



Republic of the Philippines  
DEPARTMENT OF LABOR AND EMPLOYMENT  
**EMPLOYEES' COMPENSATION COMMISSION**  
4<sup>th</sup>& 5<sup>th</sup> Floors, ECC Building, 355 Sen. Gil J. Puyat Avenue, City of Makati

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Ika-29 ng Mayo 2017

**Bb. JENNIFER R. YET**

Happy Home Centro, Brgy. Lag-On  
Date, Camarines Norte, 4600  
SM-19598-0314-17

Mahal naming **Bb. YET**:

Ito po ay may kinalalaman sa inyong kahilingang benepisyo sa ilalim ng Employees' Compensation Law (P.D. 626, as amended).

Nais po naming ipabatid sa inyo na noong ika-11 ng Mayo 2017, nagkaroon po ng desisyon ang tanggapanang ito na pagbigyan ang ilang bahagi ng inyong kahilingan. Ang SSS na lamang po ang magbibigay ng inyong karampatang benepisyo.

Mangyari lang po na ipag-bigay-alam ninyo sa aming tanggapan kung natanggap na po ninyo ang inyong kaukulang benepisyo sa loob ng tatlumpung (30) araw matapos po ninyong tanggapin ang kopya ng desisyon.

Maraming salamat po.

Lubos na sumasainyo,

  
**STELLA ZIPAGAN-BANAWIS**  
Executive Director



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May 29, 2017

**ELISA T. BAROQUE, M.D.**  
Department Manager III  
Medical Operation Department  
**SOCIAL SECURITY SYSTEM**  
East Ave., Diliman, Quezon City

Dear **Dr. BAROQUE**:

We are transmitting herewith the entire record of the case of:

**JENNIFER R. YET vs. SSS**  
**ECC CASE No. SM-19598-0314-17**

The decision in the above-entitled case is a **MODIFICATION** of the decision of the System and the same is accordingly transmitted to that office for enforcement. Pursuant to Article 182 (a) of P.D. 626 as amended, all awards granted by the Commission in cases appealed from the decisions of the System shall be effected **"within fifteen (15) days from receipt of notice thereof."**

This case was resolved through Board Resolution (BR) No. 17-05-19 dated May 11, 2017.

Very truly yours,

  
**STELLA ZIPAGAN-BANAWIS**  
Executive Director

cf:

**BRENDA P. VIOLA, MD**  
OIC – Medical Services Division  
Social Security System (SSS)  
East Ave., Diliman, Quezon City

**Ms. JENNIFER R. YET**  
Happy Home Centro, Brgy. Lag-On  
Date, Camarines Norte, 4600  
SM-19598-0314-17



**JENNIFER R. YET,**  
*Appellant,*

**-versus-**

**ECC CASE No. SM-19598-0314-17**

**SOCIAL SECURITY SYSTEM (SSS),**  
*Appellee.*

x-----x

## **D E C I S I O N**

This appeal seeks to review the Resolution No. 2016-E 0018 of the Social Security System-Medical Claims Review Committee (SSS-MedCRC), dated December 13, 2016, denying appellant's claim for disability benefits, under the Employees' Compensation Law (P.D. No. 626, as amended), due to Typhoid Fever; Hyponatremia; Hypokalemia; Heat Stroke.

From March 8, 2011, to date, the appellant, Jennifer R. Yet (SSS No. 33-9060150-1), 34 years old at the time of the filing of the claim and a resident of Daet, Camarines Norte, has been employed as Information Officer at the Institutional Services Department of Camarines Norte Electric Cooperative, Inc. (CANORECO), Daet, Camarines Norte.

As Information Officer, the duties and responsibilities of the appellant include:

1. Provides information assistance to other sections, divisions and departments of the coop and provides technical research assistance to NEA and the general public on rural electrification program;
2. Assists in establishing and maintaining a strong member education program by setting-up a newsletter, initiating broadcast programs, publishing educational brochures, coordinating with local television, radio and press people;
3. Launching promotional activities aimed at developing and motivating members to get interested and involved in coop affairs;
4. Initiating a continuous briefing for the press people, community leaders and barangay folks;
5. Assists immediate heads in the information/membership education drives;
6. Entertains complaints of member-consumers and takes proper action;

7. Practices job safety regulations in the performance of the assigned tasks;
8. Observes company's institutional, personnel, and operation policies;
9. Performs other directly related functions that may be assigned any time.

On April 28, 2016, the appellant had experienced chilling sensation and fever while attending the company sponsored pre-membership seminar at Daet, Camarines Norte. On her way back to the CANORECO Office, she experienced dizziness while riding in a company vehicle with defective air-con.

On April 29, 2016, the appellant was admitted at Leon D. Hernandez Memorial Hospital, Daet, Camarines Norte due to Hypertension. On May 2, 2016, she was discharged from the said hospital with diagnosis of Hyponatremia (less than the normal amount of sodium caused by too little excretion of water or by too much water in the bloodstream [Signet/Mosby Medical Encyclopedia]; Hypokalemia (a condition in which too little potassium is found in the blood [Signet/Mosby Medical Encyclopedia]; Heat Stroke.

Based on the news report, dated May 5, 2016, which was issued by the Philippine Information Agency (PIA), the Province of Camarines Norte has been affected by the "El Niño" phenomenon. *(Reference: <http://news.pia.gov.ph/article/view/87146236944/stakeholders-bare-mitigation-measures-on-el-nino-phenomenon-in-camarines-norte>)*

Between May 4 and 20, 2016, the appellant underwent a series of laboratory examinations and it was discovered that she had suffered from Typhoid Fever.

On account of her ailments, the appellant was granted SSS sickness benefits. The appellant filed a claim for additional EC disability benefits before the SSS Daet Branch (Branch). However, the Branch denied the said claim reasoning that:

1. "Hyponatremia/Hypokalemia/and Typhoid Fever is not considered as occupational diseases. Electrolyte imbalance is usually caused by an underlying illness, and Typhoid Fever is a bacterial infection caused by Salmonella Typhi and cannot be considered as peculiar to the job of Ms. Jennifer Yet. Typhoid is spread by eating or drinking food or water contaminated with the feces of an infected person.
2. "Heat Stroke, also known as sun stroke is a condition caused by your body overheating usually as a result of prolonged exposure to or vigorous physical exertion in high temperatures.

“In this case, per interview to the claimant, information drive seminar lasted only for a few hours and was held in a covered area...

“Electrolyte imbalance could have been secondary to Typhoid fever, as signs and symptoms of said illness include fever, headache, diarrhea and vomiting, which can lead to dehydration.”

On December 13, 2016, the SSS-MedCRC sustained the denial through Resolution No. 2016-E 0018 in this manner, to wit:

**“...there was no causal relationship between her job as Information Officer and her illness, Typhoid Fever. Also, illness is not included in the list of compensable occupational and work-related diseases.”**

On March 9, 2017, the Secretariat received the records of the case from the SSS for review purposes.

On March 15, 2017, the Secretariat wrote a letter to the appellant requesting her to submit the following documents:

1. Medical abstract and laboratory results of hospital admission on April 29 up to May 2, 2016, due to Heat Stroke and Hypokalemia/Hyponatremia;
2. Original/authenticated copy of Daily Time Record for April and May 2016.

On April 11, 2017, the Secretariat received the requested documents from the SSS-Daet Branch.

On May 5, 2017, this case was submitted to the Technical Review Committee (Committee) for initial deliberation. The Committee decided to elevate this case to the Commission with the following recommendations:

1. For denial

Claimed Ailment	Reason for Denial
Typhoid Fever	No causal relationship; no substantial evidence showing that she ingested contaminated food or water in the course of her employment

2. For award

Claimed Ailment	Basis for Award
Heat Stroke, Hypokalemia, Hyponatremia	the working conditions, exhaustion due to extreme heat, in particular, of the appellant at the time of the incident caused the manifestation of the said ailments

***The appeal is partly meritorious.***

Article 173 (formerly Art. 167) paragraph (l) of Presidential Decree (P.D.) No. 626, as amended, defines sickness as "any illness definitely accepted as an occupational disease listed by the Commission, or any illness caused by employment subject to proof that the risk of contracting the same is increased by working conditions." Section 1 (b), Rule III, of the Rules Implementing P.D. No. 626, as amended, provides that "for the sickness and the resulting disability or death to be compensable, the sickness must be the result of an occupational disease included under Annex "A" of these Rules (Amended Rules on Employees' Compensation) with the conditions set therein satisfied; otherwise, proof must be shown that the risk of contracting the disease is increased by the working conditions."

This Commission now proceeds to discuss the etiologies or risk factors of the claimed ailments.

### **Typhoid Fever**

- "Typhoid Fever is a serious sickness caused by bad bacteria called Salmonella typhi. People can have Typhoid Fever if they eat food or drink water with Salmonella typhi.
- "Proper way of washing the hands is important before eating and handling food because Salmonella typhi are transferred by the hands especially when the hands contain infected fecalk material.
- "Symptoms of sickness appear 1 or 3 weeks after infection, but may appear as early 3 days or as long as 3 months.
- "Anyone can get Typhoid Fever especially the international travelers who visit countries where Typhoid Fever is common.

#### *References:*

*Robbins' Pathologic Basis of Disease, 6<sup>th</sup> Edition, p. 356;*  
*Harrison's Principles of Internal Medicine, 16<sup>th</sup> Edition, Volume I, p. 899;*  
*Salmonellosis-Enteric (Typhoid)*

### **Heat Stroke**

- "Heat stroke caused by thermoregulatory failure in association with a warm environment, may be categorized as exertional or non-exertional.
- "Exertional heat stroke typically occurs in younger individuals exercising at ambient temperatures and/or humidities that are higher than normal...
- "Non-exertional or classic heat stroke typically occurs in either very young or elderly individuals, particularly heat waves. The elderly, the bed-ridden, persons taking anticholinergic or anti-parkinsonian drugs or diuretics and individuals confined to poorly ventilated and non-air-conditioned environments are most susceptible."

#### *References:*

*Harrison's Principles of Internal Medicine, 12<sup>th</sup> Edition, Volume 2, pp. 2196-2197; Heat Stroke;*  
*Harrison's Principles of Internal Medicine, 16<sup>th</sup> Edition, Volume I, p. 105; Fever and Hyperthermia.*

### Hypokalemia

- “Causes of Hypokalemia:
  - I. “Decreased intake-starvation; clay ingestion
  - II. “Redistribution into cells- acid base
  - III. “Hormonal-insulin; B-adrenergic agonist (endogenous or exogenous); L-adrenergic antagonist
  - IV. “Anabolic state-Vitamin B12 or Folic acid (red blood cell production); Granulocyte (macrophage colony stimulating factor [white blood cell production]); total parental nutrition
  - V. “Others- Pseudohypokalemia; Hypothermia; Hypokalemic periodic paralysis; Barium toxicity
  - VI. “Increased loss-non-renal; gastro-intestinal loss (diarrhea); integumentary loss (sweat)
  - VII. “Renal- increased distal flow (diuretics, osmotic diuresis, salt-wasting nephropathies); increased secretion of potassium; mineralocorticoid excess; distal delivery of non-absorbed anions; others (amphotericin B, Liddle’s syndrome, Hypomagnesemia)

*Reference:*

*Harrison’s Principles of Internal Medicine, 16<sup>th</sup> Edition, Volume 1, pp. 258-261: Fluid and Electrolyte Disturbances: Hypokalemia*

### Hyponatremia

- “Hyponatremia is an important and common electrolyte abnormality that can be seen in isolation or, as most often is the case, as a complication of other medical illnesses (e.g. heart failure, liver failure, renal failure, pneumonia)...”

*Reference:*

*Hyponatremia, Simon, E.E. MD, et.al. Updated: 07/26/2016, <http://emedicine.medscape.com/article/242166-overview>*

**Typhoid Fever** is not among the occupational diseases listed under Annex “A” of the Amended Rules on Employees’ Compensation Law. Thus, it is required of the appellant to prove that the risk of contracting the said ailment was increased by the nature of her working conditions. However, the records failed to disclose any substantial evidence that would establish any reasonable connection between the working conditions of the appellant and the said ailment. Specifically, there is no substantial evidence showing that the appellant has ingested contaminated food or water in the course of her employment

This Commission agrees with the SSS insofar as the non-compensability of the appellant’s Typhoid Fever is concerned. However, this Commission differs with the evaluation of the SSS on the issue of compensability of the appellant’s Heat Stroke considering that the said evaluation has only considered the purely medical side of the case by stating that “*electrolyte imbalance could have been secondary to Typhoid Fever.*”

In the case of GSIS vs. Aurelia Y. Calumpiano (G.R. No. 196102, November 26, 2014 citing the case of GSIS vs. De Castro, G.R. No. 185035, July 15, 2009) the Supreme Court ruled that:

**“In any determination of compensability, the nature and characteristics of the job are as important as raw medical findings and a claimant's personal and social history.** This is a basic legal reality in workers' compensation law...” (emphasis supplied)

In several cases, the Supreme has also reiterated the following rulings:

“The degree of proof required under P.D. No. 626, as amended, is merely substantial evidence, which means, *“such relevant evidence as a reasonable mind might accept as adequate to support a conclusion.”* What the law requires is a reasonable work-connection and not a direct causal relation. It is enough that the hypothesis on which the workmen's claim is based is probable. Medical opinion to the contrary can be disregarded especially where there is some basis in the facts for inferring a work-connection. Probability, not certainty, is the touchstone.” (italics supplied, Salalima v. ECC and SSS, G.R. No. 146360, May 20, 2004)

In this case, this Commission believes the existence of reasonable probability. Medical records reveal that the appellant was previously diagnosed with Heat Stroke, Hypokalemia, and Hyponatremia prior to the discovery of her Typhoid Fever. The SSS may have failed to consider the weather condition, “El Nino” phenomenon, at Camarines Norte when the appellant experienced dizziness inside a vehicle while she and her co-employees were on their way back to CANORECO after attending a seminar. There is a reasonable probability that the scorching heat of the sun has triggered the manifestation of the symptoms of the appellant’s Heat Stroke in the course of the performance of her duties. Thus, in the light of the exposure of the appellant to detrimental work environment, the possibility of the manifestation the symptoms of her Heat Stroke; Hypokalemia; Hyponatremia is not remote despite the later diagnosis of Typhoid Fever.

**WHEREFORE**, premises considered, the appealed MedCRC Resolution is hereby **MODIFIED** and the SSS is ordered to grant the appellant the corresponding EC disability benefits due him under the law plus reimbursement of out of pocket medical expenses due to Heat Stroke, Hypokalemia, and Hyponatremia subject to the limitations prescribed by the Commission. However, the SSS is not bound to grant EC disability benefits to the appellant due to her Typhoid Fever on the ground of no causal relationship.

**SO ORDERED.**

**CITY OF MAKATI**

May 11, 2017.





## BOARD RESOLUTION NO. 17-05-19

### *Approving the Recommendations of the Technical Review Committee (TRC) on Ten (10) EC Appealed Cases from the SSS and Five (4) EC Appealed Cases from the GSIS*

WHEREAS, Article 186 (formerly 180) of P.D. No. 626, as amended, partly provides:

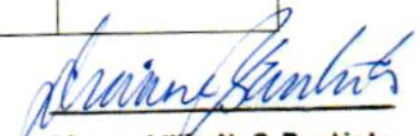
**"ART. 186. Settlement of Claims.- The System shall have original and exclusive jurisdiction to settle any dispute arising from this Title with respect to coverage, entitlement to benefits, collection and payment of contributions and penalties thereon, or any other matter related thereto, subject to appeal to the Commission..."** (emphasis supplied)

WHEREAS, on May 5, 2017, the Technical Review Committee (TRC) has deliberated on the following EC appealed cases from the SSS and the GSIS:

#### ***I. SSS (Legal and Medical Cases)***

<b><i>Title of the Case/ Nature of Appeal</i></b>	<b><i>TRC Recommendation</i></b>	<b><i>End of 20 working days PCT</i></b>
<p><b>I.1. AVILES, Edralyn P. vs. SSS</b></p> <p><b>SL-19613-0417- 17</b></p> <p>Nature of claim: <i>disability benefits due to Fracture Open 2<sup>nd</sup> and 3<sup>rd</sup> Metatarsals with extensive tendon transections, right foot, avulsed wound, left-leg secondary to vehicular accident</i></p> <p>Occupation of the</p>	<p><b><i>For Award</i></b></p> <p><b>Basis for award:</b> Company sponsored activity; The act of the appellant in riding a tricycle in proceeding to the venue of the company outing does not fall under notorious negligence</p>	<p><b><i>May 18, 2017</i></b></p>

**CERTIFIED TRUE COPY**

  
**Dianne Lilibeth S. Bautista**  
 Board Secretary III



## BOARD RESOLUTION NO. 17-05-19

### ***Approving the Recommendations of the Technical Review Committee (TRC) on Ten (10) EC Appealed Cases from the SSS and Five (4) EC Appealed Cases from the GSIS***

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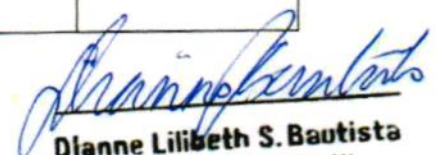
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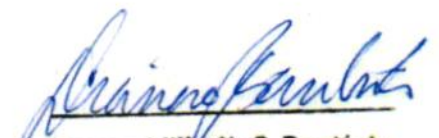
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 Board Secretary III

<b>Title of the Case/ Nature of Appeal</b>	<b>TRC Recommendation</b>	<b>End of 20 working days PCT</b>
covered member: Production Operator (Testech, Incorporated)		
<p><b>I.2. ABELLA, Christian N. vs. SSS</b></p> <p><b>SL-19614-0417- 17</b></p> <p>Nature of claim: disability benefits due to Multiple Fractures, right leg, contusion, laceration, and abrasion</p> <p>Occupation of the covered member: Delivery Driver (Pilipinas Messerve)</p>	<p><b>For Denial</b></p> <p><b>Reason for denial:</b> Notorious negligence (reckless driving); the appellant was driving at a high-speed when his motorcycle collided with another vehicle.</p>	<p><b>May 18, 2017</b></p>
<p><b>I.3. AGULTO, Lorenzo B. vs. SSS</b></p> <p><b>SL-19615-0415- 17</b></p> <p>Nature of claim: disability benefits due to Pelvic Fracture</p> <p>Occupation of the covered member: Security Guard (Tamaraw Security Service, Inc.)</p>	<p><b>For Award</b></p> <p><b>Basis for award:</b> Bunk-house rule; the appellant was allowed to stay in his workplace; he fell from a tree while he was in the act of picking mango fruits; the tree was located within the vicinity of the premises of the employer</p>	<p><b>May 18, 2017</b></p>

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**Dianne Lilibeth S. Bautista**  
Board Secretary III

<b>Title of the Case/ Nature of Appeal</b>	<b>TRC Recommendation</b>	<b>End of 20 working days PCT</b>
<p><b>I.4. PIOQUID, Andy B. vs. SSS</b></p> <p><b>SL-19616-0417- 17</b></p> <p>Nature of claim: disability benefits due to Acromioclavicular Joint Repair, right</p> <p>Occupation of the covered member: Mess Man (Wilhemsen-Smith Bell Manning, Inc.</p>	<p><b>For Denial</b></p> <p><b>Reason for denial:</b> Seamen covered by the eight-hour work-rule; the appellant was off-duty onboard a vessel when he accidentally slipped on a wet door mat while he was about to enter his cabin door; no substantial evidence showing that he was performing any act related to his duty prior to the said incident.</p>	<p><b>May 18, 2017</b></p>
<p><b>I.5. YET, Jennifer R. vs. SSS</b></p> <p><b>SM-19598- 0314-17</b></p> <p>Nature of claim: disability benefits due to Typhoid Fever; Hyponatremia; Hypokalemia; Heat Stroke</p> <p>Occupation of the Covered Member: Information Officer (Camarines Norte Electric Cooperative, Inc. [CANORECO])</p>	<p><b>For Modification</b></p> <p><b>A. For denial-</b> <i>Typhoid Fever-</i></p> <p><b>Reason for Denial:</b> no causal relationship; no substantial evidence showing that she ingested contaminated food or water in the course of her employment</p> <p><b>B. For award-</b> <i>Heat Stroke; Hypokalemia; Hyponatremia-</i></p> <p><b>Basis for Award:</b> the working conditions, exhaustion of the appellant due to extreme heat, in particular, caused the manifestation of the said ailments</p>	<p><b>May 15, 2017</b></p>
<p><b>1.6. CALICA, Florante H. vs. SSS</b></p> <p><b>SM-19617-</b></p>	<p><b>For Denial</b></p> <p><b>Reason for denial:</b> no causal relationship; non-satisfaction of any of the conditions for compensability of Musculoskeletal</p>	<p><b>May 18, 2017</b></p>

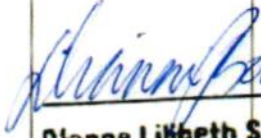
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Dianne Lilibeth S. Bautista  
Board Secretary III

<b>Title of the Case/ Nature of Appeal</b>	<b>TRC Recommendation</b>	<b>End of 20 working days PCT</b>
<p><b>0417-17</b></p> <p>Nature of claim: disability benefits due to Degenerative Osteoarthritis, both knees, radiculopathy, both lower extremities</p> <p>Occupation of the Covered Member: Mechanic 1/C (Philex Mining Corp)</p>	<p>Disorders and Hearing Loss; there is no substantial evidence showing that the working conditions of the appellant entailed lifting and/or carrying of heavy objects; neither there is showing that he sustained injury or trauma on his spine or extremities and ears in the course of his employment</p>	
<p><b>I.7.RAGUDO, Teresita Flordeliz M. vs. SSS</b></p> <p><b>SM-19619- 0417-17</b></p> <p>Nature of claim: additional EC disability benefits due to Acute Traumatic Dental Injuries on Anterior Teeth Nos. 11, 21, and 22; Dental Extrusion, Intrusion, Enamel and Crown Fracture</p> <p>Occupation of the Covered Member: Finance and Human Resource Officer (INA Research Philippines, Inc.)</p>	<p><b>For Denial</b></p> <p><b>Reason for denial:</b> non-satisfaction of any disabling conditions on the face, teeth, tonque and palate under the EC Schedule of Compensation</p>	<p><b>May 18, 2017</b></p>

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Dianne Lilibeth S. Bautista  
Board Secretary III

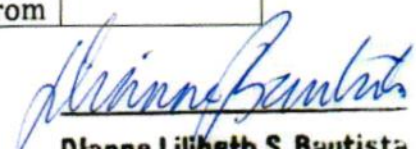
<b>Title of the Case/ Nature of Appeal</b>	<b>TRC Recommendation</b>	<b>End of 20 working days PCT</b>
<p><b>I.8. SABANGAN, Ranie Y. vs. SSS</b></p> <p><b>SM-19620- 0417-17</b></p> <p><i>Nature of claim: disability benefits due to Tinea Corporis (Back) &amp; Eczematoid Dermatitis, right lower leg</i></p> <p>Occupation of the Covered Member: Able-Bodied Seaman (Philippine Transmarine Carriers, Inc.)</p>	<p><b>For Award</b></p> <p><b>Basis for award:</b> increased-risk theory; the appellant's exposure to occupational irritants and/or allergens while onboard a vessel caused the manifestation of his skin disease</p>	<p><b>May 18, 2017</b></p>
<p><b>1.9. MARTINEZ, Ma. Helen M. vs. SSS</b></p> <p>Dante M. Martinez- deceased</p> <p><b>SM-19621- 0417-17</b></p> <p><i>Nature of claim: death benefits due to Aneurysm</i></p> <p>Occupation of the Covered Member: Branch Manager (Stronghold Insurance Co.)</p>	<p><b>For Denial</b></p> <p><b>Reason for denial:</b> no causal relationship; non-satisfaction of any of the conditions for compensability of CVA</p>	<p><b>May 18, 2017</b></p> <p><b>CERTIFIED TRUE COPY</b></p> <p> <b>Dianne Lilbeth S. Bautista</b> <b>Board Secretary III</b></p>
<p><b>1.10. RAMOS, Jeffrey O. vs. SSS</b></p>	<p><b>For Modification</b></p> <p><b>A. For denial-</b></p>	<p><b>May 18, 2017</b></p>

<b>Title of the Case/ Nature of Appeal</b>	<b>TRC Recommendation</b>	<b>End of 20 working days PCT</b>
<p><b>SM-19622-0417-17</b></p> <p><i>Nature of claim:</i> disability benefits due to Medial Meniscal Tear, left knee; Patellar Tendinitis; Hyperuricemia</p> <p>Occupation of the Covered Member: Commis I/Baker (Philippine Transmarine Carrier, Inc.)</p>	<p><i>Hyperuricemia-</i></p> <p><b>Reason for Denial:</b> no causal relationship; the risk factor, increased production or decreased excretion of uric acid or a combination of the two processes, is not related to the working condition of the appellant as COMMIS I/Baker</p> <p><b>B. For award-</b></p> <p><i>Medial Meniscal Tear, left-knee; Patellar Tendinitis-</i></p> <p><b>Basis for Award:</b> the working conditions of the appellant, which entailed repeated standing and running-up and down in the galley and repetitive use of the knee tendon and cartilage, increased his risk of contracting the claimed ailment.</p>	

**II. GSIS (Legal and Medical Cases)**

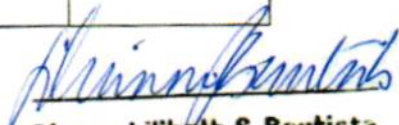
<b>Title of the Case/ Nature of Appeal</b>	<b>TRC Recommendation</b>	<b>End of 20 working days PCT</b>
<p><b>II.1. ARAGONES, Eduardo A. vs. GSIS</b></p> <p><b>GL-19629-0502-17</b></p> <p><i>Nature of claim:</i> disability benefits due to blindness in his left-eye</p> <p>Occupation of the</p>	<p><b>For Award</b></p> <p><b>Basis for award:</b> claim filed within the three-year prescriptive period; blindness complication of the shrapnel wound sustained by the appellant during a military operation against the rebels in 1980; on the basis of the ruling of the Supreme Court in the case of Sanico v. ECC that <i>"the prescriptive period should be reckoned from the time the employee lost his earning capacity,"</i> the reckoning period should have been commenced on April 10, 1997 when the appellant was discharged from</p>	<p><b>May 30, 2017</b></p>

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 Board Secretary III

<p>covered member: Soldier (Staff Sergeant [SSgt.-PA])</p>	<p>the military service due to his eye-illness. Thus, when the appellant filed his claim on April 15, 1997, the claim was filed within the three year prescriptive period.</p>	
<p><b>II.2. DELA CRUZ, Clarita P. vs. GSIS</b>  <b>GL-19610-0417-17</b>  Nature of claim: disability benefits due to Harada's Disease, both eyes; Psuedophakia, both eyes; S/P PE with PICOL, right eye  Occupation of the covered member: Public Services Foreman (MMDA)</p>	<p style="text-align: center;"><b><i>For Denial</i></b></p> <p><b>Reason for denial:</b> Prescription; filing of claim beyond the three-year prescriptive period; the appellant retired due to her eye illness in 2008 but she filed her claim only in 2013.</p>	<p style="text-align: center;"><b><i>May 18, 2017</i></b></p>
<p><b>II.3. GENTEROY, Lina B. vs. GSIS</b>  <b>GM-19612-0417-17</b>  Nature of claim: disability benefits due to Cerebrovascular Disease, intracerebral bleed  Occupation of the covered member: Day Care Worker I (City Social Services Office, City Government of Calamba)</p>	<p style="text-align: center;"><b><i>For Denial</i></b></p> <p><b>Reason for denial:</b> No causal relationship; non-satisfaction of any of the conditions for compensability of Cerebrovascular Accident (CVA)</p>	<p style="text-align: center;"><b><i>May 18, 2017</i></b></p>

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<p><b>II.4. GARONG, Allan M. vs. GSIS</b></p> <p><b>GM-19623-0417-17</b></p> <p>Nature of claim: disability benefits due to Glossopharyngeal Neuralgia; Ossified Posterior Longitudinal Ligament; Otagia; Epicondylitis; Epicondyle Bursitis; Laryngophaygeal Reflux; Pharyngitis; Uncontrolled Bowel Movements; Spondylosis; Throat pains; Eye pain</p> <p>Occupation of the covered member: Supervising Legal Staff Officer II (House of Representatives)</p>	<p style="text-align: center;"><b>For Denial</b></p> <p><b>Reason for denial:</b> no causal relationship; the risk factors of the following claimed ailments are not related to the working conditions of the appellant:</p> <ol style="list-style-type: none"> <li>1. Glossopharyngeal or Vagoglossopharyngeal Neuralgia-caused by infectious, inflammatory or neoplastic processes although the real cause is not yet determined.</li> <li>2. Ossified Posterior Longitudinal Ligament-degenerative disease.</li> <li>3. Otagia- external otitis, otitis media, mastoiditis, and auricular infections.</li> <li>4. Epicondylitis-ailment of the wrist associated with blue collar worker;</li> <li>5. Epicondyle Bursitis- the major bursae are located adjacent to the tendons near the large joints such as shoulders, elbows, hips, and knees. A bursa can become inflamed from injury, infection (rare in the shoulder), or due to an underlying rheumatic condition.</li> <li>6. Laryngophaygeal Reflux; -due to physical or lifestyle causes; physical causes include malfunctioning or abnormal lower esophageal sphincter muscle, hiatal hernia, abnormal esophageal contractions, and slow emptying of the stomach; lifestyle factors include diet (chocolate, citrus, fatty foods, spices), habits (over-eating, alcohol, and tobacco abuse) and pregnancy.</li> <li>7. Pharyngitis-infection or irritation of the pharynx and/or tonsils. The etiology is usually infectious, with most cases being of viral origin; other causes include allergy, trauma, toxins, and neoplasia.</li> <li>8. Uncontrolled Bowel Movements-constipation, fecal impaction (lump of stool</li> </ol>	<p style="text-align: center;"><b>May 18, 2017</b></p> <p style="text-align: right;"><b>CERTIFIED TRUE COPY</b></p>
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that partly blocks the large intestine), long-term taxative use, colectomy or bowel surgery, emotional problems, gynecological, prostate, or rectal surgery, injury to the anal muscles due to childbirth (in women), nerve or muscle damage (due to injury, tumor or radiation), severe diarrhea, severe hemorrhoids, and stress of being in an unfamiliar environment.

9. Eye pain- allergies, eyelid inflammation, blocked tear duct, cyst in the eyelid, cluster headache, contact lens problem, corneal abrasion, dry eyes, outwardly turned eyelid, inwardly turned eyelid, foreign object in the eye, glaucoma, injury, inflammation of the colored part of the eye, inflammation of the cornea, inflammation of the optic nerve, conjunctivitis, inflammation of the white part of the eye, inflammation of the middle layer of the eye.

*References:*

1. *Current Neurosurgical Management of Glossopharyngeal Neuralgia and Technical for Microvascular Decompression Surgery; Rey-Dios, MD, et.al., Neurosurg Focus 2013; 34(3); c8 [http://www.medscape.com /view article/780441](http://www.medscape.com/viewarticle/780441);*
2. *Ossification of the posterior longitudinal ligament; Smith ZA MD, et.al.; Neurosurg Focus. 2011; 303 (3) e10; [http://Medscape.com/viewarticle/739292\\_4](http://Medscape.com/viewarticle/739292_4)*
3. *Otalgia; Li, JC, MD, et.al., updated, Sept. 18, 2015; [http://emedicine.medscape.com /article/845173-overview#a5](http://emedicine.medscape.com/article/845173-overview#a5);*
4. *Lateral Epicondylitis; Walrod, BJ md, et.al.: updated, March 20, 2016; <http://emedicine.medscape.com/article/96969-clinical#showall>;*
5. *Bursitis; Driver, BD, MD, et.al.; 10/25/2016; [http://www.emedicinehealth.com/bursitis/article-em.htm#what\\_is\\_bursitis](http://www.emedicinehealth.com/bursitis/article-em.htm#what_is_bursitis);*

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	<p>6. <i>Pharyngitis; Acerra, JR, MD, et.al.; updated, April 17, 2017; <a href="http://emedicine.medscape.com/article/764304-clinical">http://emedicine.medscape.com/article/764304-clinical</a>;</i></p> <p>7. <i>Laryngopharyngeal Reflux; Position Statement of the Committee on Speech, Voice and Swallowing Disorders of the American Academy of Otorhynology- Head and Neck Surgery; Koufman, JA MD, et.al., 2002; Otolaryngology- Head and Neck Surgery; <a href="http://journals.sagepub.com/doi/full/10.1067mhn.2002.125760">http://journals.sagepub.com/doi/full/10.1067mhn.2002.125760</a>; <a href="http://www.entnet.org/content/gerd">http://www.entnet.org/content/gerd</a> and lpr;</i></p> <p>8. <i><a href="http://www.mayoclinic.org/symptoms/eye-pain/basics/causes/sym-20050744">http://www.mayoclinic.org/symptoms/eye-pain/basics/causes/sym-20050744</a>;</i></p> <p>9. <i>Bowel Incontinence: Lehrer, JK, MD.et.al.; 12/32014;<a href="http://medlineplus.gov/ency/article/003135.htm">http://medlineplus.gov/ency/article/003135.htm</a>;</i></p> <p>10. <i>Walker-Bone, Karen, et.al. "Occupation and Epicondylitis: A Population Based Study. "Rheumatology 9Oxford, England) 51.2 (2012): 305-310.PMC, Web, 4 May 2017</i></p>	
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**WHEREAS**, considering that this Commission is mandated to resolved EC appealed cases within the period of 20 working days, the abovementioned EC appealed cases are deemed resolved on the date of start of routing, or on May 10, 2017, by the Secretariat of this Resolution to the other members of the Commission for purposes of compliance with the prescribed 20 working day PCT;

**ON THE BASIS OF THE CONCURRENCE OF THE MEMBERS OF THE COMMISSION**

This Commission **RESOLVES AS IT HEREBY RESOLVED** that the recommendations of the TRC in the abovementioned cases be approved:

**RESOLVED FURTHER**, that the entire original records of the following cases;

**I. SSS (Legal and Medical Cases)**

1. AVILES, Edralyn P. vs. SSS (SL-19613-0417-17);

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2. **AGULTO, Lorenzo B. vs. SSS (SL-19615-0417-17);**
3. **YET, Jennifer R. vs. SSS (SM-19598-0314-17);**
4. **SABANGAN, Ranie Y. vs. SSS (SM-19620-0417-17);**
5. **RAMOS, Jeffrey O. vs. SSS (SM-19622-0417-17)**

**II. GSIS (Legal Case)**

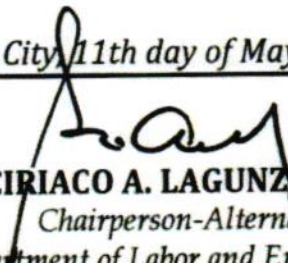
1. **ARAGONES, Eduardo A. vs. GSIS (GL-19629-0502-17)**


be remanded to the SSS and to the GSIS for enforcement of Decisions of this Commission on the abovementioned cases ordering the SSS and the GSIS to grant EC benefits to the appellants;


**RESOLVED FINALLY**, that the SSS and the GSIS be duly furnished with copies of this Resolution and Decisions on the abovementioned cases for compliance and for guidance purposes.

**APPROVED**, in Makati City, 11th day of May 2017.

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**CIRIACO A. LAGUNZA III**  
Chairperson-Alternate  
Department of Labor and Employment

  
**BRENDA P. VIOLA**  
Member-Designate  
Social Security System

  
**DIONISIO C. EBDANE, JR.**  
Member-Designate  
Government Service Insurance System

  
**CARLITO P. ROBLE**  
Member  
Employees' Sector

**VACANT**  
(In Transition)  
Member-Designate  
Philippine Health Insurance Corporation

  
**STELLA ZIPAGAN-BANAWIS**  
Member  
Employees' Compensation Commission - Secretariat

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