



**EXCERPTS FROM THE MINUTES OF  
THE FIFTH (5<sup>th</sup>) REGULAR COMMISSION MEETING,  
EMPLOYEES' COMPENSATION COMMISSION AND OCCUPATIONAL  
SAFETY AND HEALTH CENTER, SERIES OF 2017,**

*Large Training Room A, 2nd Floor, Occupational Safety and Health Center, North Ave., cor.  
Agham Rd., Quezon City  
Wednesday, 25 October 2017 at 2:00 P.M.*

**BOARD RESOLUTION NO. 17-10-36**

***Revising the Conditions for Compensability of Cerebrovascular Accidents  
under Annex A of the Amended Rules on Employees Compensation***

**WHEREAS**, Article 173 (formerly 167), paragraph (I) of P.D. No. 626, as amended, partly provides:

“Article 173 (formerly 177 (I) ... the Commission is empowered to determine and approve occupational diseases and work-related illness that may be considered compensable based on peculiar hazards of employment.”

**WHEREAS**, on May 26, 2011, the Commission issued Board Resolution No. 11-05-13 (“*Amending the Conditions for Compensability of Cardiovascular Accidents, Essential Hypertension, and Cerebrovascular Accidents under Annex A of the Amended Rules on Employees’ Compensation*” prescribing the revised conditions of Cerebrovascular Accidents as follows:

“19. Cerebrovascular Accidents – any of the following conditions:

- a. There must be proof that the acute stroke must have developed as a result of the stressful nature of work and pressures inherent in an occupation.
- b. The strain of work that bring about an acute stroke must be of sufficient in severity and must be followed within 24 hours by the clinical signs of an acute onset of neurologic deficit to constitute causal relationship.
- c. If a person who is apparently asymptomatic before being subjected to strain at work showed some signs and symptoms of an acute onset of neurologic deficit during the performance of his work, and such symptoms and signs persisted, it is reasonable to claim causal relationship.

- d. There was a history which should be proven of unusual and extraordinary mental strain or event, or trauma to or hyperextension of the neck. There must be a direct connection between the insult in the course of the employment and the worker's collapse.
- e. If a person is a known hypertensive, it must be proven that his hypertension is controlled and that he was compliant with treatment.
- f. A history of substance abuse must be totally ruled out."

**WHEREAS**, pursuant to the policy of the Commission for the continuous upgrading of the benefit structure for EC claimants through the updating of the conditions for compensability of occupational diseases and work related illnesses under Annex "A" of the Amended Rules on Employees' Compensation, this Commission finds it necessary to amend the prevailing conditions for the compensability of Cerebrovascular Accident;

**WHEREAS**, the Technical Review Panel (TRP) created to review the compensability of occupational and work-related illnesses and composed of medical professionals representing the government and private sectors and medical evaluators of the Systems, in a series of meetings, deliberated and recommended the updating of the conditions for compensability of Cerebrovascular Accidents;

**WHEREAS**, the workers' representative of the Technical Review Committee (TRC) of this Commission which is the reviewing body of EC appealed claims, submitted a position paper on the proposed amendment to the present conditions for compensability of Cerebrovascular Accidents;

**WHEREAS**, the recommendations of the TRP and the position paper of the TRC were presented during a tripartite consultation meeting attended by representatives from the Philippine College of Occupational Medicine (PCOM), San Miguel Brewery Inc. (SMBI), Social Security System (SSS), Government Service Insurance System (GSIS), Bureau of Working Conditions (BWC) and Occupational Safety and Health Center (OSHC);

**WHEREAS**, the representatives in the tripartite consultation meeting recommended the approval and adoption of the proposed revised conditions for the compensability of Cerebrovascular Accident under Annex A of P.D. 626 as amended, as follows:

"19. Cerebrovascular Accidents

- a. If a person is a known hypertensive, his/her Hypertension remains poorly controlled despite compliance with the treatment.
- b. If a history of substance use is present, it must be ruled-out as a cause of/ or contributory to stroke.
- c. And, any of the following conditions:



- c.1 There must be proof that the acute stroke must have developed as a result of the stressful nature of work and pressures inherent in an occupation;
- c.2 There is a strong evidence of significant exposure such as but not limited to the following: extremes of temperature, long working hours, irregular work patterns, shift work, noise, reduced decision making autonomy, excessive workload with inadequate time to meet job demands, high psychological demands, poor working conditions and heavy physical work.
- c.3 The strain of work that brings about an acute stroke must be sufficient in severity and must be followed within 24 hours by the clinical signs of an acute onset of neurological deficit to constitute causal relationship;
- c.4 If a person who was apparently asymptomatic before being subjected to strain at work showed signs and symptoms of an acute onset of neurologic deficit during the performance of his/her work, and such symptoms and signs persisted, it is reasonable to claim causal relationship;
- c.5 There was a history which should be proven of work connected unusual and extraordinary mental strain or event or trauma to the neck causing either a brain infarction or brain hemorrhage as documented by neuro-imaging studies.
- c.6 In case of Transient Ischemic Attack or TIA which cannot be documented by neuro-imaging studies, a validation by the attending physician, preferably a neurologist is required.”;

**NOW THEREFORE, ON MOTION DULY MADE AND SECONDED,**

This Commission **RESOLVES AS IT IS HEREBY RESOLVED**, to approve the proposed revision of the conditions for the compensability of Cerebrovascular Accidents as provided under Board Resolution No. 11-05-13, and the same shall now read as follows:

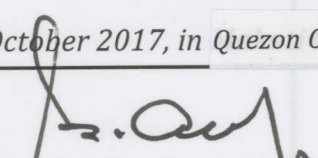
“19. Cerebrovascular Accidents

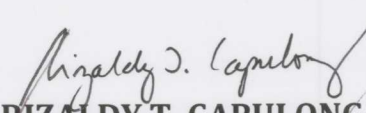
- a. If a person is a known hypertensive, his/her Hypertension remains poorly controlled despite compliance with the treatment.
- b. If a history of substance use is present, it must be ruled-out as a cause of/ or contributory to stroke.
- c. And, any of the following conditions:
  - c.1. There must be proof that the acute stroke must have developed as a result of the stressful nature of work and pressures inherent in an occupation;
  - c.2. There is a strong evidence of significant exposure such as but not limited to the following: extremes of temperature, long working hours, irregular work patterns, shift work, noise, reduced decision making autonomy, excessive workload with inadequate

- time to meet job demands, high psychological demands, poor working conditions and heavy physical work.
- c.3. The strain of work that brings about an acute stroke must be sufficient in severity and must be followed within 24 hours by the clinical signs of an acute onset of neurological deficit to constitute causal relationship;
  - c.4. If a person who was apparently asymptomatic before being subjected to strain at work showed signs and symptoms of an acute onset of neurologic deficit during the performance of his/her work, and such symptoms and signs persisted, it is reasonable to claim causal relationship;
  - c.5. There was a history which should be proven of work connected unusual and extraordinary mental strain or event or trauma to the neck causing either a brain infarction or brain hemorrhage as documented by neuro-imaging studies.
  - c.6. In case of Transient Ischemic Attack or TIA which cannot be documented by neuro-imaging studies, a validation by the attending physician, preferably a neurologist is required."

**RESOLVED FINALLY**, that the same shall take effect fifteen days after its publication in a newspaper of general circulation and a copy of the said Board Resolution be furnished to the Systems for guidance and compliance.

**DONE**, this 25th day of October 2017, in Quezon City, Philippines.

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

  
**RIZALDY T. CAPULONG**  
 Member-Designate  
 Social Security System

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

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

**VACANT**  
 Member  
 Employers' Sector

**CELESTINA Ma. JUDE P. DELA SERNA**  
 Member-Designate  
 Philippine Health Insurance Corporation

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