

COMPENS8 PERSONAL ACCIDENT INSURANCE

INSURING CLAUSE

The Insurers will pay to the Insured, on behalf of the Insured Person or his estate, the compensation stated in the Schedule if, during the Period of Insurance, any Insured Person sustains accidental bodily injury, at an identifiable time and place, which injury shall directly and independently of all other causes result, within twenty-four calendar months, in death, permanent disability, Temporary Total Disability, or in hospitalisation.

DEFINITIONS

Permanent disability shall mean Maximum				
a)	loss by physical separation at or above the wrist or ankle of one or more limbs	100%		
b)	permanent and total loss of			
	1. whole eye	100%		
	2. sight of eye	100%		
	3. sight of eye except perception of light	100%		
c)	permanent and total loss of hearing in both ears	100%		
d)	injuries to the Insured Person who is Gainfully Employed at the time of the Accident, resulting in permanent total disability from following usual occupation and any other equivalent occupation for which the Insured Person is fitted by education, knowledge or training			
e)	loss of independent existence which means that the Insured Person is, through injury, totally and irreversibly unable to perform at least four of the following activities of daily living without the assistance of another person or the use of special equipment. The disability must have existed for a continuous period of at least 12 months 1. Feeding/Eating - Cutting meat, buttering bread, getting food and drink to the mouth using fingers or utensils 2. Dressing - Dressing oneself including fastening zips and buttons, getting clothes from wardrobes and drawers 3. Bathing/Grooming - Turning on taps, getting in and out of a bath/shower, washing face/hands etc., drying oneself, combing hair 4. Toileting - Moving into and out of the bathroom, getting on an off the toilet unaided, recognising the need or urge to void bladder or bowel in time to get to the toilet 5. Mobility/Transfer - Getting into and out of bed, transferring from one place to another e.g. chair to bed, chair to standing, chair to chair 6. Walking - Moving from one location to another- walking or wheeling or using a frame	100%		
f)	permanent disfigurement of: 1. the head and neck, provided the total area affected exceeds 70% of the total area of the head and neck	100%		
	2. the body, provided the total area affected exceeds 70% of the total area of the body	100%		

MEMORANDA

- Permanent total loss of use of part of the body shall be treated as loss of such part. 1.
- 2. The amount stated in the Schedule will be the maximum compensation payable for Permanent Disability for any one Insured Person in respect of each and every claim

GUARDRISK Compens8 policy wording 1



Acquired Immune Deficiency Syndrome or AIDS shall have the meanings assigned to it by the World Health Organisation including Opportunistic Infection, Malignant Neoplasm, Human Immune Deficiency Virus (HIV), Encephalopathy (Dementia), HIV Wasting Syndrome or any disease or Illness in the presence of a sero-positive test for HIV.

Accident shall mean any sudden and fortuitous event which directly and independently of any other cause results in Bodily Injury as defined. HIV Assist is a trademark of the Company that is used under licence by Global Choices Assist (Pty) Limited

Hospital means a Hospital (other than an institution for the aged, chronically ill or convalescent rest or nursing home and/or drug or alcohol rehabilitation facilities) operated pursuant to the law for the care and treatment of injured or sick persons with organised facilities for diagnosis and surgery and having 24-hour nursing service and medical supervision.

Hospital Casualty Room Means a legally constituted establishment that operates pursuant to the laws of the country in which it is based and which meets the following requirements;

- (a) it operates primarily for the reception, medical care and treatment of sick, ailing or injured persons on a resident in-patient basis;
- (b) it admits resident in-patients only under the supervision of a Medical Practitioner;
- (c) it is not a day clinic, health hydro, nature clinic, a mental institution, the psychiatric department of a hospital, a place for the treatment of chemical dependence, a place for treatment of drug addicts or alcoholics, a hospice, frail care centre, a rest or nursing home, convalescent, rehabilitation, assisted living or extended care centre.

Event means all individual losses arising out of and directly occasioned by one catastrophic accident. However, the duration and extent of any one Event so defined shall be limited to only those Deaths and/or Permanent Disabilities of Insured Persons hereon occurring during any one period of 24 hours and within a radius of 20 kilometres.

Dependant Children shall mean natural, lawfully adopted, step children by marriage or foster children who have in terms of the provisions of any legislation relative to the protection of children been placed in the custody of the Insured as foster children, or any children who are living with the Insured in the same household in a relationship which is not casual or impermanent and as if they were the lawful children of the Insured, who are under the age of 21 (or under 25 years of age if they are full-time students at an accredited institution for higher learning), unmarried and primarily dependent on the Insured for maintenance and support.

Gainfully Employed shall mean the Insured Person is at the time of the Accident employed in a legally recognisable and acceptable occupation for reward. This does not include house wives or Dependant Children

Insured Person shall mean any person named in the schedule

Insured shall mean the person, who has applied for this insurance and is responsible for the payment of the premium and has completed an application form.

Spouse means the husband, wife, partner in a same sex partnership or any de facto partner with whom the Insured Person has permanently and continuously lived in the same household in a relationship which is not casual or impermanent for a period longer than 6 consecutive months. Only one Spouse shall be eligible for cover as nominated by the Insured Person.

Temporary Total Disability shall mean total and absolute incapacity from following usual business or occupation.

Medical Expenses shall mean all costs and expenses necessarily incurred, within 24 months of the date of the accident, for artificial aids, prostheses, medical, surgical, dental, optical, nursing home or hospital treatment and supplies as a result of accidental bodily injury.

An **Act of Terrorism** includes, without limitation, the use of violence or force or the threat thereof whether as an act harmful to human life or not, by any person or group of persons, whether acting alone or on behalf of or in connection with any organisation or government or any other person or body of persons, committed for political, religious, personal or ideological reasons or purposes including any act committed with the intention to influence any government or for the purpose of inspiring fear in the public or any section thereof.

PROVISOS

3.

It is declared and agreed that

- the Insurers shall not be liable to pay for death or disability for one Insured Person in respect of each and every claim, more than the
 compensation payable for Death or Permanent Disability (whichever is the higher) plus any compensation payable for Temporary Total
 Disability, Hospitalisation, Additional Death Benefit and in respect of any Extensions which are applicable
- 2. the compensation specified for Temporary Total Disability in respect of each and every claim shall be payable for not more than 13 weeks as stated in the Policy Schedule and such payment shall cease as soon as the injury causing the incapacity has healed as far as is reasonably possible, notwithstanding that Permanent Disability may remain. Provided that Insurers shall not be liable for any compensation for such Temporary Total Disability during the Time Exclusion of 30 days as stated in the Policy Schedule
- temporary total disability benefit for Injury or serious illness is limited to the amount stated in the policy schedule. At the time of a claim proof of earnings will be required to validate the weekly sum due to the Insured Person. Irrespective of the number of policies issued by Insurers, the maximum amount payable in respect of Temporary Total Disability shall not exceed 100% of average weekly earnings.
- 4. where an Insured Person dies as a result of accidental bodily injury within 90 days of the date of the accident, the Insurers will be liable for the compensation payable for Death as shown in the schedule and any other extensions which are applicable, notwithstanding there may have been a valid claim for Permanent Disability.
- 5. any benefit payable in respect of Dependant Children will be payable to the Insured, notwithstanding anything in the Insuring Clause to the contrary.
- 6. any death benefit payable for Dependant Children who are 5 years or younger will not exceed R10 000 and those aged 6 years to 13 years the Death benefit will not exceed R30 000 (this is in accordance with Government legislation).
- 7. unless otherwise provided for herein, this Policy shall not apply to any Insured Person after the expiry of the Period of Insurance in which he attains 80 years of age.
- 8. after suffering accidental bodily injury for which compensation may be payable under this Policy, the Insured Person shall, when reasonably required by the Insurers so to do, submit to medical examination and undergo any treatment specified by a medical practitioner appointed by the Insurers. The Insurers shall not be liable to make any payment unless this Proviso is complied with to their satisfaction
- 9. Reference in this Policy to any one gender is deemed to include the other gender



EXCEPTIONS

The Insurers shall not be liable to pay any claim under this Policy in respect of any Insured Person

- while engaging in flying as pilot or member of the crew. This exception does not apply to Insured Persons engaging in ballooning, hang-gliding, paragliding and parachuting, provided that such activities are solely for social and/or pleasure purposes and not of a competitive nature or for reward
- 2. caused by the Insured Person's suicide or intentional self-injury
- 3. caused by, traceable to, prolonged by or otherwise affected by any physical defect, infirmity or condition existing prior to the effective date of this Policy
- 4. caused by mental disorders including but not limited to; anxiety disorders, eating disorders, psychotic disorders, affective disorders, personality disorders, substance use disorders, somatoform disorders, dissociate disorders, psychosexual disorders, adjustment disorders, organic mental disorders, mental retardation and autism
- 5. as a result of the influence of drugs or narcotics upon the Insured Person unless administered by a member of the medical profession (other than himself) or unless prescribed by and taken in accordance with the instructions of a member of the medical profession (other than himself)
- 6. for Bodily Injury to the Insured Person arising from any motor vehicle accident occurring whilst the Insured Person is driving or operating any motorised or mechanically operated vehicle whilst being under the influence of alcohol. For the purposes of this exception the term "under the influence of alcohol" means having a Blood Alcohol level Concentration (BAC) greater than the statutory limit at the time of the accident, or the level applicable according to prevailing legislation where the accident occurs, whichever is the lesser
- 7. caused by the Insured Person's participation in any riot or civil commotion
- 8. arising from war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power
- 9. as a result of the Insured Person's deliberate exposure to exceptional danger (except in an attempt to save human life) or the Insured Person's own criminal act
- 10. while participating in sport as a professional player
- 11. directly or indirectly caused by or contributed to by or arising from ionising radiations or contamination by radio-activity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or from any nuclear weapons material. For the purpose of this exception only, combustion shall include any self-sustaining process of nuclear fission.
- 12. as a result of an Act of Terrorism (regardless of any contributory cause) involving the use or release or the threat thereof of any nuclear weapon or device or chemical or biological agent. If the Insurers allege that by reason of this proviso any claim is not covered by this Policy, the burden of proving the contrary shall be upon the Insured

SCOPE OF COVER

24 Hours

This Policy applies in respect of accidental bodily injury to the Insured Person arising anytime during a 24 hour day. Cover is extended to include working and non-working hours except that Medical Expenses is only covered whilst the Insured Person is on the premises of the Insured

MAIN LIMITS

The Insurers' liability in respect of

- 1.1 Death and Permanent Disability is limited to any one Insured Person in respect of each and every claim for the amount stated on the Policy Schedule
- 1.2 Any one event is limited to the amount stated on the Policy Schedule

CONDITIONS

- 1. **Interpretation** This Policy and Schedule shall be read together as one contract and any word or expression to which a specific meaning has been attached in any part of this Policy or of the Schedule shall bear such specific meaning wherever it may appear.
- 2. **Jurisdiction** This Policy will be governed by the laws of the Republic of South Africa, whose courts shall have jurisdiction in any dispute arising hereunder.
- 3. **Misrepresentation, Misdescription or Non- Disclosure** This Policy shall be voidable in the event of misrepresentation, misdescription or non-disclosure by or on behalf of the Insured in any particular which is material to this insurance.
- 4. **Prevention of Loss** The Insured shall take all reasonable steps and precautions to prevent accidents or losses.
- 5. **Claims** On the happening of any occurrence which may result in a claim under this Policy, the Insured shall give notice thereof as soon as possible (and in each case within 180 days of injury) to the Insurers. The Insured Person shall also send full particulars of the claim and such information and documentation as is required by Insurers.
- 6. **Prescription** If the Insurers disclaim liability in respect of any claim and an action or suit is not commenced within twelve months after such disclaimer, all benefit under this Policy in respect of such claim shall be forfeited.
- 7. **Fraud** If the Insured shall make any claim knowing it to be false or fraudulent, the benefit afforded by this Policy in respect of any such claim shall be forfeited.
- 8. **Cancellation** The Insured may cancel this Policy at any time by giving the Insurers notice in writing. The Insurers may cancel this Policy by sending the Insured one calendar month's notice in writing to the last known address.

 This Policy will terminate on the date that payment of a Death or Permanent Disability Benefit is made to an Insured Person;
- 9. **Premium Adjustment** If the premium for this Policy has been calculated on any estimated figures, the Insured shall, after the expiry of each Period of Insurance, furnish the Insurers with such particulars and information as the Insurers require for the purpose of recalculation of the premium for such period. Any difference shall be paid by or to the Insured as the case may be.



- 10. **Non-Assignment** This policy is not assignable without the written consent of Insurers. Compensation shall be payable only to the Insured, or the Insured's legal representative, whose receipt shall discharge the Insurers.
- 11. **Premium Payment** The cover provided under this policy is conditional upon and will only come into effect following payment of the premium by the Insured and/or Insured Person and the receipt thereof by or on behalf of the Insurers.
- Sanctions No (re)insurer shall be deemed to provide cover and no (re)insurer shall be liable to pay any claim or provide any benefit to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.



SC	CHEDULE OF BENEFITS	MAXIMUM COMPENSATION
AL	JTOMATICALLY INCLUDED	
1.	Exposure Accidental bodily injury shall be deemed to include injury caused by starvation, thirst or exposure to the elements, directly or indirectly resulting from misfortune.	As stated in the Policy Schedule under benefits for Accidental Death or Disability
2.	Disappearance If any Insured Person disappears in circumstances which satisfy the Insurers that he has sustained injury to which this Policy applies and that such injury has resulted in the death of the Insured Person, the Insurers will, for the purposes of this Insurance, presume his death, provided that if, after the Insurers shall have made payment hereunder in respect of the Insured Person's presumed death, he is found to be alive, such payment shall forthwith be refunded by the Insured to the Insurers, subject to the Insured being able to recover such payment from the person(s) to whom it was paid	As stated in the Policy Schedule under benefits for Accidental Death or Disability
3.	Repatriation If there is a valid claim for death or serious accidental bodily injury, the Insurers will also pay the reasonable and necessary expenses incurred in the repatriation of the Insured Person (or the body of the Insured Person in the event of his death) to his normal place of residence, provided that: 1. the liability of the Insurers in respect of each and every claim shall not exceed the amount stated for any one Insured Person 2. if there is a claim for serious accidental bodily injury, the prior consent of Insurers to repatriate the Insured Person must be obtained. Such consent will not be unreasonably withheld.	R50 000
4.	 Emergency Transportation/ Search & Rescue The Insurers will pay costs and expenses necessarily incurred for: 1. emergency transportation 2. search and rescue, including freeing and bringing an Insured Person to a place of safety as a result of, or in order to prevent, accidental bodily injury to an Insured Person, provided that (a) Insurers will not be liable if an Insured Person is found in circumstances which are unlikely to result in accidental bodily injury (b) the liability of the Insurers in respect of each and every claim shall not exceed the amount stated for any one Insured Person 	R25 000
5.	If an Insured Person is subjected to an act of violence or a traumatic accident, Insurers will reimburse such person for counselling fees actually incurred by such person as a result of the act of violence or traumatic accident, provided that 1. the maximum amount payable by Insurers will be limited to the amount stated for each and every claim 2. act of violence shall mean an assault, robbery, rape, kidnapping or armed car hijack 3. for the purposes of this extension only, Insured Person shall include immediate family members of such Insured Person the act of violence has been reported to the police and a case number obtained. This extension also covers any Insured Person who witnesses such an act of violence or traumatic event, provided that it arises in the course of the policy period	R 750 per visit maximum R25 000 per annum



6.	Claims Preparation Costs The insurance by this Policy extends to include costs reasonably incurred by the Insured Person in producing and certifying any particulars or details required by the Insurers to substantiate a claim, provided that the liability of the Insurers for such costs in respect of each and every claim shall not exceed the amount stated	R15 000
7.	Mobility When the Insurers have admitted a claim for Permanent Disability, if as a direct result of that disability the Insured Person is permanently dependent on a wheelchair for mobility, the Insurers will, in addition to any amount payable for Permanent Disability, pay for 1. wheelchair 2. the fitting of wheelchair loading equipment and alterations to the Insured Person 's main residence to facilitate the use of such wheelchair 3. the modification of the controls to the Insured Person's motor vehicle provided that the liability of the Insurers for such costs in respect of each and every claim shall not exceed the amount stated	R75 000
8.	Accident Expert The Insured will have access to assistance with all claims management and handling in respect of the following by contacting 011 603 8065/0860 103 431 or Guardrisk@roadcover.co.za ACCIDENT EXPERT takes no fees from the claimant's settlement. In the event of the Insured/Insured Person having a valid claim, Accident Expert does not guarantee performance by the RAF Commissioner Road Accident Fund Act (RAF) Assistance 1. Legal representation 2. Administration and claims management 3. Required medico-legal reports 4. Required loss of support reports 5. Required actuarial reports for loss of earnings 6. Accident Reconstruction	Assistance Service
9.	HIV/AIDS Accidental Exposure If an Insured Person is accidentally exposed to HIV/AIDS the following assistance will be provided: 1. Access to a 24-hour emergency assistance helpline, which will arrange for the necessary assistance the Insured Person may require where Trauma and/or HIV infection may be the result of an Assault 2. Instant access to medical professionals 3. diagnostic and access to hospital care to manage the consequences • A 7-day course of Sexually Transmitted Injection (STI) medication • A 'morning-after pill' to prevent pregnancy Specific Conditions • Assistance is provided within the borders of South Africa only • All incidents must be reported to 0861 666 913 within 48 hours	Assistance Service



10.		
	War Risks	
	 Exception 8 is deleted in its entirety, provided that the Insurers shall not be liable to pay compensation in terms of this extension for claims arising while the Insured Person is on service or duty or undergoing training with any military or police force the Insurers shall not be liable to pay compensation in terms of this extension for claims resulting from war (whether declared or not), between any of the following nations: 	
	the United Kingdom, the United States of America, France, the Peoples Republic of China and constituent parts of the former Union of Soviet Socialist Republics 3. this extension may be cancelled at any time by the Insurers giving 30 days' notice in writing. From the date of cancellation, the Insured	
11.	shall be entitled to refund premium pro rata for the unexpired Period of Insurance. Hospitalisation Benefit Shall be payable should the Insured Person be confined to a hospital for more than 96 hours as a result of accidental bodily injury, provided that the liability of the Insurers in respect of any one claim shall not exceed the daily lump sum amount stated in the policy schedule, maximum 180 days.	As stated in the Policy Schedule
	Specific Condition Successive periods of hospitalisation, due to the same accident, will be regarded as one accident	



<mark>OPTI</mark>	ONAL EXTENSIO	N (only if stated on the	e policy schedule to be included)	
	IDMe turns your cellphone Iocation by mea Medical aid deta Medical history Next of kin infor ER24's Contact Centre will	ins of triangulation via cellphone towers ails and allergies rmation immediately dispatch an appropriate ro	ency ER24's 24/7 Contact Centre can access an Insured Person's:	
1.	medical crisis. Medical Hotline - ER24 me assistance. This is an adviso Trauma Counselling - ER24 for: Natural death Sexual assault Post trauma	nation - For Life-saving medical advice co dical personnel, including paramedics, n ory and information service only. I's Trauma Support team will provide sup • Unnatural death • Attempted suicide • Domestic violence	ontact <u>084 124</u> where a trained professional will guide the caller through a nurses and doctors, will be available 24 hours a day to provide general medical pport and trauma counselling. Telephonic counselling services are available 24/7 • Death notifications • Hospital support	Assistance Service
		sist the Insured Person suffers acciden	ng, armed robbery, shooting, stabbing) Ital bodily injury. The maximum amount payable by Insurers will be the	
2.	 Emergency rod A 15 day waiting All medical expostated in the Polynomial Cover is limited 	ended to cover any visit to a Hospita om visits are limited to a maximum on ng period applies penses in a Doctor surgery and/or a olicy Schedule per incident d to South Africa only	al emergency room following an injury of 4 visits per annum a hospital outpatient / emergency hospital room limited to the amount e the Insured Person is admitted into Hospital following an accidental	As stated in the Policy Schedule
3.	Dental & Bone Fracture		owing table of compensation if any of the following events occur	



	Fractured tooth - At least 50% of the visible portion of the tooth is lost where the dental nerve is permanently damaged Laceration - An accidental event that cuts the skin deeply enough to warrant the use of professional wound approximation techniques such as sutures (more than 5). This benefit excludes minor or superficial cuts and scrapes where a simple bandage or plaster will suffice to close the wound. Tooth knocked out - The tooth is accidentally knocked out of the socket by the external force and for various reasons cannot be replaced into the socket and is therefore irretrievably lost Major Bone Fracture - For the purposes of this insurance the "major bones" include, the skull, humorous, femur and tibia Other Bone Fracture - All other bones not defined as "major" above or "jaw" below. Jaw fracture - A fracture of the mandible or the maxilla, but excludes fractures of the alveolar bone Fracture - means open or closed fracture but excludes bones that are mildly cracked and which do not require surgical reduction Accident - In terms of this extension the word accident relates only to an unplanned event where an external object makes contact with the body. For example: a fall where forceful contact is made between the body and a hard surface, or where a hard object strikes the body resulting in the defined injury	
	a) Fractured tooth	R2,500 per tooth
	b) Tooth knocked out	R3,000 per event
	c) Jaw fracture	R7,500 per event
	d) Major bone fracture	R6,000 per event
	e) Other bone fracture	R2,000 per event
	f) Laceration requiring (5+ stitches)	R500 once off
4.	Temporary Total Disability AccidentalIf an Insured Person is temporarily totally disabled as a result of an Accidental Injury the Insurers' shall pay the amount stated in the Policy Schedule. All Conditions and Exceptions under extension will apply Serious Illness If an Insured Person is temporarily totally disabled as a result of any of the Serious Illnesses as stated under Optional Extension 6 the Insurers' shall pay the amount stated in the Schedule up to a maximum of 13 weeks after the time exclusion of 30 days. All Conditions and Exceptions under the Serious Illness Extension will apply	As stated in the Policy Schedule
5.	Serious Illness Cover If an Insured Person is first diagnosed as suffering from any of the Serious Illnesses specified below during the period of insurance, Insurers will pay to the Insured, on behalf of the Insured Person or his estate, the amount stated in the Policy Schedule. The sections of this Policy headed: a) Provisos b) Exceptions c) Extensions are specifically declared inapplicable to this extension. Specific Condition Each of the specified illnesses must be diagnosed by a registered medical practitioner and must be supported by acceptable clinical,	As stated in the Policy Schedule



radiological, histological and laboratory evidence.

Specific Exceptions

No benefit shall be payable under this extension in respect of:

- a) any claim arising directly or indirectly from a condition for which the Insured Person was being treated or of which he was aware at the inception of this extension
- b) any Insured Person who dies as a result of any Serious Illness which is only discovered or diagnosed after the death of such Insured Person
- c) any Insured Person who is under 18 years or has reached the age of 55 years at the date of diagnosis
- d) Aids or infection with Human Immunodeficiency Virus (HIV)
- e) any Insured Person who dies within 30 days of the diagnosis of a Serious Illness.

If there is a claim under this extension, Insurers will not be liable for any further claim in respect of

- a) the Serious Illness which resulted in the said claim
- b) any other Serious Illness diagnosed within 12 months of the diagnosis of the Serious Illness which caused the said claim.



COVERED SERIOUS ILLNE	
	A malignant tumour positively diagnosed with histological confirmation and characterised by the uncontrolled growth of malignations cells and invasion of tissue. The term malignant tumour includes leukaemia, lymphoma and sarcoma. The following conditions are excluded from this definition:
	All cancers in situ and all pre-malignant conditions.
Cancer	 All tumours of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed
cance.	at least clinical TNM classification T2N0M0.
	All skin cancers, other than malignant melanoma that has been histologically classified as having caused invasion beyond the
	epidermis (outer layer of skin).
	This is defined as the death of heart muscle, due to inadequate blood supply, as evidenced by two of the following the
	criteria:
	Compatible clinical symptoms
	Characteristic ECG changes, which can be either of the following:
	New pathological Q-waves as defined below, or
	o ST-segment and T-wave changes indicative of myocardial ischaemia that may progress to myocardial infarction
	defined below, but only when accompanied by raised cardiac markers as described below.
	Pre-intervention raised cardiac markers:
	o Trop T greater than 1,0 ng/ml, or Trop T greater than 2,5 ng/ml, or
	Trop I greater than 0,5 ng/ml, or
	CK-MB mass greater than two times the normal values in acute presentation phase, or Tatal CRY elevation of greater than two times the access to the second service of the
	o Total CPK elevation of greater than two times the normal values, with at least 6% being CK-MB.
Heart Attack	The evidence must show a definite acute myocardial infarction. Other acute coronary syndromes, including but not limited angina, are not covered by this definition.
	For purposes of this definition, new pathological Q-waves mean the following:
	 Any Q-wave in leads V1 through V3, Q-wave greater than or equal to 30 ms (0.03s) in leads I, II, AVL, AVF, V4, V5or V6.
	Q-wave changes must be present in any two contiguous leads, and be greater than or equal to 1mm in depth.
	ECG changes indicative of myocardial ischaemia that may progress to myocardial infarction, mean the following:
	Patients with ST-segment elevation:
	o New or presumed new ST segment elevation at the J point in two or more contiguous leads with the cut
	points greater than or equal to 0.2mV in leads V1, V2,or V3, and more or equal to 01.mV in other leads
	Contiguity in the frontal plane is defined by the lead sequence AVL, I, inverted AVR, II, AVF, III.
	Patients without ST-segment elevation:
	o ST-segment depression.
	T-wave abnormalities only



Coronary Artery Surgery	The actual undergoing, on the advice of a consultant surgeon, of coronary artery bypass surgery to correct stenosis o occlusion in the coronary arteries but excluding angioplasty, keyhole surgery and other non-surgical techniques such as lase procedures
Stroke (resulting in permanent symptoms)	Death of brain tissue due to inadequate blood supply or haemorrhage within the skull resulting in permanent motor deficit and confirmed with appropriate clinical findings by a specialist neurologist. For the above definition, the following are not covered: Transient ischaemic attack. Vascular disease affecting the eye or optic nerve. Migraine and vestibular disorders. Traumatic injury to brain tissue or blood vessels
Kidney Failure	Chronic end stage failure of both kidneys to function, as a result of which regular dialysis is necessary
Major Organ Transplant	Which shall mean the actual undergoing as a recipient of a transplant of the heart, liver, pancreas, bone marrow or at leas one of the kidneys or lungs
Paraplegia	Total and irreversible loss of the use of any two limbs, but excluding paraplegia caused by accidental, violent, external and visible means
Multiple Sclerosis (with persisting symptoms)	A definite diagnosis of multiple sclerosis by a neurologist. There must be current clinical impairment of motor or sensory function of an EDSS scale 3.0 or more, which must have persisted for a continuous period of at least 6 months. Benigr multiple sclerosis will not be covered
Blindness	The total and irreversible loss of vision in both eyes but excluding blindness caused by accidental, violent, external and visible means. The corrected visual acuity must be less than 6/60 or 20/200 using e.g. Snellen test types, or visual field restriction to 20° or less in both eyes. No benefit will be payable if in general medical opinion a device, or implant could result in the partia or total restoration of sight
Heart Valve Surgery	The first occurrence of open or endoscopic heart valve surgery, performed to replace or repair one or more heart valves, as a consequence of defects that cannot be repaired by intra-arterial catheter procedures alone. The surgery must be performed after a recommendation by a consultant cardiologist
Motor Neuron Disease (resulting in permanent symptoms)	A definite diagnosis of motor neuron disease by a neurologist. There must be permanent clinical impairment of motor function
Alzheimer's The deterioration or loss of intellectual capacity or abnormal behaviour arising from Alzheimer's disease or irre organic disorders (excluding neurosis and any psychiatric illness) resulting in significant reduction in mental ar functioning and requiring the eventual supervision of the Insured Person. The diagnosis must be clinically confirmed appropriate consultant and confirmed by the Insurers' medical consultants	
Coma (resulting in permanent neurological complications):	 A state of unconsciousness with no reaction to external stimuli or internal needs which: Requires the use of life support systems for a continuous period of at least 96 hours; and Results in permanent neurological deficit with persisting clinical symptoms.? Rankin scale. Only those claimants with a Rankin score of 3 and higher would qualify for a claim under Coma. For the above definition, the following is not covered: Coma secondary to alcohol or drug abuse Coma caused by accidental violent external and visible means



Parkinson's Disease	shall mean the slowly progressive degenerative disease of the central nervous system as a result of loss of pigment containing neurones of the brain (substantia nigra). Only idiopathic Parkinson's Disease is Covered. Parkinson's Disease" does not include alcohol-induced, drug-induced or toxic causes of Parkinsonism and Parkinson-type symptoms due to damage of vessels. Severity Level B shall apply on the unequivocal diagnosis of Parkinson's disease by a consultant neurologist and provided that: The disease cannot be controlled with medication; and The disease shows signs of progressive impairment. Severity Level A shall apply on the unequivocal diagnosis of Parkinson's disease by a consultant neurologist and provided that: Activities of Daily Living assessment confirms the inability of the Member to perform, without assistance, three or more of the following as a result of Parkinson's Disease: Transfer; Mobility; Continence; Dressing; Bathing/washing; Eating;
	The disease cannot be controlled with medication; and the disease shows signs of progressive impairment.

