



The DoD Times (Redacted)

# **NEWSLETTER**

**ANOTHER DOD COVER-UP?  
THE LONG SHADOW OF  
DEPLETED URANIUM  
EXPOSURE ON U.S. SERVICE  
MEMBERS**

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Information to Help Victims of DoD & DHS "Leadership"



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## **Another DoD Cover-Up? The Long Shadow of Depleted Uranium Exposure on U.S. Service Members**

For nearly two decades, I sought answers that the Department of Defense (DoD) and the Department of Veterans Affairs (VA) seem determined to suppress. The issue is one of toxic exposure, radiation sickness, and systemic negligence—or perhaps something more deliberate.

During Operations Iraqi Freedom and Enduring Freedom, over a million U.S. service members were exposed to depleted uranium (DU) contamination and hazardous radiation. I was one of them. In March 2003, after strafing runs on Tikrit East (FOB Speicher), I participated in a two-and-a-half-hour cleanup detail that left me with an estimated exposure of 1.4 REM—later confirmed in a 2022 BioAssay conducted by the DoD. The symptoms were immediate: severe acid reflux, skin irritation, nausea, vomiting, sloughing of intestinal lining—classic signs of radiation sickness. But what followed was worse.

The exposure was documented through my chain of command, with records allegedly entered into Individual Longitudinal Exposure Reports (ILERs). But from there, the issue vanished. After redeployment, I was instructed to provide a 24-hour urine sample for radiation testing at Darnall Army Hospital, Fort Hood. The sample was submitted. The results? "No results available."

By 2005, after another deployment to Camp Taji, the symptoms worsened—lethargy, brain fog, and a deep exhaustion that no amount of rest could remedy. Doctors dismissed my concerns, blaming my weight fluctuations on poor discipline rather than acknowledging a potential toxic exposure injury or even seeking out



alternative reasons. Despite following strict diet and exercise regimens, my condition worsened, abdominal circumference fluctuations of 12 to 14 inches in a 24-hour period were noted but again dismissed. It was later diagnosed with hormonal deficiencies, a pituitary tumor, and abnormal liver function. — all unexplained, but certainly not investigated. Years later, under civilian medical treatment, I would be diagnosed as having a severe reaction to food preservatives which the specialist attributes to the toxic exposure and accounted for the rapid fluctuations in my circumference with no corresponding weight fluctuation.

As years passed, my records from the 2003 deployment mysteriously disappeared. Fellow service members from that same deployment confirmed the same: their medical records were also missing. The explanation? A 2004 connex fire at Fort Cavazos (formerly Fort Hood)—though no verifiable evidence of such a fire exists. Similarly, my Post-Deployment Health Reassessment (PDHRA) from 2003 was allegedly destroyed in a fire in 2016. Oddly, my 2005 and 2010 PDHRAs remain intact. The residual radiation testing entry in my medical records from 2004 that showed “no results available”? disappeared out of my medical record around 2018 timeframe during a records update to a new system.

Determined to uncover the truth, I pursued every avenue available. I contacted Dr. Jerry Falo, Director of the DoD Depleted Uranium Program, who was initially skeptical of my concerns. However, when I underwent residual radiation testing again in 2022, traces of U-235, U-236, and U-238 were confirmed in my sample.

One might assume that such a finding would prompt a formal investigation. Instead, the opposite occurred: emails went unanswered, doors closed, and bureaucrats shrugged. The VA refused to evaluate me until retirement, and when I finally entered the VA system, they acknowledged DU and radiation exposure but still denied access to long-term DU monitoring programs.

Why? Because the VA relies on a testing model designed to fail. The uranium spot test used to determine exposure is ineffective decades after exposure, conveniently allowing the VA to dismiss claims from service members whose bodies have slowly processed and expelled much of the contaminant. The result? A



calculated delay until most veterans succumb to their illnesses—before the government is forced to admit fault.

This issue extends far beyond my case. In my research, I discovered that depleted uranium was actively used on the battlefield until at least 2008, despite its known hazards. Dr. Christopher Busby, an expert in radiation exposure, estimated that service members were exposed to approximately 30 – 50 Rem, which is 6 - 10 times the maximum allowable annual radiation dose—every single year they were deployed.

Yet, despite these figures, the DoD quietly reclassified DU from a "radiation hazard" to an "environmental hazard" a move, I assume; was done to eliminate any requirement to track long-term exposure effects and areas of usage. This was not an oversight—it was a strategic decision designed to avoid accountability.

Even with documented exposure on my ILER, the VA dismissed it, claiming ILERs are "usually incomplete"—an astonishing rationale that allows them to ignore official military records at will. Further, the DoD refuses to release my pre-deployment DNA sample, preventing critical comparisons that could conclusively demonstrate genetic degradation due to radiation exposure.

The implications of this failure extend beyond those who deployed. The contaminated equipment was never decontaminated before being shipped back to the U.S., exposing non-deploying personnel and even service members' families to unknown levels of radiation.

The Toxic Exposure Risk Assessment (TERA) Act, introduced by the VA, appears to be a preemptive effort to mitigate backlash rather than a sincere attempt to address the crisis. Entry into the program, oddly enough; requires no proof of exposure at all, simply a DD214 review for proof of involvement in any of the named operations. Yet the burden remains on veterans to call eligibility enrollment and request the TERA annotation be added to their records, despite the government having the proof it applies to them already (it is apparently a violation of the CFR for the VA to act on the veteran's behalf without the veteran requesting said action).





The VA also did not advertise the availability of the TERA act in any real way. I myself didn't even know of its existence until I filed a congressional and the VA called to inform me that they were adding it to my record on my behalf.... yes, you read that correctly. The VA claims that DU exposure's effects are "too variable" to be definitively linked to specific conditions—yet that very logic means they also cannot prove it did not cause these conditions. Instead of acknowledging this, the VA chooses to maintain it does nothing and, based on what I can tell from my interactions with them; they have absolutely no intention of changing that opinion until forced.

This is not just negligence. It is a deliberate cover-up—an attempt to stall until those exposed are too sick, too tired, or too dead to fight back.

So, I ask: How does an institution "lose" every document related to an exposure event of this magnitude? How does it cherry pick and manipulate science to suit budgetary constraints?

The DoD knew the dangers of DU before deploying it en masse, and the shift to tungsten penetrators in later munitions confirms that fact. Yet rather than acknowledge the harm done, they buried the evidence and abandoned those affected. For decades, the U.S. government denied the effects of Agent Orange, dismissing veterans' claims until lawsuits and overwhelming scientific evidence forced their hand. The same pattern is unfolding again.

I wish I could author this paper as simple informative document... However, when examining the DoD's behavior regarding more recent events like the Red Hill fuel disaster and Camp Lejune, their apparent intentional lack of accountability shows me that it would be foolhardy to think they will treat this issue differently. I am hopeful that my efforts will assist with making this exposure acknowledged and considered for all effected personnel and remind the DoD that while none of us are perfect, it's how we conduct ourselves when the fault is ours that shape who we are and our true character. Mindless bureaucracy is a choice, our brave men and women who volunteered to be in harm's way deserve better, they deserve the same consideration that was/is demanded of them in the oaths they swore and the values



they are expected to uphold.

The question is not whether service members were exposed—it is whether the government will take accountability before it is too late.

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Feel free to reach out privately at [francescagraham@walkthetalkfoundation.org](mailto:francescagraham@walkthetalkfoundation.org) or in the comments.

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