

**University of Florida College of Nursing
BSN Program Handout**

UNIQUE HEALTH RISKS OF VETERANS

| Service | Risks | Types of health issues |
|--|--|--|
| WWII/Korea 1941-1946 | Cold injury, starvation (POWs), chemical warfare agent experiments, exposure to nuclear weapons (including testing or cleanup) | Cancers of the bile ducts, bone, brain, breast, colon, esophagus, gall bladder, liver (primary site, but not if cirrhosis or hepatitis B is indicated), lung, pancreas, pharynx, ovary, salivary gland, small intestine, stomach, thyroid, urinary tract (kidney/renal, pelvis, urinary bladder, and urethra), leukemia (except chronic lymphocytic leukemia), lymphomas (except Hodgkin's disease), and multiple myeloma Post Traumatic Stress Disorder (PTSD) |
| Viet Nam 1964-1973 | Special stigma for these veterans, pesticide and herbicide exposure (Agent Orange), hepatitis C, malaria, bacterial/fungal infections, substance abuse | Acute and Sub-acute Peripheral Neuropathy Chronic B-cell Leukemias Diabetes (Type 2) Hodgkin's Disease Ischemic Heart Disease Prostate Cancer Respiratory Cancers Neuropsychiatric issues due to lack of support on the home front Substance abuse/addiction PTSD |
| Gulf war- Southwest Asia | Exposure risk from burn pits, chemical and biological warfare agents, depleted uranium sites, oil well fires/smoke, petroleum and pesticides; infectious diseases | Effects of some of these exposures are still unknown Uranium-may affect kidney function Chronic fatigue syndrome Fibromyalgia Irritable bowel syndrome Malaria, Tuberculosis, Salmonella, etc PTSD, depression, suicide risk |
| Operation Enduring Freedom/Iraqi Freedom (OEF/OIF) | Combined penetrating /blunt trauma and burn injuries (blast injuries), dermatologic issues, embedded fragments (shrapnel), leishmaniasis, traumatic brain/spinal cord injuries | Effects of some of these exposures are still unknown. Uranium- may affect kidney function Reproductive Health Issues Traumatic Amputation Traumatic Brain or Spinal Cord Injury Vision and or Hearing Loss PTSD, depression, suicide risk |

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Communication Strategies for use with Veteran Clients

- Invite the Veteran to tell his/her story
 - Veteran population seeking health care may be older; they have had experiences in a different time and place.
- It is important to make the client aware that his/her unique experiences as a Veteran are of interest/concern to clinicians.
- Effective questions
 - “Tell me about your military experience?”
 - “When and where do you/did you serve?”
 - “What did you do when you were in the service?”
 - “How has military service affected you?”

Answers to these questions will provide information helpful in understanding the Veteran’s medical conditions and will help you establish rapport with these clients

- **Effective closing:**
 - “Thank you for your service” and, if appropriate, “Welcome Home”. You may get an emotional response. Be a supportive listener, non-judgmental.
- **Referral:**
 - My HealthVet website (www.myhealth.va.gov/)

Reference: The Military History Pocket Card
www.va.gov/oa/pocketcard