



A Guide to **Critical Illness Cover**

Contents

1. Introduction

- 1.1 Critical illness cover
- 1.2 Critical illness definitions
- 1.3 Important information

2. Key questions answered

- 2.1 Which illnesses are covered?
- 2.2 Do any exclusions apply?
- 2.3 What else is included?

3. The critical illnesses and conditions we cover

- 3.1 Alzheimer's Disease or Pre-Senile Dementia
- 3.2 Aorta Graft Surgery
- 3.3 Aplastic Anaemia
- 3.4 Arteriovenous Malformation (AVM) of the Brain
- 3.5 Bacterial Meningitis
- 3.6 Benign Brain Tumour
- 3.7 Benign Spinal Cord Tumour
- 3.8 Bladder Removal
- 3.9 Blindness
- 3.10 Cancer
- 3.11 Carcinoma in Situ of the Breast
- 3.12 Carcinoma in Situ of the Cervix
- 3.13 Carcinoma in Situ of the Testicle
- 3.14 Cardiac Arrest
- 3.15 Cardiomyopathy
- 3.16 Cerebral Aneurysm
- 3.17 Coma
- 3.18 Coronary Artery By-Pass Grafts
- 3.19 Creutzfeldt-Jakob Disease
- 3.20 Crohn's Disease
- 3.21 Deafness
- 3.22 Devic's Disease
- 3.23 Encephalitis
- 3.24 Heart Attack
- 3.25 Heart Valve Replacement or Repair

- 3.26 HIV Infection
- 3.27 Intensive Care Requiring Mechanical Ventilation for 30 Consecutive Days
- 3.28 Kidney Failure
- 3.29 Liver Failure
- 3.30 Loss of Hand or Foot
- 3.31 Loss of Independent Existence
- 3.32 Loss of Speech
- 3.33 Low Grade Prostate Cancer
- 3.34 Major Organ Transplant
- 3.35 Motor Neurone Disease
- 3.36 Multiple Sclerosis
- 3.37 Multiple System Atrophy
- 3.38 Non-Malignant Pituitary Tumour
- 3.39 Paralysis of a Limb
- 3.40 Parkinson's Disease
- 3.41 Pneumonectomy
- 3.42 Primary Pulmonary Hypertension
- 3.43 Progressive Supranuclear Palsy
- 3.44 Pulmonary Artery Surgery
- 3.45 Removal of an Eyeball
- 3.46 Rheumatoid Arthritis
- 3.47 Severe Lung Disease
- 3.48 Significant Visual Impairment
- 3.49 Spinal Stroke
- 3.50 Stroke
- 3.51 Structural Heart Surgery
- 3.52 Systemic Lupus Erythematosus
- 3.53 Third Degree Burns
- 3.54 Total Permanent Disability
- 3.55 Traumatic Brain Injury

4. Standard exclusions

- 4.1 Criminal Acts or Self-inflicted Injury

5. Further information

- 5.1 How to contact us

1. Introduction

We've written this guide on the basis that the planholder is the person covered by the plan. However, it's possible for the planholder to take out cover on another person.

It tells you which illnesses we cover, the circumstances in which we'll pay a claim and the exclusions we use.

1.1 Critical illness cover

Critical illness cover is available as an option on our Term Assurance and Mortgage Life Insurance Plans (Life and Critical Illness Cover):

- **Life and critical illness cover** – pays out a lump sum if you either die, or are diagnosed with a critical illness that meets our plan definition during the term of the policy and then survive for at least 14 days. We only cover the critical illnesses we define in our plan and no others. This means we can only consider a claim for these illnesses. And any illness must meet the definition before we can pay a claim.

Alternatively, the plan will pay out if you are diagnosed as suffering from a terminal illness within the plan term with a life expectancy of less than 12 months.

We will only pay the cover amount out once. So in the event of a successful claim on death, terminal illness or full critical illness cover the plan will end.

Critical Illness Cover is available as an option on our Term Assurance and Mortgage Life Insurance Plans. The cover is available for a term of your choice subject to:

- your age,
- the type of premiums that you choose,
- any other options you may include, and
- any age restrictions for the plan that you are adding the cover to.

Life and Critical Illness Cover has no cash in value at any time. If you stop paying your premiums your policy will end.

1.2 Critical illness definitions

There are lots of different critical illness policies available. So to help you compare policies more easily, the Association of British Insurers (ABI) has published industry standard definitions for the illnesses most commonly covered and industry standard definitions for the plan exclusions most commonly used. These are in the ABI Statement of Best Practice for Critical Illness Cover.

Where there are industry standard definitions, we'll use them. Where there isn't, or where we exceed them, we'll use our own.

The definitions for new plans can change from time to time, for example to reflect advances in medical science. If you don't make changes to your plan, the definitions that applied at the time you took out the plan will not change.

Please read your plan conditions to find out the definitions for your plan.

This guide doesn't replace or enhance our plan conditions. If you make a critical illness claim, we'll assess it using the definitions in your particular plan conditions.

1.3 Important information

It's important that we make it clear to you what is and isn't included in your critical illness cover. It's just as important that you give us clear and accurate information.

You should complete your application in as much detail as possible, accurately and honestly. We can only provide cover if we know the full facts about the person we are insuring. If you don't give us all the information we ask for on the application, we may not be able to pay any claim you make.

Please make sure that you read all the questions carefully and answer them fully, truthfully and completely. Take your time completing the application as it plays an important part in our decision on the cover we can offer you.

Remember, one of the reasons for buying life insurance is to help protect those closest to you. So, to give you the peace of mind you're paying for, please tell us everything. Don't assume that we will contact your doctor to fill in any gaps. We promise we'll only take into account the information we feel is relevant to your application. In most cases, we'll be able to offer you the kind of cover that's right for you.

Wherever possible, take a copy of your application and keep it safe so you can check your answers to see if you have forgotten to include any information. If you complete an electronic application, you will receive confirmation of your application to check.

2. Key questions answered

2.1 What critical illness conditions are covered?

To meet industry standards and to qualify as a critical illness plan, our plan must cover you for:

- **Cancer** – *excluding less advanced cases*
- **Heart Attack** – *of specified severity*
- **Stroke** – *resulting in permanent symptoms*

We've listed all the conditions we cover. This is only a guide. You can find the full definitions for each illness and condition we cover in section 3 of this guide or in your plan terms and conditions. The definitions often use medical terms to describe the illnesses.

In some cases, we may limit the cover we provide. For example, we don't cover all types of cancer, for some illnesses you must have permanent symptoms, and in some cases we will pay a reduced benefit.

Please ask your financial adviser for a copy of the terms and conditions. If you don't have an adviser, please contact us directly.

- **Alzheimer's Disease or Pre-Senile Dementia (before age 65)** – *resulting in permanent symptoms*
- **Aorta Graft Surgery** – *for disease or trauma*
- **Aplastic Anaemia**
- **Arteriovenous Malformation (AVM) of the Brain** – *with specified treatment*
Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See section 2.4a for more information about this.
- **Bacterial Meningitis**
- **Benign Brain Tumour** – *resulting in permanent symptoms or requiring invasive surgery*
- **Benign Spinal Cord Tumour**
- **Bladder Removal**
Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See section 2.4a for more information about this.
- **Blindness** – *permanent and irreversible*
- **Cancer** – *excluding less advanced cases*
- **Carcinoma in Situ of the Breast** – *requiring surgery to remove the tumour*
Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See section 2.4a for more information about this.
- **Carcinoma in Situ of the Cervix** – *requiring treatment with hysterectomy*
Included as a separate benefit of the main plan providing a maximum of £20,000 or 20% of the critical illness cover whichever is lower. See section 2.4a for more information about this.

- **Carcinoma in Situ of the Testicle** – *requiring surgical removal of one or both testicles*
Included as a separate benefit of the main plan providing a maximum of £20,000 or 20% of the critical illness cover whichever is lower. See section 2.4a for more information about this.
- **Cardiac Arrest** – *with insertion of a cardiac defibrillator*
- **Cardiomyopathy** – *of specified severity*
- **Cerebral Aneurysm** – *with specified treatment*
Included as a separate benefit of the main plan providing a maximum of £20,000 or 20% of the critical illness cover whichever is lower. See section 2.4a for more information about this.
- **Coma** – *with associated permanent symptoms*
- **Coronary Artery By-Pass Grafts**
- **Creutzfeldt-Jakob Disease**
- **Crohn's Disease** – *treated with intestinal resection*
Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See section 2.4a for more information about this.
- **Deafness** – *permanent and irreversible*
- **Devic's Disease** – *with persisting clinical symptoms*
- **Encephalitis**
- **Heart Attack**
- **Heart Valve Replacement or Repair**
- **HIV Infection** – *caught in the European Union, North America, Australia or New Zealand from a blood transfusion, a physical assault or at work*
- **Intensive Care** – *requiring mechanical ventilation for 30 consecutive days*
- **Kidney Failure** – *requiring permanent dialysis*
- **Liver Failure**
- **Loss of Hand or Foot** – *permanent physical severance*
- **Loss of Independent Existence**
- **Loss of Speech** – *total, permanent and irreversible*
- **Low Grade Prostate Cancer** – *with specified treatment*
Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See section 2.4a for more information about this.
- **Major Organ Transplant** – *from another donor*
- **Motor Neurone Disease** – *resulting in permanent symptoms*
- **Multiple Sclerosis** – *with current symptoms*
- **Multiple System Atrophy**
- **Non-Malignant Pituitary Tumour** – *with specified treatment*
Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See section 2.4a for more information about this.

- **Paralysis of a Limb** – *total and irreversible*
- **Parkinson's Disease before age 65** – *resulting in permanent symptoms*
- **Pneumonectomy** – *removal of a complete lung*
- **Primary Pulmonary Hypertension** – *of specified severity*
- **Progressive Supranuclear Palsy**
- **Pulmonary Artery Surgery**
- **Removal of an Eyeball**

Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See section 2.4a for more information about this.

- **Rheumatoid Arthritis** – *of specified severity*
- **Severe Lung Disease** – *of specified severity*
- **Significant Visual Impairment**

Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See section 2.4a for more information about this.

- **Spinal Stroke** – *resulting in permanent symptoms*
- **Stroke**
- **Structural Heart Surgery**
- **Systemic Lupus Erythematosus** – *of specified severity*
- **Third Degree Burns** – *covering at least 20% of the body's surface area or covering at least 20% of the surface area of the face or head*
- **Total Permanent Disability before age 65**
- **Traumatic Brain Injury** – *resulting in permanent symptoms*

We'll pay out under total permanent disability if you become **totally and permanently disabled** before age 65 because of sickness or accident. The definition of disability we use will depend on your occupation and won't change unless you are not in paid employment immediately before the sickness or accident that caused the claim.

2.2 Do any exclusions apply?

Yes. There is one standard exclusion that applies. This exclusion doesn't apply to all of the illnesses or conditions listed above, but only to specific ones listed in section four of this guide. Similar to the industry standard definitions for the definitions of illness, the ABI has published industry standard definitions for the most common exclusions – the circumstances in which we won't pay an otherwise valid claim. We've outlined these in section 4 of this guide.

2.3 What else is included?

2.3a Additional critical illness benefit

We include arteriovenous malformation (AVM) of the brain, bladder removal, carcinoma in situ of the breast, carcinoma in situ of the cervix, carcinoma in situ of the testicle, cerebral aneurysm, crohn's disease treated with intestinal resection, low grade prostate cancer, non-malignant pituitary tumour, removal of an eyeball and significant visual impairment as extra cover if you take out critical illness cover.

Each person covered under the plan can only claim these benefits once. The most we'll pay is the lower of £20,000 or 20% of the insured amount. Any claim we pay for these conditions won't affect the amount you can claim under your critical illness cover. This means that your insured amount remains in place in case you suffer from a defined critical illness in the future. If you claim for an additional critical illness, it won't affect what we'd pay for a terminal illness or death claim either.

2.3b Children's benefit

Our critical illness cover includes children's benefit. This means that all of your natural, step or legally adopted children and any future children are covered for all the illnesses listed (except for total permanent disability before age 65) and for death during the period of cover.

For children's benefit to be payable, the child covered must be diagnosed with a critical illness that we cover and survive for at least 14 days, or die during the period of cover. The period of cover will start from when the child covered is 30 days old and end on their 18th birthday, or 21st birthday if they are in full time education.

By full time education we mean attendance at a full time course at a school, college or university. This includes placements that are part of a full time course, but excludes breaks from education for example gap year.

The most we'll pay for each child on diagnosis of a critical illness will be the lesser of £25,000 or 50% of the critical illness benefit. The amount payable in the event of a child's death will be £5,000.

We'll only pay out once for each child on each plan you hold for the critical illness cover under children's benefit. If a child were to die we would pay out the children's death benefit even if you had already claimed for the critical illness cover. If we pay out for a child, your plan will continue to cover you and any other children.

3. The critical illnesses and conditions we cover

We've listed all the critical illnesses and conditions we cover alphabetically along with the definition we'll use to assess any claim you make.

We've also included a glossary and guidance notes to help you understand exactly what your plan covers.

3.1 Alzheimer's Disease

Aviva definition

Alzheimer's Disease or Pre-Senile Dementia (before age 65) – *resulting in permanent symptoms*

A person covered by the plan must have a definite diagnosis of Alzheimer's Disease or Pre-Senile Dementia (before age 65) by a consultant neurologist, psychiatrist or geriatrician. There must be permanent clinical loss of the ability to do all of the following:

- remember;
- reason; and
- perceive, understand, express and give effect to ideas.

Glossary

Dementia – A symptom of degenerative brain disease characterised by impairment of intellectual faculties, such as memory, concentration and judgement.

Permanent – Expected to last throughout the life of the person covered by the plan, regardless of when the cover ends or the person retires.

Guidance notes

Alzheimer's disease is a degenerative condition which affects the brain.

A claim will be valid if Alzheimer's Disease or Pre-Senile Dementia is diagnosed and the illness has reached the point where there are permanent clinical symptoms of dementia.

This plan only covers this illness if it is diagnosed before age 65.

3.2 Aorta Graft Surgery

Aviva definition

Aorta Graft Surgery – for disease or trauma

The undergoing of surgery for disease or trauma to the aorta with excision and surgical replacement of a portion of the diseased aorta with a graft.

The term aorta includes the thoracic and abdominal aorta but not its branches.

For the above definition, the following is not covered:

- Any other surgical procedure, for example the insertion of stents or endovascular repair.

Glossary

Aorta – The main artery of the body, arising from the heart and supplying oxygenated blood to the body.

Branches – Any smaller arteries that branch off from the main aorta.

Endovascular repair – A minimally invasive method of approaching and repairing the diseased portion of the aorta through the body's arteries.

Graft – Any organ or tissue implanted to repair or replace a diseased or damaged organ or body tissue.

Stent – A tubular structure placed within a blood vessel or organ, used to provide support during or after surgical procedures.

Thoracic and abdominal aorta - The parts of the aorta that lie within the thorax (chest) and abdomen (stomach).

Guidance notes

Aorta Graft Surgery may be required if the aorta has narrowed due a build up of fatty deposits or has been weakened by a ballooning of the artery wall (an aneurysm) or following trauma. A claim will be valid if surgery has been carried out to repair the aorta with a graft after it has been damaged through disease or trauma.

This definition does not cover surgery to repair the aorta in other circumstances.

3.3 Aplastic Anaemia

Aviva definition

Aplastic Anaemia

A definite diagnosis of aplastic anaemia by a consultant haematologist. There must be permanent bone marrow failure with anaemia, neutropenia and thrombocytopenia.

Glossary

Anaemia – Having reduced haemoglobin concentration in the blood.

Neutropenia – Abnormally low number of blood cells called neutrophils.

Thrombocytopenia – Abnormally low number of platelets (particles involved in clotting) in the blood.

Guidance notes

Aplastic Anaemia is a serious condition where there is a decrease in the blood forming cells in the bone marrow. It is rare, but if left untreated can be fatal.

3.4 Arteriovenous Malformation (AVM) of the Brain

Aviva definition

Arteriovenous Malformation (AVM) of the Brain – with specified treatment

The undergoing of craniotomy, endovascular repair or radiosurgery to treat an arteriovenous malformation (AVM) of the brain.

Glossary

Arteriovenous Malformation – An abnormal connection between veins and arteries.

Craniotomy – An operation to open the skull.

Endovascular – Treatment from inside a blood vessel.

Radiosurgery – A treatment to deliver precisely directed radiation to destroy tissue.

Guidance notes

An untreated AVM may cause a range of neurological symptoms such as headaches or epilepsy but the major risk is that it could start bleeding and cause a stroke.

3.5 Bacterial Meningitis

Aviva definition

Bacterial Meningitis

A definite diagnosis of bacterial meningitis resulting in permanent neurological deficit with persisting clinical symptoms.

Glossary

Meninges – Membranes that cover and protect the brain and spinal cord.

Permanent neurological deficit – Symptoms of dysfunction in the nervous system that are present on clinical examination. Symptoms would include impairment or loss of sight or hearing, spasticity, epilepsy/seizures, cognitive impairment (cognition involves perception, reasoning, and problem solving abilities).

Guidance notes

Bacterial Meningitis is an infection of the fluid in the spinal cord and the fluid that surrounds the brain.

It is caused by an infection with a bacterium. It is a serious illness requiring prompt treatment, and can result in damage to the brain.

The plan doesn't cover viral meningitis, which is usually relatively mild and responds rapidly to treatment.

3.6 Benign Brain Tumour

Aviva definition

Benign Brain Tumour – resulting in permanent symptoms or requiring invasive surgery

A non-malignant tumour or cyst originating from the brain, cranial nerves or meninges within the skull, resulting in permanent neurological deficit with persisting clinical symptoms or requiring invasive surgery.

For the above definition, the following are not covered:

- Tumours in the pituitary gland.
- Tumours originating from bone tissue.
- Angiomas and cholesteatoma.

Glossary

Angioma – A benign tumour of blood vessels.

Benign – Not malignant.

Cranial nerves – Nerves that come from the base of the brain.

Cyst – A cavity or sac enclosed by a membrane, often containing liquid or semi-solid material.

Lesions – Areas of tissue with impaired function due to illness or injury.

Meninges – The protective tissue that covers the brain and spinal cord.

Pituitary gland – A small pea-sized organ connected by a stalk to the middle of the underside of the brain behind the nasal cavity.

Guidance notes

A benign tumour is an abnormal growth of cells which, unlike a malignant or cancerous tumour, does not spread to other parts of the body. Benign tumours in the brain are more dangerous because of the increase in pressure as they grow. Surgery to remove benign tumours may be required, but is not always possible.

Malignant tumours are not covered under this definition as these are covered under the cancer definition.

This plan does not cover benign tumours, angiomas or lesions in the pituitary gland.

3.7 Benign Spinal Cord Tumour

Aviva definition

Benign Spinal Cord Tumour

A non-malignant tumour in the spinal canal involving the meninges or spinal cord. This tumour must be interfering with the function of the spinal cord which results in permanent neurological deficit with persisting clinical symptoms. This diagnosis must be made by a medical specialist and must be supported by appropriate evidence.

Excluded under this definition are cysts, granulomas, malformations in the arteries or veins of the spinal cord, haematomas, abscesses, disc protrusions and osteophytes.

Glossary

Meninges – The protective tissue that covers the brain and spinal cord.

Spinal cord – The nerve tissue that extends from the brain along the spine.

Spinal canal – The space in the bones of the backbone (vertebrae) through which the spinal cord passes.

Guidance notes

Tumours in the spinal cord are potentially dangerous as they can compress the spinal nerves and weaken the structure of the spine.

3.8 Bladder Removal

Aviva definition

Bladder Removal

Complete surgical removal of the urinary bladder (total cystectomy).

For the above definition the following are not covered:

- Urinary bladder biopsy
- Removal of a portion of the urinary bladder

Glossary

Not applicable

Guidance notes

The urinary bladder collects urine expelled by the kidneys before it is removed from the body by urination. Removal of the bladder requires the creation of an artificial opening for urine to pass. This definition covers all reasons for removal including carcinoma in situ of the bladder.

3.9 Blindness

Standard definition

Blindness – *permanent and irreversible*

Permanent and irreversible loss of sight to the extent that even when tested with the use of visual aids, vision is measured at 3/60 or worse in the better eye using a Snellen eye chart.

Glossary

3/60 – Means the person whose eyesight is being assessed can see an object up to 3 feet away that a person with perfect eyesight could see if it were 60 feet away.

Irreversible – Can't be reasonably improved upon by medical treatment and/or surgical procedures used by the NHS in the UK at the time of a claim.

Permanent – Expected to last throughout the life of the person covered by the plan, regardless of when the cover ends or the person retires.

Snellen eye chart – A chart showing letters in rows of decreasing size that opticians use to measure visual ability.

Visual aids – Anything which helps improve vision, for example contact lenses or a pair of glasses.

Guidance notes

Blindness means a significant loss of sight in both eyes to the extent that the person can only see an object up to 3 feet away that a person with perfect eyesight could see if it were 60 feet away.

The condition must be incurable and expected to be permanent.

Being registered blind may not lead to a valid claim.

3.10 Cancer

Aviva definition

Cancer – excluding less advanced cases

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 leukaemia, sarcoma and lymphoma except cutaneous lymphoma (lymphoma confined to the skin). For the above definition, the following are not covered:

- All cancers which are histologically classified as any of the following:
 - pre-malignant;
 - non-invasive;
 - cancer in situ;
 - having either borderline malignancy; or
 - having low malignant potential.
- All tumours of the prostate unless histologically classified as having a Gleason score of 7 or above or having progressed to at least TNM classification T2bN0M0.
- Any skin cancer (including cutaneous lymphoma) other than malignant melanoma that has been histologically classified as having caused invasion beyond the epidermis (outer layer of skin) unless the skin cancer has been confirmed as malignant and has spread to the lymph nodes or distant organs.

Glossary

Borderline malignancy – Potentially malignant cells that form in the tissue covering the organ and have not invaded the adjacent tissue.

Cancer in situ – The presence of malignant/cancerous cells at a stage of development such that they have not spread into surrounding healthy tissue.

In medical terminology, this means that the cancer cells are confined to the epithelium (the tissue that lines the internal and external surfaces of the body) of origin and have not yet invaded the adjacent tissue.

For malignant melanomas of the skin, this means that cancer cells are confined to the epidermis (the outermost layer of skin) and may be categorised as Clark's level 1.

Epidermis – The outer layer of skin.

Gleason score – A measure of how aggressive an individual's prostate cancer is. It is calculated from examining the prostate cancer cells under a microscope. Scores can range from 2 to 10, with 2 indicating the lowest degree of change and 10 the highest.

Histologically – The appearance of the cancer under the microscope which leads to its diagnosis and also gives information on its differentiation or grading (how aggressive it may be).

Hodgkin's disease – A type of cancer (lymphoma) affecting lymphatic tissue.

Invasion – The occurrence of malignant/cancerous cells that have spread into surrounding healthy tissue (that is, more extensive than cancer in situ).

Invasive malignant melanoma – A malignant melanoma which has progressed beyond the point of being confined to the epidermis (the outermost layer of skin). This will be categorised as Clark's level 2 or above.

Leukaemia – A disease of the blood forming tissues characterised by increased numbers of immature or abnormal blood cells, that leads to an increased tendency to infection, anaemia and haemorrhage.

Lymphoma – Cancer of the lymphatic (glandular) system, including Hodgkin and Non-Hodgkin lymphoma.

Low malignant potential – Potentially malignant cells that form in the tissue covering the organ and have not invaded the adjacent tissue.

Malignant tumour – A tumour that invades the tissue in which it originates and can spread to other parts of the body.

Non-invasive – Malignant/cancerous cells that have not spread into surrounding healthy tissue.

Sarcoma – Cancer of connective tissue such as bone, muscle, nerves, fatty tissue or cartilage.

Pre-malignant – Cells which may develop into a malignant tumour, but have not yet done so.

TNM classification – An internationally recognised standardised method of staging cancers. Broadly, the three parts of the system relate to:

- Tumour (T) – a scale of 0 to 4 is used to record details about the primary tumour. T0 means there is no evidence of a primary tumour, T1 to T4 shows the size and extent of spread of the primary tumour. 'Tis' may be used for cancer in situ.
- Nodes (N) – a scale of 0 to 3 is used to record the extent of spread to the regional lymph nodes. N0 means the lymph nodes are not involved, N1 – N3 shows the extent of the involvement.
- Metastases (M) – either M0 or M1, the latter indicating metastases (more distant spread of the cancer).

3.10 Cancer continued

Guidance notes

What is cancer?

Cancer is complex to define because it isn't a single illness. There are around 200 types and they affect people in different ways. A cancer is an uncontrolled growth of abnormal malignant cells which, if left untreated, can invade and destroy the surrounding healthy tissue. In the later more advanced stages, it can spread from the original site to other parts of the body.

When would a critical illness plan pay out?

Generally speaking, cancer claims are valid on the diagnosis of a malignant cancer that has reached the point where it has invaded and started to destroy the adjacent surrounding tissue. However, a few types of cancer are not covered.

What types of cancer are not covered?

The plan doesn't cover very early cases that have not yet started to invade the adjacent surrounding tissue in the organ, even if you receive treatment. Doctors sometimes call these cases 'pre-malignant', 'non-invasive', 'cancer in situ', 'having borderline malignancy' or 'having low malignant potential'.

Skin cancers other than malignant melanoma normally only affect the surface area of the skin and don't spread to other areas of the body. They are only covered in the very rare event when they have been confirmed as malignant and have spread extensively.

3.11 Carcinoma in Situ of the Breast

Aviva definition

Carcinoma in Situ of the Breast – *requiring surgery to remove the tumour*

Carcinoma in Situ of the Breast positively diagnosed with histological confirmation by biopsy together with the undergoing of surgery to remove the tumour.

For the above definition, the following is not covered;

- Lobular carcinoma in situ.

Glossary

Cancer in situ – The presence of malignant/cancerous cells at a stage of development such that they have not spread into surrounding healthy tissue.

Lobular carcinoma in situ (LCIS) – LCIS is not a cancer. It is an uncommon condition in which abnormal cells form in the lobules or milk glands in the breast. There is usually no need for any treatment when LCIS is diagnosed.

Guidance notes

Early development of cancer cells within the ducts of the breast without further spread or invasion of other parts of the breast or body. Surgery is the main treatment and can be in the form of a mastectomy, partial mastectomy or lumpectomy followed by radiation therapy.

Please read section 2.4a of this guide to find out more about the cover for this condition.

3.12 Carcinoma in Situ of the Cervix

Aviva definition

Carcinoma in Situ of the Cervix – *requiring treatment with hysterectomy*

Carcinoma in situ of the cervix positively diagnosed with histological confirmation together with the undergoing of a hysterectomy on the advice of a specialist, to treat the carcinoma in situ of the cervix.

The following are excluded:

- All grades of dysplasia.
- Cervical squamous epithelial lesion (SIL) and Cervical intra-epithelial neoplasia (CIN), unless carcinoma in-situ is present.
- Carcinoma in-situ of any other gynaecological organ (for example the ovary, or the fallopian tube).
- Any other disease or disorder of the cervix or other gynaecological organs that is treated with hysterectomy.

Glossary

Carcinoma in situ – The presence of malignant/cancerous cells at a stage of development such that they have not spread into surrounding healthy tissue.

Hysterectomy – Surgical removal of the uterus (also known as womb)

3.13 Carcinoma in Situ of the Testicle

Aviva definition

Carcinoma in Situ of the Testicle – *requiring surgical removal of one or both testicles*

Carcinoma in situ of the testicle (also known as intratubular germ cell neoplasia unclassified or ITGCNU) positively diagnosed with histological confirmation and treated with an orchidectomy (complete surgical removal of the testicle).

Glossary

Carcinoma in situ – The presence of malignant/cancerous cells at a stage of development such that they have not spread into surrounding healthy tissue.

3.14 Cardiac Arrest

Aviva definition

Cardiac Arrest – *with insertion of a cardiac defibrillator*

Sudden loss of heart function with interruption of blood circulation around the body resulting in unconsciousness and resulting in either of the following devices being surgically implanted:

- Implantable cardioverter-defibrillator (ICD) or;
- Cardiac resynchronisation therapy with defibrillator (CRT-D).

For the above definition the following are not covered:

- Insertion of a pacemaker.
- Insertion of a defibrillator without cardiac arrest.
- Cardiac arrest secondary to alcohol or drug abuse.

Glossary

Implantable cardioverter-defibrillator – a surgically implanted electronic device to treat life-threatening heartbeat irregularities by delivering a jolt of electricity when they are detected.

Cardiac resynchronisation therapy with defibrillator – treatment with an external electronic device to treat heartbeat irregularities.

Pacemaker – a surgically-implanted electronic device that regulates a slow or erratic heartbeat.

Guidance notes

A cardiac arrest happens when the heart stops pumping blood around the body. This may be due to several causes – the most common being abnormal heart rhythm called ventricular fibrillation. It is different from (but may be caused by) a heart attack.

3.15 Cardiomyopathy

Aviva definition

Cardiomyopathy – *of specified severity.*

A definite diagnosis of cardiomyopathy by a consultant cardiologist. There must be clinical impairment of heart function resulting in the permanent loss of ability to perform physical activities to at least Class 3 of the New York Heart Association classifications of functional capacity (i.e. heart disease resulting in marked limitation of physical activities where less than ordinary activity causes fatigue, palpitation, breathlessness or chest pain).

For the above definition the following are not covered:

- Cardiomyopathy secondary to alcohol or drug abuse.
- All other forms of heart disease, heart enlargement and myocarditis.

Glossary

New York Heart Association (NYHA) functional classification system – A method, commonly used in the UK, to assess heart function by relating symptoms to everyday activities and the patient's quality of life.

New York Heart Association Class 3 – Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes fatigue, palpitation, or dyspnoea (difficulty in breathing).

Myocarditis – Acute inflammation of the heart muscle caused by infection.

Guidance notes

Cardiomyopathies are a group of disorders of the heart muscle. They can cause sudden death or heart failure.

3.16 Cerebral Aneurysm

Aviva definition

Cerebral Aneurysm – *with specified treatment*

The undergoing of craniotomy, endovascular repair or radiosurgery to treat a cerebral aneurysm.

Glossary

Cerebral Aneurysm – a weakening of an artery or vein in the brain.

Craniotomy – An operation to open the skull.

Endovascular – Treatment from inside a blood vessel.

Radiosurgery – A treatment to deliver precisely directed radiation to destroy tissue.

Guidance notes

An untreated cerebral aneurysm may cause a range of symptoms such as headaches or vision impairment but the major risk is that it could burst and cause a stroke.

3.17 Coma

Aviva definition

Coma – *with associated permanent symptoms*

A state of unconsciousness with no reaction to external stimuli or internal needs which;

- requires the use of life support systems; and
- results in associated permanent neurological deficit with persisting clinical symptoms.

For the above definition, the following are not covered:

- Medically induced coma.
- Coma secondary to alcohol or drug abuse.

Glossary

External stimuli – Outside sensory events that would normally produce a response, eg sight, hearing, touch, taste or smell.

Internal needs – Needs of the body to survive, ie food, drink, using the toilet, etc.

Life support systems – Equipment used to assist breathing, feeding, drinking, etc.

Alcohol or drug abuse – Inappropriate use of alcohol or drugs, including but not limited to:

- consuming too much alcohol.
- taking an overdose of drugs, whether lawfully prescribed or otherwise.
- taking controlled drugs (as defined by the Misuse of Drugs Act 1971) otherwise than in accordance with a lawful prescription.

Permanent neurological deficit with persisting clinical symptoms - Symptoms of dysfunction in the nervous system that are present on clinical examination and expected to last throughout the life of the person covered by the plan.

Symptoms that are covered include numbness, hyperaesthesia (increased sensitivity), paralysis, localised weakness, dysarthria (difficulty with speech), aphasia (inability to speak), dysphagia (difficulty in swallowing), visual impairment, difficulty in walking, lack of coordination, tremor, seizures, lethargy, dementia, delirium and coma.

The plan doesn't cover:

- an abnormality seen on brain or other scans without definite related clinical symptoms
- neurological signs occurring without symptomatic abnormality, eg brisk reflexes without other symptoms
- symptoms of psychological or psychiatric origin.

Unconsciousness – The lack of normal sensory awareness caused by temporary or permanent damage to brain function.

Guidance notes

For a valid claim for coma:

- the person must have been on life support
- the incident must have caused permanent neurological deficit.

We won't accept a claim for coma if it's caused by:

- consuming too much alcohol
- taking an overdose of drugs, prescribed or otherwise
- taking controlled drugs unless lawfully prescribed.

3.18 Coronary Artery By-Pass Grafts

Aviva definition

Coronary Artery By-Pass Grafts

The undergoing of surgery on the advice of a consultant cardiologist to correct narrowing or blockage of one or more coronary arteries with by-pass grafts.

Glossary

Balloon angioplasty – A procedure to correct a narrowing of an artery and improve the blood flow. A balloon tipped catheter (fine tube) is passed along the affected artery and then inflated.

Coronary artery – An artery that supplies blood to the heart.

Guidance notes

Coronary Artery By-Pass Grafts involves attaching a short length of vein or by using arteries in the area of the breast to by-pass a blockage in one or more of the coronary arteries that supply blood to the heart.

The plan doesn't cover procedures like balloon angioplasty, atherectomy, rotablation lasers or the insertion of stents.

3.19 Creutzfeldt – Jakob disease

Aviva definition

Creutzfeldt – Jakob disease

An unequivocal diagnosis of Creutzfeldt-Jakob Disease made by a consultant neurologist.

Glossary

Not applicable.

Guidance notes

This is a disease affecting the brain and spinal cord for which there is no effective treatment. The disease usually progresses rapidly resulting in loss of intellectual capacity and co-ordination.

3.20 Crohn's Disease treated with intestinal resection

Aviva definition

Crohn's Disease

A definite diagnosis by a consultant gastroenterologist of Crohn's Disease which has been treated with surgical intestinal resection.

Glossary

Intestinal resection – Surgery to remove part of the intestine.

Guidance notes

Crohn's Disease causes inflammation or swelling and irritation of any part of the digestive tract. The most common symptoms are abdominal pain and diarrhoea. Rectal bleeding, weight loss and fever may also occur.

3.21 Deafness

Standard definition

Deafness – *permanent and irreversible*

Permanent and irreversible loss of hearing to the extent that the loss is greater than 95 decibels across all frequencies in the better ear using a pure tone audiogram.

Glossary

Decibels – A measure of the level of sound.

Irreversible – Can't be reasonably improved upon by medical treatment and/or surgical procedures used by the NHS in the UK at the time of a claim.

Permanent – Expected to last throughout the life of the person covered by the plan, regardless of when the cover ends or the person retires.

Pure tone audiogram – A device for measuring the extent of a person's hearing ability.

Guidance notes

Deafness means a profound loss of hearing in both ears where the condition can't be cured and is expected to be permanent. Being registered deaf may not always lead to a valid claim.

3.22 Devic's Disease

Aviva definition

Devic's Disease – *with persisting clinical symptoms*

A definite diagnosis of Devic's disease by a consultant neurologist. There must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 3 months.

Glossary

Clinical impairment – The clinical symptoms associated with the condition that can be detected through examination.

Motor – Relating to movement.

Sensory – Relating to the senses (sight, hearing, touch, taste or smell).

Guidance notes

Devic's (also known as Neuromyelitis Optica) is a disease similar to Multiple Sclerosis, affecting the brain and spinal cord. The definition requires that there are continuous symptoms for a period of at least three months that include deterioration of the senses (sight, hearing, touch, taste or smell) and/or the ability to control movement.

A consultant neurologist must confirm the diagnosis.

3.23 Encephalitis

Aviva definition

Encephalitis

A definite diagnosis of encephalitis by a consultant neurologist resulting in permanent neurological deficit with persisting clinical symptoms.

Glossary

Permanent neurological deficit with persisting clinical symptoms - Symptoms of dysfunction in the nervous system that are present on clinical examination and expected to last throughout the insured person's life.

Symptoms that are covered include numbness, hyperaesthesia (increased sensitivity), paralysis, localised weakness, dysarthria (difficulty with speech), aphasia (inability to speak), dysphagia (difficulty in swallowing), visual impairment, difficulty in walking, lack of coordination, tremor, seizures, lethargy, dementia, delirium and coma.

We **don't cover**:

- an abnormality seen on brain or other scans without definite related clinical symptoms
- neurological signs occurring without symptomatic abnormality, e.g. brisk reflexes without other symptoms
- symptoms of psychological or psychiatric origin.

Guidance notes

Encephalitis is a swelling of brain tissue. It is usually caused by an infection and can be life threatening.

3.24 Heart Attack

Aviva definition

Heart Attack

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

- new characteristic electrocardiographic changes.
- the characteristic rise of cardiac enzymes or Troponins.

The evidence must show a definite acute myocardial infarction.

For the above definition, the following are not covered:

- other acute coronary syndromes.
- angina without myocardial infarction.

Glossary

Acute – Intense and/or sudden in onset.

Angina – The often severe, chest pain or discomfort that is a symptom of coronary artery disease.

Cardiac enzymes or Troponins – Chemicals found in the blood that when elevated above normal levels may indicate damage to the heart muscle.

Electrocardiographic (ECG) – A tracing on graph paper representing the electrical events associated with the beating of the heart. Changes to the shape of the heartbeat trace can help diagnose a number of heart abnormalities, including acute myocardial infarction.

Myocardial infarction – Death of a portion of the myocardium (heart muscle) due to an abrupt obstruction of the coronary blood flow.

Guidance notes

If the blood supply to the heart is interrupted, this can cause a portion of the heart muscle to die. Doctors call this sudden death of heart muscle an acute myocardial infarction, but the condition is widely known as a heart attack. A heart attack causes permanent damage to the heart muscle which can be detected using an ECG machine, which traces the heartbeat.

When someone has a heart attack, chemicals such as cardiac enzymes and troponins are released into the blood stream. These are usually present for several days after the event and can be detected by using a blood test. The presence of these chemicals provides important diagnostic information, but they can also be present, usually at lower levels, for reasons other than a heart attack.

At the time of having a heart attack, most people experience very severe chest pain and/or other symptoms such as sweating, vomiting, fainting and nausea. These symptoms can help doctors pinpoint precisely when the incident happened.

It is important to note that the term 'heart attack' may sometimes be used loosely to describe a range of other heart conditions. None of these other conditions (for example, angina) are covered under this definition. Also, the medical profession has more than one definition for a heart attack as the effects of advancing medical science are debated by the profession. However, we'll only use the definition given in the plan to decide if a heart attack is covered.

3.25 Heart Valve Replacement or Repair

Aviva definition

Heart Valve Replacement or Repair

The undergoing of surgery on the advice of a consultant cardiologist to replace or repair one or more heart valves.

Glossary

Not applicable.

Guidance notes

The heart contains valves that help pump blood around the body. They will not function properly if they become diseased, so it may be necessary to repair or replace them through surgery.

3.26 HIV Infection

Standard definition

HIV Infection – caught in the European Union, North America, Australia or New Zealand from a blood transfusion, a physical assault or at work

Infection by human immunodeficiency virus resulting from:

- a blood transfusion given as part of medical treatment;
- a physical assault, or
- an incident occurring during the course of performing normal duties of employment after the start of the policy and satisfying all of the following:
 - The incident must have been reported to appropriate authorities and have been investigated in accordance with the established procedures.
 - Where HIV Infection is caught through a physical assault or as a result of an incident occurring during the course of performing normal duties of employment, the incident must be supported by a negative HIV antibody test taken within 5 days of the incident.
 - There must be a further HIV test within 12 months confirming the presence of HIV or antibodies to the virus.
 - The incident causing infection must have occurred in the European Union, North America, Australia or New Zealand.

For the above definition, the following is not covered:

- HIV Infection resulting from any other means, including sexual activity or drug abuse.

Glossary

Not applicable.

Guidance notes

HIV is covered if it is caught in the European Union, North America, Australia or New Zealand through a blood transfusion, a physical assault or at work. The plan doesn't cover HIV resulting from any other cause, for example sexual activity or drug abuse.

Where the incident relates to a physical assault, it should be reported to the police.

Similarly, if the incident occurred at work, it should be reported in line with the employer's procedures. Many employers, including people who work in the health or emergency services, have set procedures for dealing with incidents that may potentially lead to someone becoming infected with HIV.

In all cases, a test for HIV should be taken within five days of the incident. A negative test result will show that the person did not have HIV before the incident. A positive result from a further test carried out within a year will confirm that the infection resulted from the reported incident.

3.27 Intensive Care Requiring Mechanical Ventilation for 30 Consecutive Days

Aviva definition

Intensive Care Requiring Mechanical Ventilation for 30 Consecutive Days

Any sickness or injury resulting in the insured requiring continuous mechanical ventilation by means of tracheal intubation for 30 consecutive days (24 hours per day) or more in an Intensive Care Unit in a UK hospital. For the above definition the following is not covered: sickness or injury as a result of drug or alcohol intake or other self-inflicted means.

Glossary

Continuous mechanical ventilation – Replacing spontaneous breathing by use of a machine.

Tracheal intubation – Placing a tube into the windpipe to maintain an open airway.

Guidance notes

Intensive Care requiring mechanical intervention may be required due to an acute or chronic illness or following a serious injury.

3.28 Kidney Failure

Standard definition

Kidney Failure – *requiring permanent dialysis*

Chronic and end stage failure of both kidneys to function, as a result of which regular dialysis is permanently required.

Glossary

Chronic – Of long duration.

End stage – The final phase of a disease process.

Dialysis – The artificial means of removing toxic substances (impurities and wastes) from the blood when the kidneys are unable to do so.

Guidance notes

Kidneys clean the blood of waste products produced by the body. A claim for kidney failure will be valid if both kidneys have irreversibly stopped functioning and the person is having regular dialysis (a process using a machine to perform the function of the kidneys).

3.29 Liver Failure

Aviva definition

Liver Failure

A definite diagnosis, by a consultant physician, of irreversible end stage liver failure due to cirrhosis resulting in all of the following:

- Permanent jaundice;
- Ascites; and
- Encephalopathy.

For the above definition the following is not covered:

- Liver Failure secondary to alcohol or drug abuse.

Glossary

Cirrhosis – Long standing damage to the liver.

Jaundice – Yellow discolouration of the skin.

Ascites – Build up of fluid in the abdomen.

Encephalopathy – Brain disease or damage.

Guidance notes

The liver is a large organ that is essential to life. It carries out many functions including metabolizing nutrients and destroying toxins.

3.30 Loss of Hand or Foot

Aviva definition

Loss of Hand or Foot – *permanent physical severance*

Permanent physical severance of either a hand or a foot at or above the wrist or ankle joint.

Glossary

Not applicable.

Guidance notes

Loss of Hand or Foot is covered where the limb is permanently severed at or above the wrist in the case of a hand or the ankle in the case of a foot.

The limb might have been lost through physical injury or perhaps as a result of medical necessity to remove it using surgery.

3.31 Loss of Independent Existence

Aviva definition

Loss of Independent Existence

Loss of Independent Existence will mean a permanent inability to perform independently three or more activities of daily living with or without the use of mechanical equipment, special devices or other aids.

The definitions of the activities of daily living are:

1. Transferring – The ability to move from a bed to an upright chair or wheelchair and vice versa, or to get on or off a toilet or commode.
2. Continence – The ability to manage bowel and bladder functions such that an adequate level of personal hygiene can be maintained.
3. Dressing – The ability to put on, take off, secure and unfasten all necessary garments and any braces, artificial limbs or other surgical appliances.
4. Mobility – The ability to move indoors from one room to another on a level surface in the life insured's normal place of residence.
5. Feeding – The ability to feed oneself once food and drink has been prepared and made available.
6. Washing – The ability to wash in the bath or shower (including getting into and out of the bath or shower) such that an adequate level of personal hygiene can be maintained.

Confirmation must be received by a Consultant Physician and be supported by our medical adviser.

Glossary

Permanent – Expected to last throughout the life of the person covered by the plan, regardless of when the cover ends or the person retires.

Guidance notes

A person claiming under this condition usually needs daily help with their personal care.

3.32 Loss of Speech

Standard definition

Loss of Speech – *total, permanent and irreversible*

Total, permanent and irreversible loss of the ability to speak as a result of physical injury or disease.

Glossary

Irreversible – Can't be reasonably improved upon by medical treatment and/or surgical procedures used by the NHS in the UK at the time of a claim.

Permanent – Expected to last throughout the life of the person covered by the plan, regardless of when the cover ends or the person retires.

Guidance notes

Loss of Speech means completely losing the ability to speak as a result of physical injury or disease where the condition can't be cured and is expected to be permanent. The plan covers cases arising as a consequence of surgery or medical treatment for an illness.

3.33 Low Grade Prostate Cancer

Aviva definition

Low-grade prostate cancer – with specified treatment

Tumours of the prostate histologically classified as having a Gleason score between 2 and 6 inclusive provided the tumour has progressed to a clinical TNM classification between T1N0M0 and T2aN0M0; and the tumour has been treated by one of the following:

- Complete removal of the prostate.
- External beam or interstitial implant radiotherapy.
- Cryotherapy.
- Hormone therapy.
- High intensity focused ultrasound.

For the above definition, the following is not covered:

- Prostate cancers where the treatment is not one of the specified treatments above, or requires observation only.

Glossary

Gleason score – A measure of how aggressive an individual's prostate cancer is. It is calculated from examining the prostate cancer cells under a microscope. Scores can range from 2 to 10, with 2 indicating the lowest degree of change and 10 the highest.

TNM classification – An internationally recognised standardised method of staging cancers. Broadly, the three parts of the system relate to:

- Tumour (T) – a scale of 0 to 4 is used to record details about the primary tumour. T0 means there is no evidence of a primary tumour, T1 to T4 shows the size and extent of spread of the primary tumour. 'Tis' may be used for cancer in situ.
- Nodes (N) – a scale of 0 to 3 is used to record the extent of spread to the regional lymph nodes. N0 means the lymph nodes are not involved, N1 - N3 shows the extent of the involvement.
- Metastases (M) – either M0 or M1, the latter indicating metastases (more distant spread of the cancer).

Guidance notes

Low Grade Prostate Cancer is where the cancer is localised and has not spread outside the prostate gland.

Please read section 2.4a of this guide to find out more about the cover for this condition.

3.34 Major Organ Transplant

Aviva definition

Major Organ Transplant – from another donor

The undergoing as a recipient of a transplant from another donor, of bone marrow or of a complete heart, kidney, liver, lung or pancreas, or a whole lobe of the lung or liver, or inclusion on an official UK waiting list for such a procedure.

For the above definition, the following is not covered:

- Transplant of any other organs, parts of organs, tissues or cells.

Glossary

Lobe of the lung – Each lung is divided into two or three clear segments called lobes.

Lobe of the liver – The liver is divided into four segments called lobes.

Guidance notes

A claim for major organ transplant will be valid if any of the following organs need to be replaced by undergoing a transplant:

- bone marrow
- a whole heart
- a whole kidney
- a whole liver
- a whole lung
- a whole pancreas
- whole lobe of the lung
- whole lobe of the liver.

A claim will be valid from the point at which either:

- the person is added to a UK waiting list for a suitable replacement organ to become available, or
- the organ transplant takes place.

3.35 Motor Neurone Disease

Aviva definition

Motor Neurone Disease – *resulting in permanent symptoms*

A definite diagnosis of Motor Neurone Disease by a consultant neurologist. All forms of motor neurone disease are covered including spinal muscular atrophy. There must be permanent clinical impairment of motor function.

Glossary

Motor – Relating to movement.

Permanent – Expected to last throughout the life of the person covered by the plan, regardless of when the cover ends or the person retires.

Spinal muscular atrophy – A genetic disease that causes muscle weakness and a progressive loss of movement due to deteriorations of motor neurones in the spinal cord.

Guidance notes

Motor Neurone Disease is a degenerative condition that results in weakness and the wasting of muscles. The condition is covered if there is a definite diagnosis made by a consultant neurologist and the disease has reached the point where it has caused permanent impairment of the ability to move.

3.36 Multiple Sclerosis

Aviva definition

Multiple Sclerosis – *with current symptoms*

A definite diagnosis of multiple sclerosis by a consultant neurologist. There must be current clinical impairment of motor or sensory function caused by multiple sclerosis.

Glossary

Clinical impairment - The clinical symptoms associated with the condition that can be detected through examination.

Motor – Relating to movement.

Sensory – Relating to the senses (sight, hearing, touch, taste or smell).

Guidance notes

Multiple Sclerosis is a disease which attacks the central nervous system. The definition requires that when multiple sclerosis is diagnosed there are symptoms present such as deterioration of the senses (sight, hearing, touch, taste or smell) and/or the ability to control movement.

A consultant neurologist must confirm the diagnosis.

3.37 Multiple System Atrophy

Aviva definition

Multiple System Atrophy

A definite diagnosis of multiple system atrophy confirmed by a consultant neurologist. There must be evidence of permanent clinical impairment of either: Motor function with associated rigidity of movement or the ability to coordinate muscle movement or bladder control and postural hypotension.

Glossary

Postural hypotension – A sudden drop in blood pressure when standing up or stretching, which causes dizziness or blackouts.

Guidance notes

Multiple System Atrophy is a progressive neurological disorder. Degeneration of nerve cells in specific areas of the brain lead to problems with movement, balance and other functions of the body such as bladder control.

3.38 Non-Malignant Pituitary Tumour

Aviva definition

Non-Malignant Pituitary Tumour – *with specified treatment*

A non-malignant pituitary tumour requiring radiotherapy or surgical removal.

For the above definition the following are not covered:

- Non-malignant tumours of the pituitary gland treated by any other method.

Glossary

Not applicable.

Guidance notes

The pituitary gland is a small pea-sized organ connected by a stalk to the underside of the brain. Its function is to control levels of hormones produced elsewhere in the body. A tumour of the pituitary may be treated by medication only. Our definition covers surgery or radiotherapy to remove or reduce the size of the tumour.

3.39 Paralysis of a Limb

Aviva definition

Paralysis of a Limb – *total and irreversible*

Total and irreversible loss of muscle function to the whole of a limb.

Glossary

Irreversible – Can't be reasonably improved upon by medical treatment and/or surgical procedures used by the NHS in the UK at the time of a claim.

Paralysis – The loss of power of movement of a part of the body.

Guidance notes

Paralysis and paraplegia are covered if a person covered by the plan totally and irreversibly loses the ability to move or use a limb. The disability must be considered permanent.

Paralysis of the right or left half of the body is called hemiplegia. Paralysis of all four limbs is called quadriplegia.

3.40 Parkinson's Disease

Aviva definition

Parkinson's Disease before age 65 – *resulting in permanent symptoms*

A definite diagnosis of Parkinson's disease or other named Parkinsonian syndrome of specified severity (before age 65) by a consultant neurologist. The additional Parkinsonian syndromes covered are corticobasal degeneration and diffuse lewy body disease.

There must be permanent clinical impairment of motor function with associated tremor and muscle rigidity.

For the above definition the following are not covered:

- Other Parkinsonian syndromes/Parkinsonism.

Glossary

Clinical impairment – The clinical symptoms associated with the condition that can be detected through examination.

Corticobasal degeneration – A rare condition where brain cells become damaged over time and certain sections of the brain start to shrink.

Diffuse lewy body disease – A progressive condition similar to Parkinson's Disease that leads to dementia.

Tremor – Involuntary, rhythmic movement of part of the body, most commonly the hands and arms, often the head and voice, and rarely the legs.

Guidance notes

Parkinson's Disease is a degenerative brain disease that causes involuntary tremor of the hands, muscle rigidity and the slowing of body movements. The other named conditions have a very similar pathology. The conditions are covered if there is a definite diagnosis made by a consultant neurologist before age 65 and there is permanent clinical impairment of motor function with associated tremor and rigidity of movement.

3.41 Pneumonectomy

Aviva definition

Pneumonectomy – *removal of a complete lung*

The undergoing of surgery on the advice of a consultant medical specialist to remove an entire lung due to disease or traumatic injury. Other forms of surgery to the lungs including removal of a lobe of the lungs (lobectomy) or lung resection are not covered under this definition.

Glossary

Lung resection – Removal of part of a lung.

Guidance notes

A lung may be removed to treat disease or following a severe traumatic injury.

3.42 Primary Pulmonary Hypertension

Aviva definition

Primary Pulmonary Hypertension – *of specified severity*

Primary Pulmonary Hypertension with permanent clinical impairment of heart function resulting in marked limitation of physical activities to at least Class 3 of the New York Heart Association's classification of functional capacity

Glossary

New York Heart Association Class 3 – Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes fatigue, palpitation, or dyspnea (difficulty in breathing).

New York Heart Association (NYHA) functional classification system – A method, commonly used in the UK, to assess heart function by relating symptoms to everyday activities and the patient's quality of life.

Guidance notes

Primary Pulmonary Hypertension is an increase in blood pressure in the pulmonary artery, pulmonary vein or pulmonary capillaries, leading to shortness of breath, dizziness, fainting and other symptoms.

3.43 Progressive Supranuclear Palsy

Aviva definition

Progressive Supranuclear Palsy

A definite diagnosis by a consultant neurologist of progressive supranuclear palsy. There must be permanent clinical impairment of eye movement and motor function with associated tremor, rigidity of movement and postural instability.

Glossary

Not applicable.

Guidance notes

Progressive Supranuclear Palsy is a progressive, incurable brain disease. Initial symptoms usually include loss of balance, slowing of movement and visual symptoms. Other symptoms like dementia will develop as the disease advances.

3.44 Pulmonary Artery Surgery

Aviva definition

Pulmonary Artery Surgery

The undergoing of surgery requiring median sternotomy (surgery to divide the breastbone) on the advice of a Consultant Cardiologist for disease of the pulmonary artery to excise and replace the diseased pulmonary artery with a graft.

Glossary

Pulmonary artery – The artery carrying blood from the heart to the lungs.

Graft – Any organ or tissue implanted to repair or replace a diseased or damaged organ or body tissue.

Guidance notes

Some illnesses may lead to this surgery being required.

3.45 Removal of an Eyeball

Aviva definition

Removal of an Eyeball

Surgical Removal of an Eyeball due to disease or injury. Self-inflicted injuries are excluded.

Glossary

Not applicable.

Guidance notes

As well as severe traumatic injury, there are several medical conditions that can lead to the removal of an eyeball.

3.46 Rheumatoid Arthritis

Aviva definition

Rheumatoid Arthritis – *of specified severity*

Severe chronic Rheumatoid Arthritis evidenced by joint destruction and deformity of at least three major joint groups, resulting in the inability to do three of the following; bend or kneel to pick up an object from the floor; use hands or fingers to pick up or manipulate small objects such as cutlery or a pen; lift or carry an everyday object such as a kettle; walk a distance of 200m on flat ground with or without use of a walking stick and without experiencing severe discomfort.

Glossary

Not applicable.

Guidance notes

Rheumatoid Arthritis is a condition that causes pain and swelling in the joints. Severity can vary from individual to individual.

3.47 Severe Lung Disease

Aviva definition

Severe Lung Disease

Severe Lung Disease where there is permanent impairment of lung function with lung function tests: Forced Vital Capacity (FVC) and Forced Expiratory Volume at 1 second (FEV1) below 50% of normal and a need for daily oxygen therapy for a minimum of 15 hours per day for at least six months.

Glossary

Forced vital capacity – The volume of air that can be forcibly blown out after full inspiration.

Forced expiratory volume at one second – The volume of air that can be forcibly blown out in one second after full inspiration.

Oxygen treatment – Breathing high concentrations of oxygen from a cylinder or machine through a mask or tubes into the nostrils.

Guidance notes

Severe Lung Disease can have many causes such as emphysema or chronic asthma. They make breathing difficult and can have a major impact on quality of life.

3.48 Significant Visual Impairment

Aviva definition

Significant Visual Impairment

Permanent and irreversible loss of sight to the extent that even when tested with the use of visual aids is measured at 3/60 to 6/60 in the better eye using a Snellen chart, or visual field is reduced to 20° or less of arc as certified by an ophthalmologist.

Glossary

Snellen chart – A chart showing letters in rows of decreasing size that opticians use to measure visual ability.

Visual field – The total area in which objects can be seen in peripheral (side) vision while the eyes are focussed on a central point.

Ophthalmologist – A doctor specialising in diseases and disorders of the eyes.

Guidance notes

A loss of sight to this extent is likely to have a significant effect on an individual's life.

3.49 Spinal Stroke

Aviva definition

Spinal Stroke – *resulting in permanent symptoms*

Death of spinal cord tissue due to inadequate blood supply or haemorrhage within the spinal column resulting in permanent neurological deficit with persisting clinical symptoms.

Glossary

Spinal cord – The bundle of nerve tissue that extends from the brain within the spine.

Haemorrhage – Bleeding from a ruptured blood vessel.

Permanent neurological deficit with persisting clinical symptoms – Symptoms of dysfunction in the nervous system that are present on clinical examination and are expected to last throughout the insured person's life.

Symptoms that are covered include numbness, hyperaesthesia (increased sensitivity), paralysis, localised weakness, dysarthria (difficulty with speech), aphasia (inability to speak), dysphagia (difficulty in swallowing), visual impairment, difficulty in walking, lack of coordination, tremor, seizures, lethargy, dementia, delirium and coma.

Guidance notes

A spinal stroke occurs when there is an interruption in the flow of blood to the spinal cord. Like other strokes these may occur when there is a blockage in the blood supply or there is a bleed due to a burst blood vessel.

3.50 Stroke

Aviva definition

Stroke

Death of brain tissue due to inadequate blood supply or haemorrhage within the skull resulting in either:

- permanent neurological deficit with persisting clinical symptoms; or
- definite evidence of death of brain tissue or haemorrhage on a brain scan; and
- neurological deficit with persistent clinical symptoms lasting at least 24 hours.

For the above definition, the following is not covered:

- Transient ischaemic attack.
- Death of tissue of the optic nerve or retina/eye stroke.

Glossary

Haemorrhage – Bleeding from a ruptured blood vessel.

Permanent neurological deficit with persisting clinical symptoms – Symptoms of dysfunction in the nervous system that are present on clinical examination and expected to last throughout the insured person's life.

Symptoms that are covered include numbness, hyperaesthesia (increased sensitivity), paralysis, localised weakness, dysarthria (difficulty with speech), aphasia (inability to speak), dysphagia (difficulty in swallowing), visual impairment, difficulty in walking, lack of coordination, tremor, seizures, lethargy, dementia, delirium and coma.

The plan doesn't cover

- an abnormality seen on brain or other scans without definite related clinical symptoms
- neurological signs occurring without symptomatic abnormality, e.g. brisk reflexes without other symptoms
- symptoms of psychological or psychiatric origin.

Transient ischaemic attack – Temporary disruption of the blood circulation to part of the brain. The symptoms may initially be similar to those of a stroke, but patients recover within 24 hours.

Guidance notes

A stroke is caused by an interruption to the flow of blood to the brain. (Doctors refer to these cerebrovascular accidents as CVAs.) This can be due to either a blocked artery which prevents blood reaching the brain or a burst blood vessel in the brain. In either case, a claim will be valid if it causes on-going clinical symptoms of a stroke which are expected to be permanent or have persisted for at least 24 hours and there is definite evidence of death of brain tissue or haemorrhage on a brain scan.

The plan doesn't cover transient ischaemic attacks. These are attacks that produce temporary symptoms similar to a mild stroke, but typically patients recover completely in less than 24 hours.

3.51 Structural Heart Surgery

Aviva definition

Structural Heart Surgery

The undergoing of surgery requiring median sternotomy (surgery to divide the breastbone) on the advice of a Consultant Cardiologist to correct any structural abnormality of the heart.

Glossary

Median sternotomy – Opening the chest cavity and dividing the breastbone.

Guidance notes

Covers surgery to the heart for reasons not already covered elsewhere.

3.52 Systemic Lupus Erythematosus

Aviva definition

Systemic Lupus Erythematosus – of specified severity

A definite diagnosis with either, permanent impaired kidney function with glomerular filtration rate below 30ml/min or permanent neurological deficit resulting in persistent symptoms of paralysis, localised weakness, dysarthria, dysphagia or difficulty in walking.

Glossary

Glomerular filtration rate – A measure of the flow rate of filtered fluid through the kidneys.

Dysarthria – Difficulty in pronouncing words.

Dysphagia – Difficulty in swallowing.

Guidance notes

Systemic Lupus Erythematosus (often known as lupus) is a chronic inflammatory disease that affects the blood vessels and connective tissues of the skin and various parts of the body. Severity may vary from person to person. There may be acute episodes (flare ups) from time to time.

3.53 Third Degree Burns

Aviva definition

Third Degree Burns – covering at least 20% of the body's surface area or covering at least 20% of the surface area of the face or head.

Burns that involve damage or destruction of the skin to its full depth through to the underlying tissue and covering at least 20% of the body's surface area or covering at least 20% of the surface area of the face or head.

Glossary

Not applicable.

Guidance notes

Third Degree Burns damage or destroy the skin to its full depth and cause damage to the tissue underneath. The plan covers third degree burns if at least 20% of the body surface area or at least 20% of the surface area of the face or head has been affected.

3.54 Total Permanent Disability

Aviva definition

Total Permanent Disability (before attaining age 65)

Total Permanent Disability – *of specified severity*

Total Permanent Disability can be defined as either:

Unable to do your own occupation ever again or; unable to do 3 specified work tasks ever again.

Own Occupation

Total permanent disability – *unable before age 65 to do your own occupation ever again*

Loss of the physical or mental ability through an illness or injury before age 65 to the extent that the insured person is unable to do the material and substantial duties of their own occupation ever again. The material and substantial duties are those that are normally required for, and/or form a significant and integral part of, the performance of the person's own occupation that cannot reasonably be omitted or modified.

Own occupation means your trade, profession or type of work you do for profit or pay. It is not a specific job with any particular employer and is irrespective of location and availability.

The relevant specialists must reasonably expect that the disability will last throughout life with no prospect of improvement, irrespective of when the cover ends or the insured person expects to retire.

For the above definition, disabilities for which the relevant specialists cannot give a clear prognosis are not covered.

Activities of daily work

Total permanent disability – *unable before age 65 to do 3 specified work tasks ever again.*

Loss of the physical ability through an illness or injury before age 65 to do at least 3 of the 6 work tasks listed below ever again.

The relevant specialists must reasonably expect that the disability will last throughout life with no prospect of improvement, irrespective of when the cover ends or the insured person expects to retire.

The insured person must need the help or supervision of another person and be unable to perform the task on their own, even with the use of special equipment routinely available to help and having taken any appropriate prescribed medication.

The work tasks are:

1. Walking – the ability to walk more than 200 metres on a level surface.
2. Climbing – the ability to climb up a flight of 12 stairs and down again, using the handrail if needed.
3. Lifting – the ability to pick up an object weighing 2kg at table height and hold for 60 seconds before replacing the object on the table.
4. Bending – the ability to bend or kneel to touch the floor and straighten up again.
5. Getting in and out of a car – the ability to get into a standard saloon car, and out again.
6. Writing – the manual dexterity to write legibly using a pen or pencil, or type using a desktop personal computer keyboard.

For the above definition, disabilities for which the relevant specialists cannot give a clear prognosis are not covered.

Glossary

Permanent – Expected to last throughout the life of the person covered by the plan, regardless of when the cover ends or the person retires.

Total – The core activities and responsibilities involved in your normal occupation. We won't consider a claimant as totally and permanently disabled if they can't perform trivial or non-essential components of their role.

Normal occupation – A trade, profession or type of work undertaken for profit or pay. It is not a specific job with any particular employer and is independent of location.

Guidance notes

You must tell us about your total permanent disability within 13 weeks of it happening for us to be able to consider your claim.

This condition isn't covered under children's benefit.

3.55 Traumatic Brain Injury

Standard definition

Traumatic Brain Injury – *resulting in permanent symptoms*

Death of brain tissue due to traumatic injury resulting in permanent neurological deficit with persisting clinical symptoms.

Glossary

Permanent neurological deficit with persisting clinical symptoms – Symptoms of dysfunction in the nervous system that are present on clinical examination and expected to last throughout the insured person's life.

Symptoms that are covered include numbness, hyperaesthesia (increased sensitivity), paralysis, localised weakness, dysarthria (difficulty with speech), aphasia (inability to speak), dysphagia (difficulty in swallowing), visual impairment, difficulty in walking, lack of coordination, tremor, seizures, lethargy, dementia, delirium and coma.

The plan doesn't cover:

- an abnormality seen on brain or other scans without definite related clinical symptoms.
- neurological signs occurring without symptomatic abnormality, for example, brisk reflexes without other symptoms.
- symptoms of psychological or psychiatric origin.

Guidance notes

Traumatic Brain Injury is covered if it results in ongoing clinical symptoms resulting from permanent brain damage.

4. Standard exclusions

There is one standard exclusion that applies to our critical illness cover. Similar to the industry standard definitions for the definitions of illness, the ABI has published industry standard definitions for the most common exclusions.

This exclusion only applies to claims for the following illnesses or conditions:

- **Blindness** – *permanent and irreversible*
- **Coma** – *with associated permanent symptoms*
- **Deafness** – *permanent and irreversible*
- **Loss of Hand or Foot** – *permanent physical severance*
- **Loss of Independent Existence**
- **Loss of Speech** – *total, permanent and irreversible*
- **Paralysis of a Limb** – *total and irreversible*
- **Removal of an Eyeball** – *due to disease or injury*
- **Third Degree Burns** – *covering at least 20% of the body's surface area or at least 20% of the surface area of the face or head*
- **Total Permanent Disability before age 65**
- **Traumatic Brain Injury** – *resulting in permanent symptoms*

We won't pay out if a claim results from any of the following:

4.1 Criminal Acts or Self-inflicted Injury

Standard exclusion

Criminal acts or self-inflicted injury.

Taking part in a criminal act or intentional self-inflicted injury.

Guidance notes

This exclusion applies where a claim arises as a result of an insured person taking part in a criminal act or deliberately injuring her or himself, for example, by attempting to commit suicide.

Under common law, a person can't make an insurance claim resulting from an illegal activity. This common law principle applies whether or not a specific exclusion is contained in the plan.

5. Further information

This guide gives you detailed information about the range of critical illnesses covered by your Aviva plan. It doesn't replace the policy conditions. In the event of a dispute, we'll refer to the policy conditions. Individual acceptance terms may exclude certain conditions and these will be confirmed on your policy schedule.

There are three other key documents that you may want to read for further information:

- Key features – this gives you information about the main points about your plan.
- Plan conditions – this is the basis of any contract we enter into with you for critical illness cover.
- Claims guide – updated every year, this tells you about our most recent claims experience.

Please ask your financial adviser for a copy of any of these documents. If you don't have an adviser, please contact us directly.

5.1 How to contact us

You can phone, e-mail or write to us.



Call us on **08000 686 800**
Monday to Friday 8.30am – 5.30pm
Saturday 8.30am – 2.00pm

Outside of these hours, you can use the same number and leave a message on our answerphone.

We may monitor calls to improve our service.



E-mail
helpdesk@aviva.co.uk



Office address:
Aviva
PO Box 520
Norwich
NR1 3WG

