranium because it is less radioactive. DoD and many other organizations have studied, and continue to study, the [health](#), [chemical](#), [radiological](#) and [environmental effects and exposures](#) of DU.



Why does DoD use DU?

DoD uses DU tank armor and some [DU munitions](#) (bullets) to penetrate enemy [armored vehicles](#). The use of DU has saved the lives of many Service members in combat. The Agency for Toxic Substances and Disease Registry, in its [Draft Toxicological Profile](#) has stated **there is no evidence** that natural or depleted uranium exposure has caused cancer in people.

How is DoD Monitoring Possible Exposures to Depleted Uranium (DU)?

As DU munitions penetrate armor or when DU burns, DU [oxide](#) dust is created. DU exposure may occur from [inhalation or ingestion](#) of DU dust, contamination of wounds with DU dust, or from embedded DU munitions or armor fragments in the body. To address these risks, DoD has formal [policies](#) in place to monitor its Service members for potential DU exposure, and refers exposed Service members to a [medical follow-up program](#). DoD also has [training](#) programs for personnel who could be exposed to the metal. The 2003 [Health Affairs' Policy](#), [Operation Iraqi Freedom DU Medical Management](#), offers every Service member the opportunity to confirm possible exposure to DU. This was supplemented in 2004 by the [DoD Deployment Biomonitoring Policy](#). Exposure evaluation of personnel who served in the [Gulf War](#) or [Operation Iraqi Freedom](#) is initiated based upon participation in an event (such as a [friendly fire](#) incident) or with a unit that would place the individual at risk of DU exposure, or positive patient responses to the [Post-Deployment Health Assessment, DD Form 2796](#).

Potentially exposed Service members complete a [DU Exposure Questionnaire](#), which is reviewed to assess the risk level. Those at greatest risk undergo urine testing for uranium. Personnel at lower risk may also undergo testing based on concerns of either the patient or the medical provider. The most recent data on the results of urine testing for depleted uranium are summarized in the [attached report](#). Service members with confirmed positive results are offered a referral to the [VA's DU Follow-Up Program in Baltimore](#).



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