

The critical illnesses or diseases covered by this rider are as follows:

1.1 Alzheimer's Disease/Severe Dementia

Deterioration or loss of intellectual capacity confirmed by clinical evaluation and imaging tests arising from Alzheimer's Disease or Severe Dementia as a result of irreversible organic brain disorders. The covered event must result in significant reduction in mental and social functioning requiring continuous supervision of the person covered. The diagnosis must be clinically confirmed by a neurologist.

From the above definition, the following are not covered:

- (a) Non-organic brain disorders such as neurosis;
- (b) Psychiatric illnesses; and
- (c) Drug or alcohol related brain damage.

1.2 Angioplasty and Other Invasive Treatments for Coronary Artery Disease

The actual undergoing for the first time of Coronary Artery Balloon Angioplasty, artherectomy, laser treatment or the insertion of a stent to correct a narrowing or blockage of one or more coronary arteries as shown by angiographic evidence.

Intra-arterial investigative procedures are not covered. Payment under this clause is limited to 10% of the critical illness coverage under this contract subject to a maximum of RM25,000. This covered event is payable once only and shall be deducted from the amount of this contract, thereby reducing the amount of the lump sum payment which may be payable.

1.3 Apallic Syndrome (i.e. Persistent Vegetative State (PVS))

Universal necrosis of the brain cortex with the brainstem intact. This diagnosis must be definitely confirmed by a consultant neurologist holding such an appointment at an approved hospital. This condition has to be medically documented for at least 1 month.

1.4 Bacterial Meningitis - resulting in permanent inability to perform activities of daily living

Bacterial meningitis causing inflammation of the membranes of the brain or spinal cord resulting in permanent functional impairment. The permanent functional impairment must result in an inability to perform at least 3 of the activities of daily living (as stated in clause 1.2 of this annexure). A minimum assessment period of 30 days applies.

The diagnosis must be confirmed by:

- (a) an appropriate specialist; and
- (b) the presence of bacterial infection in the cerebrospinal fluid by lumbarpuncture.

For the above definition, other forms of meningitis, including viral meningitis are not covered.

1.5 Benign Brain Tumour - of specified severity

A benign tumour in the brain or meninges within the skull, where all of the following conditions are met:

- (a) It is life threatening;
- (b) It has caused damage to the brain;
- (c) It has undergone surgical removal or has caused permanent neurological deficit with persisting clinical symptoms; and

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Level 11, 338 Jalan Tuanku Abdul Rahman, 50100 Kuala Lumpur, Malaysia
Telephone (603) 2612 3600 Client Careline 1300-88-5055 wecare@sunlifemalaysia.com
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- (d) Its presence must be confirmed by a neurologist or neurosurgeon and supported by findings on MRI, CT or other reliable imaging techniques.

The following are not covered:

- (a) Cysts;
- (b) Granulomas;
- (c) Malformations in or of the arteries or veins of the brain;
- (d) Hematomas;
- (e) Tumours in the pituitary gland;
- (f) Tumours in the spine; and
- (g) Tumours of the acoustic nerve.

16. Blindness - Permanent and Irreversible

Permanent and irreversible loss of sight as a result of accident or illness to the extent that even when tested with the use of visual aids, vision is measured at 3/60 or worse in both eyes using a Snellen eye chart or equivalent test and the result must be certified by an ophthalmologist.

17. Brain Surgery

The actual undergoing of surgery to the brain under general anaesthesia during which a craniotomy (surgical opening of skull) is performed.

For the above definition, the following are not covered:

- (a) Burr hole procedures;
- (b) Transphenoidal procedures;
- (c) Endoscopic assisted procedures or any other minimally invasive procedures; and
- (d) Brain surgery as a result of an accident.

18. Cancer - of specified severity and does not cover very early cancers

Any malignant tumour positively diagnosed with histological confirmation and characterised 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 any of the following:
 - pre-malignant;
 - non-invasive;
 - carcinoma in situ;
 - having borderline malignancy; or
 - having malignant potential.

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- (b) All tumours of the prostate histologically classified as T1N0M0 (TNM classification);
- (c) All tumours of the thyroid histologically classified as T1N0M0 (TNM classification);
- (d) All tumours of the urinary bladder histologically classified as T1N0M0 (TNM classification);
- (e) Chronic Lymphocytic Leukemia less than RAI Stage 3;
- (f) All cancers in the presence of HIV; and
- (g) Any skin cancer other than malignant melanoma.

19 Cardiomyopathy - of specified severity

A definite diagnosis of cardiomyopathy by a cardiologist which results in permanently impaired ventricular function and resulting in permanent physical impairment of at least Class III of the New York Heart Association (NYHA) Classification of Cardiac Impairment. The diagnosis has to be supported by echocardiographic findings of compromised ventricular performance.

The NYHA Classification of Cardiac Impairment for Class III and Class IV means the following:

- (a) Class III: Marked limitation of physical activity. Comfortable at rest but less than ordinary activity causes symptoms.
- (b) Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.

Cardiomyopathy directly related to alcohol or drug abuse is not covered.

1.10 Chronic Aplastic Anemia - resulting in permanent bone marrow failure

Irreversible permanent bone marrow failure which results in anaemia, neutropenia and thrombocytopenia requiring at least 2 of the following treatments:

- (a) Regular blood product transfusion;
- (b) Marrow stimulating agents;
- (c) Immunosuppressive agents; or
- (d) Bone marrow transplantation.

The diagnosis must be confirmed by a bone marrow biopsy.

1.11 Chronic Relapsing Pancreatitis

More than 3 attacks of pancreatitis resulting in permanent pancreatic dysfunction causing malabsorption needing enzyme replacement therapy.

The diagnosis must be made by a consultant gastroenterologist and confirmed by Endoscopic Retrograde Cholangiopancreatography (ERCP).

Chronic Relapsing Pancreatitis caused by alcohol or drug use is excluded.

1.12 Coma - resulting in permanent neurological deficit with persisting clinical symptoms

A state of unconsciousness with no reaction to external stimuli or internal needs, persisting continuously for at least 96 hours, requiring the use of life support systems and resulting in a permanent neurological deficit with persisting clinical symptoms. A minimum assessment period of 30 days applies. Confirmation by a neurologist must be present.

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The following is not covered:

- (a) Coma resulting directly from alcohol or drug abuse.

1.13 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.

For the above definition, the following are not covered:

- (a) angioplasty;
- (b) other intra-arterial or catheter based techniques;
- (c) keyhole procedures; and
- (d) laser procedures.

1.14 Creutzfeldt-Jakob Disease (Mad Cow Disease)

The occurrence of Creutzfeldt-Jakob Disease or Variant Creutzfeldt-Jakob Disease where there is an associated neurological deficit, which is solely responsible for the person covered's permanent inability to perform at least 3 of the activities of daily living (as stated in clause 1.2 of this annexure). These conditions have to be medically documented for at least 6 months and confirmed by a consultant neurologist with appropriate testing such as conclusive Electroencephalography (EEG) and Cerebrospinal Fluid (CSF) findings as well as Computerized Tomography (CT) scan and Magnetic Resonance Imaging (MRI).

Sickness caused by human growth hormone treatment is excluded.

1.15 Deafness - Permanent and Irreversible

Permanent and irreversible loss of hearing as a result of accident or illness to the extent that the loss is greater than 80 decibels across all frequencies of hearing in both ears. Medical evidence in the form of an audiometry and sound-threshold tests result must be provided and certified by an Ear, Nose, and Throat (ENT) specialist.

1.16 Elephantiasis

Elephantiasis is the result and complication of filariasis, characterized by massive swelling in the tissues of the body as a result of permanent obstructed circulation in lymphatic vessels, resulting in permanent inability of the person covered to perform at least 3 of the activities of daily living (as stated in clause 1.2 of this annexure).

Unequivocal diagnosis of Elephantiasis must be clinically confirmed by a specialist in infectious disease or specialist in the relevant field, including laboratory confirmation of microfilariae.

Lymphoedema caused by infection with a sexually transmitted disease, trauma, postoperative scarring, congestive heart failure, or congenital lymphatic system abnormalities are excluded.

1.17 Encephalitis - resulting in permanent inability to perform activities of daily living

Severe inflammation of brain substance, resulting in permanent functional impairment. The permanent functional impairment must result in an inability to perform at least 3 of the activities of daily living (as stated in clause 1.2 of this annexure). A minimum assessment period of 30 days applies. The covered event must be certified by a neurologist.

Encephalitis in the presence of HIV infection is not covered.

1.18 End-Stage Liver Failure

End stage liver failure as evidenced by all of the following:

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- (a) Permanent jaundice;
- (b) Ascites (excessive fluid in peritoneal cavity); and
- (c) Hepatic encephalopathy.

Liver failure secondary to alcohol or drug abuse is not covered.

1.19 End-Stage Lung Disease

End-stage lung disease causing chronic respiratory failure. All of the following criteria must be met:

- (a) The need for regular oxygen treatment on a permanent basis;
- (b) Permanent impairment of lung function with a consistent Forced Expiratory Volume (FEV) of less than 1 liter during the first second;
- (c) Shortness of breath at rest; and
- (d) Baseline Arterial Blood Gas analysis with partial oxygen pressures of 55mmHg or less.

1.20 Full-Blown AIDS

The clinical manifestation of Acquired Immuno-deficiency Syndrome (AIDS) must be supported by the results of a positive Human Immunodeficiency Virus (HIV) antibody test and a confirmatory test. In addition, the person covered must have a CD4 cell count of less than 200/ μ L and one or more of the following criteria are met:

- (a) Weight loss of more than 10% of body weight over a period of 6 months or less (wasting syndrome);
- (b) Kaposi Sarcoma;
- (c) Pneumocystis Carinii Pneumonia;
- (d) Progressive multifocal leukoencephalopathy;
- (e) Active Tuberculosis;
- (f) Less than 1000 Lymphocytes/ μ L ; or
- (g) Malignant Lymphoma.

1.21 Fulminant Viral Hepatitis

A sub-massive to massive necrosis (death of liver tissue) caused by any virus as evidenced by all of the following diagnostic criteria:

- (a) A rapidly decreasing liver size as confirmed by abdominal ultrasound;
- (b) Necrosis involving entire lobules, leaving only a collapsed reticular framework;
- (c) Rapidly deteriorating liver functions tests; and
- (d) Deepening jaundice.

Viral hepatitis infection or carrier status alone (inclusive but not limited to Hepatitis B and Hepatitis C) without the above diagnostic criteria is not covered.

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122 Heart Attack - of specified severity

Death of heart muscle, due to inadequate blood supply, that has resulted in all of the following evidence of acute myocardial infarction:

- (a) A history of typical chest pain;
- (b) New characteristic electrocardiographic changes; with the development of any of the following: ST elevation or depression, T wave inversion, pathological Q waves or left bundle branch block; and
- (c) Elevation of the cardiac biomarkers, inclusive of CPK-MB above the generally accepted normal laboratory levels or Troponins recorded at the following levels or higher:
 - Cardiac Troponin T or Cardiac Troponin I $> / = 0.5 \text{ ng/ml}$

The evidence must show the occurrence of a definite acute myocardial infarction which should be confirmed by a cardiologist or physician.

For the above definition, the following are not covered:

- (a) occurrence of an acute coronary syndrome including but not limited to unstable angina; and
- (b) a rise in cardiac biomarkers resulting from a percutaneous procedure for coronary artery disease.

123 Heart Valve Surgery

The actual undergoing of open-heart surgery to replace or repair cardiac valves as a consequence of heart valve defects or abnormalities. For the above definition, the following are not covered:

- (a) Repair via intra-arterial procedure; and
- (b) Repair via keyhole surgery or any other similar techniques.

124 HIV Infection due to Blood Transfusion

Infection 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 this contract;
- (c) The source of the infection is established to be from the institution that provided the blood transfusion and the institution is able to trace the origin of the HIV tainted blood;
- (d) The person covered does not suffer from haemophilia; and
- (e) The person covered is not a member of any high risk groups including but not limited to intravenous drug users.

125 Kidney Failure - requiring dialysis or kidney transplant

End-stage kidney failure presenting as chronic irreversible failure of both kidneys to function, as a result of which regular dialysis is initiated or kidney transplantation is carried out.

126 Loss of Independent Existence

Sun Life Malaysia Assurance Berhad

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Level 11, 338 Jalan Tuanku Abdul Rahman, 50100 Kuala Lumpur, Malaysia

Telephone (603) 2612 3600 Client Careline 1300-88-5055 wecare@sunlifemalaysia.com

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Confirmation by an appropriate specialist of the loss of independent existence and resulting in a permanent inability to perform at least 3 of the activities of daily living (as stated in clause 1.2 of this annexure). A minimum assessment period of 6 months applies.

127 Loss of Speech

Total, permanent and irreversible loss of the ability to speak as a result of injury or illness. A minimum assessment period of 6 months applies. Medical evidence to confirm injury or illness to the vocal cords to support this disability must be supplied by an Ear, Nose, and Throat (ENT) specialist.

All psychiatric related causes are not covered.

128 Major Head Trauma - resulting in permanent inability to perform activities of daily living

Physical head injury resulting in permanent functional impairment verified by a neurologist. The permanent functional impairment must result in an inability to perform at least 3 of the activities of daily living (as stated in clause 1.2 of this annexure). A minimum assessment period of 3 months applies.

129 Major Organ/Bone Marrow Transplant

The receipt of 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, pancreas that resulted from irreversible end-stage failure of the relevant organ.

Other stem cell transplants are not covered.

130 Medullary Cystic Disease

A progressive hereditary disease of the kidneys characterised 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 kidney failure. Diagnosis must be supported by a renal biopsy.

131 Motor Neuron Disease - permanent neurological deficit with persisting clinical symptoms

A definite diagnosis of motor neuron disease by a neurologist with reference to either spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis or primary lateral sclerosis. There must be permanent neurological deficit with persisting clinical symptoms.

132 Multiple Sclerosis

A definite diagnosis of multiple sclerosis by a neurologist. The diagnosis must be supported by all of the following:

- (a) Investigations which confirm the diagnosis to be Multiple Sclerosis;
- (b) Multiple neurological deficits resulting in impairment of motor and sensory functions occurring over a continuous period of at least 6 months; and
- (c) Well documented history of exacerbations and remissions of said symptoms or neurological deficits.

133 Muscular Dystrophy

The definite diagnosis of a Muscular Dystrophy by a neurologist which must be supported by all of the following:

- (a) Clinical presentation of progressive muscle weakness;

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(b) No central/peripheral nerve involvement as evidenced by absence of sensory disturbance; and

(c) Characteristic electromyogram and muscle biopsy findings.

No benefit will be payable under this covered event before the person covered's attainment of age 12 years old.

1.34 Occupationally Acquired Human Immunodeficiency Virus (HIV) Infection

Infection with the Human Immunodeficiency Virus (HIV) (only if the person covered is a medical staff as defined below), where it was acquired as a result of an accident occurring during the course of carrying out normal occupational duties with seroconversion to HIV infection occurring within 6 months of the accident. Any accident giving rise to a potential claim must be reported to us within 30 days of the accident taking place supported by a negative HIV test taken within 7 days of the accident.

Medical staff is defined as doctors (General Physicians and Specialists), traditional practitioners, nurses, paramedics, laboratory technicians, dentists, dental nurses, ambulance workers who are working in a medical centre or hospital or dental clinic/polyclinic in Malaysia. Doctors, traditional practitioners, nurses and dentists must be registered with the Ministry of Health of Malaysia.

1.35 Paralysis of Limbs

Total, permanent and irreversible loss of use of both arms or both legs, or of one arm and one leg, through paralysis caused by illness or injury. A minimum assessment period of 6 months applies.

1.36 Parkinson's Disease - resulting in permanent inability to perform activities of daily living

A definite diagnosis of Parkinson's Disease by a neurologist where all the following conditions are met:

(a) Cannot be controlled with medication;

(b) Shows signs of progressive impairment; and

(c) Confirmation of the permanent inability of the person covered to perform without assistance 3 or more of the activities of daily living (as stated in clause 1.2 of this annexure).

Only idiopathic Parkinson's Disease is covered. Drug-induced or toxic causes of Parkinsonism are not covered.

1.37 Poliomyelitis

The occurrence of Poliomyelitis where the following conditions are met:

(a) Poliovirus is identified as the cause; and

(b) Paralysis of the limb muscles or respiratory muscles must be present and persist for at least 3 months.

1.38 Primary Pulmonary Arterial Hypertension - of specified severity

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Level 11, 338 Jalan Tuanku Abdul Rahman, 50100 Kuala Lumpur, Malaysia
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A definite diagnosis of 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.

Pulmonary arterial hypertension resulting from other causes shall be excluded from this benefit. The NYHA Classification of Cardiac Impairment for Class III and Class IV means the following:

- (a) Class III: Marked limitation of physical activity. Comfortable at rest but less than ordinary activity causes symptoms.
- (b) Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.

1.39 Progressive Scleroderma

A systemic collagen-vascular disease causing progressive diffuse fibrosis in the skin, blood vessels and visceral organs. This diagnosis must be unequivocally supported by biopsy and serological evidence and the disorder must have reached systemic proportions to involve the heart, lungs or kidneys.

The following are excluded:

- (a) Localised scleroderma (linear scleroderma or morphea);
- (b) Eosinophilic fascitis; and
- (c) CREST syndrome.

1.40 Serious Coronary Artery Disease

The narrowing of the lumen of Right Coronary Artery (RCA), Left Anterior Descending Artery (LAD) and Circumflex Artery (not inclusive of their branches) occurring at the same time by a minimum of 60% in each artery as proven by coronary arteriography (non-invasive diagnostic procedures are not covered). A narrowing of 60% or more of the Left Main Stem will be considered as a narrowing of the Left Anterior Descending Artery (LAD) and Circumflex Artery. This covered event is payable regardless of whether or not any form of coronary artery surgery has been performed.

1.41 Stroke - resulting in permanent neurological deficit with persisting clinical symptoms

Death of brain tissue due to inadequate blood supply, bleeding within the skull or embolization from an extra cranial source resulting in permanent neurological deficit with persisting clinical symptoms. The diagnosis must be based on changes seen in a CT scan or MRI and certified by a neurologist. A minimum assessment period of 3 months applies.

For the above definition, the following are not covered:

- (a) Transient ischemic attacks;
- (b) Cerebral symptoms due to migraine;
- (c) Traumatic injury to brain tissue or blood vessels; and

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(d) Vascular disease affecting the eye or optic nerve or vestibular functions.

1.42 Surgery to Aorta

The actual undergoing of surgery via a thoracotomy or laparotomy (surgical opening of thorax or abdomen) to repair or correct an aortic aneurysm, an obstruction of the aorta or a dissection of the aorta. For this definition, aorta shall mean the thoracic and abdominal aorta but not its branches.

For the above definition, the following are not covered:

- (a) angioplasty;
- (b) other intra-arterial or catheter based techniques;
- (c) other keyhole procedures; and
- (d) laser procedures.

1.43 Systemic Lupus Erythematosus with Severe Kidney Complications

A definite diagnosis of Systemic Lupus Erythematosus confirmed by a rheumatologist.

For this definition, the covered event is payable only if it has resulted in Type III to Type V Lupus Nephritis as established by renal biopsy. Other forms such as discoid lupus or those forms with only haematological or joint involvement are not covered.

WHO Lupus Classification:

Type III : Focal segmental

glomerulonephritis Type IV : Diffuse

glomerulonephritis

Type V : Membranous glomerulonephritis

1.44 Terminal Illness

The conclusive diagnosis of a condition that is expected to result in death of the person covered within 12 months. The person covered must no longer be receiving active treatment other than that for pain relief. The diagnosis must be supported by written confirmation from an appropriate specialist and confirmed by our appointed doctor.

1.45 Third Degree Burns - of specified severity

Third degree (i.e. full thickness) skin burns covering at least 20% of the total body surface area.

1.46 Wilson's Disease

A potentially fatal disorder of copper toxicity characterised by progressive liver disease and/or neurologic deterioration due to copper deposit. The diagnosis must be confirmed by a specialist and the treatment with a chelating agent must be documented for at least 6 months.

This list is updated up till the time of the release of the article only. The final list of Critical Illnesses covered is subject to change or is up to the final terms and conditions of the Insurance / Takaful plan at the point of sign up / purchase.

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