



LASER Exposure Incident Reporting

FACT SHEET 24-028-0615

Military and civilian personnel who operate or maintain laser systems should be aware of the basic reporting procedures for suspected laser injuries or overexposures. Commanders must ensure that any Soldier or DOD employee who has a laser injury or possible overexposure is examined by an optometrist or ophthalmologist at the nearest Medical Treatment Facility (MTF) within 24 hours (see DA PAM 40-506 and DA PAM 385-24).

Lasers are classified according to their potential to cause an injury to the eyes and skin. The table below lists the laser classifications with common examples:

Class	Hazard	Example
1	Considered eye-safe under the viewing conditions for which the laser was intended.	Mark VII Rangefinders
1M	Considered eye-safe for unaided viewing under the viewing conditions for which the laser was intended. Hazardous when viewed with magnifying optics (example: binoculars).	Some infrared illuminators
2	Visible lasers only. Considered to be eye-safe unless a person deliberately stares into the beam.	Laser boresight system
2M	Visible lasers only. Considered to be eye-safe for unaided viewing unless a person deliberately stares into the beam. Hazardous when viewed with magnifying optics (example: binoculars).	Bar code scanners
3a (3R)	May cause damage to eyes but probability of injury is small.	MILES (Multiple Integrated Laser Engagement System), laser pointers
3b (3B)	May cause damage to eyes and burn skin.	Medical lasers, ATPIAL (Advanced Target Pointer Illuminator Aiming Light)
4	Can damage eyes, burn skin, and cause fires.	Handheld laser marker, medical lasers, target designators

Medical Response

Anyone experiencing an injury or possible overexposure from a laser should be seen by a medical provider. The class of the laser will determine if an overexposure occurred. In general, class 1 and 1M lasers will not produce injuries or overexposures. Personnel who will work with class 3b and/or class 4 lasers should have baseline assessments completed for vision prior to using such lasers. These assessments can be used later to better evaluate any suspected overexposures or injuries.

The MTF shall report any incident of known or suspected laser overexposure to the Tri-Service Hotline at 1-800-473-3549, even if an individual does not have a confirmed laser injury. If possible, the laser class, type, and model should be reported, and the laser should be secured. Complete the online reporting form. To access this form, visit <https://hpws.afrl.af.mil/dhp/OE/ESOHSC> and complete the registration. From the homepage, select Radiation Safety. Then select DoD Triservice Laser Safety Hotline.

Command Response

Once a unit suspects or confirms a laser overexposure incident, they should notify their Command and Installation Laser Safety Officer (LSO), Radiation Safety Officer (RSO), or Safety Officer.

The LSO, RSO, or Safety Officer will notify the following:

1. Army Institute of Public Health (AIPH)/Nonionizing Radiation Program, DSN 584-3932, commercial 410-436-3932 or 1-800-222-9698, or usarmy.apg.medcom-phc.mbx.nonionizing@mail.mil.
2. The AIPH Tri-Service Vision Conservation and Readiness Program (TVCRP) manager, DSN 584-2464, commercial 410-436-2464. After normal duty hours, contact AIPH personnel via the staff duty officer, DSN 584-4375 or commercial 410-436-4375 or 1-800-222-9698.
3. The Army Safety Office at DSN 227-1194/1128, commercial 703-697-1194/1128 or at usarmy.pentagon.hqda-aso.mbx.army-safety-office@mail.mil.
4. For classified incidents, please contact the Environment, Safety, and Occupational Health (ESOH) service center at esoh.service.center@wpafb.af.mil. Ask for SIPR.
5. If the incident meets the requirements to file a report utilizing REPORT-IT, the RSO will submit an online report at <https://reportit.safety.army.mil> per MEDCOM Reg 40-42.

Post Deployment

For Soldiers returning from deployment, question 12 should be completed on DD Form 2796, Post Deployment Questionnaire. Notify the installation LSO, RSO, or Safety Officer.