DEFINITION OF CRITICAL ILLNESS (CI)

Alzheimer's Disease/Irreversible Organic Degenerative Brain Disorders	 Deterioration or loss of intellectual capacity or abnormal behavior as evidenced by the clinical state and accepted standardized questionnaires or tests arising from Alzheimer's Disease or irreversible organic degenerative brain disorders resulting in significant reduction in mental and social functioning (such that continuous supervision is required). The diagnosis must be clinically confirmed by a neurologist. We will not cover the following: a) Non organic brain disorders such as neurosis and psychiatric illnesses; b) Drug or alcohol related brain damage.
Bacterial Meningitis	 Bacterial meningitis causing inflammation of the membranes of the brain or spinal cord resulting in permanent neurological deficit lasting for a minimum period of thirty (30) days and resulting in a permanent inability to perform at least three (3) of the Activities of Daily Living. The diagnosis is to be confirmed by: a) an appropriate specialist; and b) the presence of bacterial infection in the cerebrospinal fluid by lumbar puncture.
Benign Brain Tumour	 A life-threatening, non-cancerous tumor in the brain or meninges within the cranium, giving rise to characteristic signs of increased intra-cranial pressure such as papilledema (swelling of the head of the optic nerve, a sign of increased intracranial pressure), mental symptoms, seizures and sensory impairment. The presence of the underlying tumor must be confirmed by imaging studies such as CT Scan or MRI. We will not cover the following: a) Cysts; b) Granulomas (lumps of a specific form of inflammation); c) Malformations in or of the arteries or veins of the brain; d) Hematomas (a collection of blood that is outside a blood vessel); e) Tumors in the pituitary gland, or spine; f) Tumors of the acoustic nerve.
Blindness/Total Loss of Sight	The total and irreversible loss of sight in both eyes due to illness or accident. The blindness must be confirmed by an ophthalmologist.
Brain Surgery	 The actual undergoing of surgery to the brain under general anaesthesia during which a craniotomy is performed. We will not cover the following: a) Burr hole procedures, transphenoidal procedures and other minimally invasive procedures; and b) Brain surgery as a result of an accident.

Cancer	 Any malignant tumour positively diagnosed with histological confirmation and characterized by the uncontrolled growth of malignant cells and invasion of tissue. The term malignant tumour includes leukemia, lymphoma and sarcoma. For the above definition, the following are not covered: a) All cancers which are histologically classified as pre-malignant, non-invasive; carcinoma in situ; having either borderline malignancy or having low malignant potential; b) All tumours of the prostate, thyroid and urinary bladder histologically classified as T1N0M0 (TNM classification);
	 c) Chronic Lymphocytic Leukemia less than RAI Stage 3; d) All cancers in the presence of HIV; e) Any skin cancer other than malignant melanoma.
Chronic Aplastic Anemia	 Irreversible persistent bone marrow failure which results in anemia, neutropenia and thrombocytopenia requiring treatment with at least two (2) of the following: a) Regular blood product transfusion; b) Marrow stimulating agents; c) Immunosuppressive agents; d) Bone marrow transplantation.
	The diagnosis must be confirmed by a bone marrow biopsy.
Coma	A state of unconsciousness with no reaction or response to external stimuli or internal needs, persisting continuously for at least ninety-six (96) hours, requiring the use of life support systems and resulting in a permanent neurological deficit, lasting more than thirty (30) days. Confirmation by a neurologist must be present.
	We do not cover coma resulting directly from self-inflicted injury, alcohol or drug abuse.
Coronary Artery By-Pass Surgery	Refers to the actual undergoing of open-chest surgery to correct or treat Coronary Artery Disease (CAD) by way of Coronary Artery By-Pass Grafting.
	We do not cover angioplasty and all other intra-arterial, catheter based techniques, keyhole or laser procedures.
Deafness / Total Loss of Hearing	Refers to the total and irreversible loss of hearing in both ears as a result of illness or accident. Total means "the loss of at least eighty (80) decibels in all frequencies of hearing".
	Medical evidence in the form of an audiometry and sound-threshold tests must be provided and certified by an Ear, Nose, and Throat (ENT) Specialist.
Encephalitis	Refers to a severe inflammation of brain substance, resulting in permanent neurological deficit lasting for a minimum period of thirty (30) days and certified by a neurologist. The permanent neurological deficit must result in an inability to perform at least three (3) of the Activities of Daily Living. We do not cover encephalitis in the presence of HIV infection.

End Stage Kidney Failure	End stage kidney failure presenting as chronic irreversible failure of both kidneys to function, as a result of which regular renal dialysis initiated or renal transplantation is carried out.
End Stage Liver Disease	 End stage liver failure as evidenced by all of the following: a) Permanent jaundice; b) Ascites; and c) Hepatic encephalopathy. We do not cover liver failure due to alcohol or drug abuse.
End Stage Lung Disease	 End stage lung disease causing chronic respiratory failure. The Participant condition must meet all of the following criteria: a) Requiring permanent oxygen therapy as a result of a consistent FEV1 test value of less than one litre (Forced Expiratory Volume during the first second of a forced exhalation); b) Baseline Arterial Blood Gas analysis with partial oxygen pressures of 55mmHg or less; c) Dyspnea (Difficult or labored breathing; shortness of breath) at rest.
Full Blown AIDS	 The clinical manifestation of AIDS (Acquired Immuno-deficiency Syndrome) must be supported by the results of a positive HIV (Human Immuno-deficiency Virus) antibody test and a confirmatory Western Blot test. In addition, the Participant must have a CD4 cell count of less than two hundred (200) and one (1) or more of the following criteria are met: a) Weight loss of more than ten per cent (10%) of body weight over a period of six (6) months or less (wasting syndrome). b) Having Kaposi sarcoma. c) Having pneumocystis carinii pneumonia. d) Having progressive multifocal leukoencephalopathy. e) Having less than one-thousand (1,000) lymphocytes. g) Having malignant lymphoma.
Fulminant Viral Hepatitis	 A sub massive to massive necrosis of the liver caused by any virus leading precipitously to liver failure. The diagnostic criteria to be met are: a) A rapidly decreasing liver size as confirmed by abdominal ultrasound; b) Necrosis involving entire lobes, leaving only a collapsed reticular framework; c) Rapidly deteriorating liver functions tests; and d) Deepening jaundice. Hepatitis B infection or carrier status alone does not meet the diagnostic criteria.
Heart Attack	 The death of a portion of the heart muscle (myocardium) as a result of inadequate blood supply and being evidenced by all of the following criteria: a) A history of typical prolonged chest pain; b) New electrocardiographic changes resulting from this occurrence, and c) Elevation of the cardiac enzyme (CPK-MB) above the generally accepted laboratory levels of normal or troponins recorded at the following levels or higher: -Troponin T > 1.0 ng/ml or equivalent threshold with other Troponin I methods We do not cover specifically angina (a disease marked by spasmodic attacks of intense suffocative pain).
Heart Valve Surgery	Having an open-heart surgery to replace or repair cardiac valves as a result of heart-valve defects or abnormalities that have happened after the date of issue or revival of the related Certificate.

	We do not cover repairs by intra-arterial procedure, key-hole surgery or similar techniques.
HIV Due to blood transfusion	 Participant is infected with the Human Immunodeficiency Virus (HIV) through a blood transfusion provided that all of the following conditions are met: a) the blood transfusion was medically necessary or given as part of a medical treatment; b) the blood transfusion was received in Malaysia or Singapore after the commencement of the Certificate; c) the source of the infection is established to be from the Institution that provided the blood; d) the Participant does not suffer from haemophilia (a group of inherited bleeding disorders); and e) the Participant is not a member of any high risk groups such as but not limited to intravenous drug users.
Loss of Independent Existence	The Participant is confirmed by an appropriate Specialist of the loss of independent existence lasting for a minimum consecutive period of six (6) months and resulting in a permanent inability to perform at least three (3) of the Activities of Daily Living.
Loss of Speech	The Participant is confirmed by medical evidence to have a total and irrecoverable loss of the ability to speak for a continuous period of twelve (12) months. The medical evidence to confirm injury or illness to the vocal cords to support this disability must be supplied by an Ear, Nose, and Throat Specialist. We do not cover all psychiatric related causes.
Major Burns	The Participant suffers a third degree (i.e. full thickness) skin burns covering at least twenty percent (20%) of the total body surface area.
Major Head Trauma	The Participant suffers physical head injury which caused permanent functional impairment, lasting for a minimum period of three (3) months from the date of the trauma or injury. The resultant permanent functional impairment is to be verified by a neurologist and must result in an inability to perform at least three (3) of the Activities of Daily Living.
Major Organ/ Bone Marrow Transplant	 The Participant receives a transplant of: a) human bone marrow using hematopoietic stem cells preceded by total bone marrow ablation; or b) one of the following human organs: heart, lung, liver, kidney or pancreas that resulted from irreversible end stage failure of the relevant organ. We do not cover other stem cell transplants.
Medullary Cystic Disease	A progressive hereditary disease of the kidneys, which is characterized by the presence of cysts in the medulla, tubular atrophy and interstitial fibrosis with the clinical manifestations of anemia, polyuria and renal loss of sodium, progressing to chronic renal failure. Diagnosis should be supported by a renal biopsy.
Motor Neurone Disease	A progressive degeneration of the corticospinal tracts and anterior horn cells or bulbar efferent neurons. These include spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis and primary lateral sclerosis.

	The Diagnosis must be confirmed by a neurologist as progressive and resulting in permanent neurological deficit.
Multiple Sclerosis	 A final Diagnosis by a consulting neurologist confirming the following combination, which has continued for at least one hundred and eighty (180) days: a) Symptoms referable to tracts (white matter) involving the optic nerves, brain stem and spinal cord, producing well-defined neurological deficits; b) A multiplicity of discrete lesions; and c) A well-documented history of exacerbation and remissions of said symptoms/neurological deficits.
Muscular Dystrophy	 The Diagnosis of muscular dystrophy (one of a group of genetic diseases characterized by progressive weakness and degeneration of the skeletal or voluntary muscles which control movement) shall require a confirmation by a neurologist. The Participant must have a combination of three (3) out of four (4) of the following conditions: a) Family history of other affected individuals; b) Clinical presentation including absence of sensory disturbance, normal cerebro-spinal fluid and mild tendon reflex reduction; c) Characteristic electromyogram; d) Clinical suspicion confirmed by muscle biopsy.
	We will not pay any benefit under this CI if the Participant is twelve (12) years and below on next birthday.
Other Serious Coronary Artery Disease	The narrowing of the lumen (referring to the channel within a tube such as a blood vessel or to the cavity within a hollow organ) of at least three (3) major coronary arteries (not inclusive of their branches) by a minimum of sixty per cent (60%) or more as proven by coronary arteriography (non-invasive diagnostic procedures are excluded).
	Coronary Arteries herein refer to the Circumflex Artery, Right Coronary Artery (RCA), Left Anterior Descending Artery (LAD) and Left Main Stem (a narrowing of sixty per cent (60%) or more of the Left Main Stem will be considered as a narrowing of two (2) major arteries).
	We will pay this benefit whether or not any form of coronary artery surgery has been performed.
Paralysis/Paraplegia	The complete and permanent loss of use of both arms or both legs, or of one arm and one leg, through paralysis caused by illness or injury persisting for at least six (6) months from the date of trauma or illness.
Parkinson's Disease	Unequivocal diagnosis of Parkinson's disease by a neurologist where the condition: a) cannot be controlled with medication; and b) shows signs of progressive impairment.
	An assessment of Activities of Daily Living must confirm the Participant's inability to perform without assistance three (3) or more of the Activities of Daily Living. We will only cover idiopathic Parkinson's disease. We do not cover drug-induced or toxic causes of Parkinsonism.
Primary Pulmonary Arterial Hypertension	Means Primary Pulmonary Arterial Hypertension with substantial right ventricular enlargement established by investigations including cardiac catheterization, resulting in permanent physical impairment to the degree of

	at least Class III of the New York Heart Association (NYHA) classification of cardiac impairment.
	We will not cover pulmonary arterial hypertension resulting from other causes.
	The NYHA Classification of Cardiac Impairment for Class III and Class IV means the following:
	 Class III : Marked limitation of physical activity. Comfortable at rest but less than ordinary activity causes symptoms. Class IV : Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.
Stroke	A cerebrovascular accident or incident producing neurological sequelae (following/resulting from) of a permanent nature, having lasted not less than three (3) months. Infarction (tissue death) of brain tissue, hemorrhage and embolisation (non-surgical, minimally-invasive procedure performed by an interventional radiologist and interventional neuroradiologists) from an extra-cranial source are included.
	The Diagnosis must be based on changes seen in a CT scan or MRI and certified by a neurologist.
	 We do not cover the following: a) cerebral symptoms due to transient ischemic attacks (temporary strokes); b) any reversible ischemic neurological deficit; c) vertebrobasilar ischemia (poor blood flow to the posterior (back) portion of the brain); d) cerebral symptoms due to migraine; e) cerebral injury resulting from trauma or hypoxia (oxygen concentrations fall below the level necessary to sustain life); and f) vascular disease affecting the eye or optic nerve or vestibular functions.
Surgery To Aorta	Having an actual surgery of a thoracotomy or laparotomy to repair or correct an aortic aneurysm, an obstruction of the aorta or a dissection of the aorta. For the purpose of this definition, aorta shall mean the thoracic and abdominal aorta but not its branches.
	We do not cover angioplasty and all other intra-arterial, catheter based techniques, keyhole or laser procedures.
Systemic Lupus Erythematosus (SLE) with Lupus Nephritis	Refers to a multi-system, autoimmune disorder characterized by the development of auto-antibodies, directed against various self-antigens.
	Within the context of this Certificate, SLE is restricted to only those forms of SLE which involve the kidneys (Type III to Type V Lupus Nephritis, established by renal biopsy).
	We do not cover other forms such as discoid lupus and those forms with only hematological and joint involvement.
	World Health Organisation (WHO) Lupus Classification: Class I - Minimal change glomerulonephritis Class II - Mesangial glomerulonephritis Class III - Focal Segmental glomerulonephritis Class IV - Diffuse glomerulonephritis Class V - Membranous glomerulonephritis

Terminal Illness	The Participant must be suffering from a condition, which, in the opinion of an appropriate Specialist and confirmed by the doctor appointed by us, is high likely leads to death within twelve (12) months. The Participant must no longer be receiving active treatment other than that for pain relief.
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