

PAZ L. MAKABALI, PETITIONER, VS. EMPLOYEES' COMPENSATION COMMISSION, GOVERNMENT SERVICE INSURANCE SYSTEM (MINISTRY OF EDUCATION AND CULTURE), RESPONDENTS.

G.R. No. 51533. November 29, 1983

Ponente: MAKASIAR, J.

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MAKASIAR, J.:

This is a petition for review on certiorari of the decision of the Employees' Compensation Commission in ECC Case No. 1140, rendered on August 9, 1979 affirming the decision of the Government Service Insurance System dated June 5, 1978, which denied the claim of herein petitioner Paz L. Makabali for disability benefits under P.D. No. 626, as amended.

Petitioner Paz L. Makabali served as class-room teacher at the Del Pilar Central School, San Fernando, Pampanga, since 1946 until she retired on August 21, 1975 under the disability retirement plan (R.A. 660) at the age of sixty (pp. 8 & 10, ECC rec.).

The records disclose that as per physician's (Dr. Benicio Torralba) certification, petitioner's illness started in 1971 as headache and blurring vision (p. 17. rec.; p. 11, ECC rec.).

On August 24, 1972, petitioner, while teaching her class collapsed with the back of her head hitting the floor. Purificacion P. Bondoc and Dominador T. Bondoc, co-teachers of petitioner, who happened to be in the adjoining classroom, heard the commotion, and immediately went to see what was happening. Upon seeing her lying on the floor in a semi-conscious condition with face upward and being surrounded by her pupils, they rushed her to the Makabali Clinic (now the V.L. Makabali Memorial Hospital) San Fernando, Pampanga, where she was examined by a doctor and given aid. On the following day, she reported for duty and resumed teaching, but she complained of some pains in the back of her head and also her eyes. After the incident, she often complained of recurring headache and painful eyes (pp. 22-23, rec.).

Thereafter, petitioner was treated for glaucoma at the Pampanga Eye, Ear, Nose, Throat, and General Hospital in San Fernando, Pampanga, under the professional care of Dr. Romeo Galang.

Due to this ailment, petitioner was forced to retire on August 21, 1975 under the disability retirement plan (R.A. 660) at the age of sixty -- five years short of the compulsory retirement age of sixty-five (p. 10, ECC rec.). Subsequent to her retirement, petitioner herein filed on June 19, 1976, her claim for disability benefits under P.D. No. 626, as amended, with the respondent GSIS for having contracted glaucoma during her employment as classroom teacher at the Del Pilar Central School, San Fernando, Pampanga, from 1946 to 1975 (p. 17, rec.).

In April, 1976, she was likewise treated by Dr. Benicio Torralba of the same ailment. In 1978, she was also treated by Dr. Delfin Rosales of the Philippine Eye Research Institute at the P.G.H. compound (p. 25, ECC rec.).

On June 5, 1978, respondent GSIS denied her claim on the ground that her ailment, glaucoma, is not an occupational disease taking into consideration the nature of her particular work. According to the GSIS,

"glaucoma is a common disease of middle and advanced life, occurring generally between 40 and 70 years of age. It has for its characteristic sign an increase in intraocular pressure. Predisposing factors are arteriosclerosis (anaging process) and hereditary characteristics as hyperopic eyes, small eyes, small eyeballs with large lenses and those in which the cornea is of small size" (p. 13, ECC rec.).

On June 5, 1978, petitioner sought recon-sideration of the aforesaid denial but the same was likewise denied by the respondent GSIS in its letter-resolution dated November 21, 1978. Perti-nent portions of the said letter-resolution read as follows:

"As far as the degree of proof is concerned, the claim-ant must be able to show, at least by substantial evidence, that the development of the ailment was brought about largely by the working conditions present in the nature of employment.

"In your case, your ailment is Glaucoma. This ail-ment, not being listed as an occupational disease, there-fore, requires such degree of proof as mentioned above. On the basis, however, of the papers and evidence on record which you have submitted, it appears that you have not established that your employment had any direct causal relationship with the contrac-tion of the ailment. While it is admitted that the aforesaid ailment supervened in the course of your employment as an Elementary Grade Teach-er of Del Pilar Central School, San Fernando, Pampanga, there has not been any showing that the same directly arose there-from or resulted from the nature thereof.

"In view of the foregoing, this Office regrets not to be able to favorably reconsider your claim and at the same time the entire records of your case will be elevated to the Employees' Compensation Com-mission for review" (pp. 16 & 17, ECC rec.; underscoring supplied).

On August 9, 1979, respondent ECC rendered a decision sustaining the denial of petitioner's claim for disability benefits, primarily because petitioner failed to present proofs sufficient to show causal relationship between her ailment and occupation as elementary classroom teacher, or to show that the risk of contracting the ailment was increased by her working conditions. Pertinent portions of respondent ECC's decision state the following:

"Under the present employees' compensation program, when an ailment upon which a claim for compensation benefits is based is not an occupational disease under Annex 'A' of the Rules implementing P.D. 626, as amended, as in the case at bar, proofs must be adduced to show that the risk of contracting the ailment has been increased by working conditions. The degree of proof upon which a determination can be based must be substantive enough so as to lead an unpre-judiced mind to a reasonable conclusion that direct causal link exists between the illness and the employment. It is only submission of such positive proof that a finding of com-pensability may be rendered. The record in this case however, is devoid of any showing that sufficient proofs were presented as to sway the scale of judgment in appellant's favor. Even Dr. Benicio Torralba, failed to indicate in the Attending Physician's Certification that the illness was directly caused by appellant's duties and working conditions. In the absence of such showing and on the strength of the medically accepted medical etiology of the disease, we have no other recourse but to uphold the finding of the respondent System that the 'alleged ail-ment is principally traceable to factors which are definitely not work-connected'" (p. 23, ECC rec.).

The above-quoted decision was based on the findings and recommendation of the respondent ECC's medical officer which state:

"Glaucoma is a disease char-acterized by increased intraocular tension, which can cause impairment of vision ranging from slight abnormalities to absolute blindness. It may either be primary or secondary. The primary type may be of an acute or chronic congestive (narrow-angle) type or a chronic simple (wide-angle type), as in the instant case.

"The causes of primary glaucoma are not known. Among the predisposing factors are vasomotor and

emotional in-stability, hyperopia and especially heredity. The increase in intraocular tension is related to an imbalance between the production of aqueous and its escape through the normal exit channels. Obstruction to the outflow of intra-ocular fluid appears to be mainly responsible for this imbalance. In the chronic simple type, the anterior chamber is of normal depth but an actual obstruction of the pores of the sclerocorneal trabeculae leading to the canal of Schlemm causes inadequate drainage.

"Chronic wide-or-open-angle (simple glaucoma) is the most common form of glaucoma. It is characterized by a slow course, with progressive loss of visual fields, followed by central loss of vision. Eventually, it is usually bilateral.

"The last stage of any form of glaucoma when unrelieved by treatment is referred to as absolute glaucoma. The eye is blind due to progressive atrophy of the optic nerve head. The pupil is widely dilated and fixed, the iris atrophied, the disc deeply excavated. Pain no longer is prominent but sometimes recurs at rare intervals. After a time the eye-ball may degenerate. (The Merck Manual of Diagnosis and Therapy, by Charles E. Lyght, 11th edition; 1966; pp. 511-513).

"RECOMMENDATION:

"The above-mentioned findings indicate that the disease has no causal relationship with the employment and employment conditions of the claimant as elementary school teacher. Even the attending physician certified that from her knowledge of the disease, her occupation 'did not cause the disease which is something inherent in her bodily make-up, but that her work and strain on her eyes could have contributed significantly to aggravating the disease.'

"The decision of the GSIS denying the instant claim should be affirmed" (pp. 18-19, ECC rec.; broken underlining supplied).

Hence, on November 26, 1979, petitioner, assisted by counsel, filed the instant petition.

Petitioner contends that her cause of action accrued as early as 1971 when she started having headache and blurring vision. That being the case, she further contends that the law that governs the instant case is the Workmen's Compensation Act, as amended, and not P.D. No. 626, as amended, applying the doctrine laid down in the case of CORALES vs. ECC, et al. (88 SCRA 547).

Respondent Commission, thru the Solicitor General, maintains, however, that the law applicable to the case at bar is P.D. No. 626, as amended, which covers injury, sickness, disability or death occurring on or after January 1, 1975 (Art. 208, Labor Code; p. 49, rec.).

Respondent GSIS, in its answer, likewise maintains that the law applicable in this case is P.D. No. 626, as amended, on the ground that petitioner's cause of action could not have accrued in 1971. Respondent System argues that "her claim is for permanent total disability and she could not be regarded as having been permanently and totally disabled in 1971 because she continued working thereafter. Stated differently, she could not have been awarded any disability claim in 1971" (p. 77, rec.). Respondent System relies on the ruling in Legaspi vs. Province of Negros Occidental, L-43066, December 29, 1978, that the term "disability compensation" implies that the compensation must be for loss or diminution of salary.

WE find petitioner's claim meritorious. In line with the doctrine laid down in Corales vs. ECC, et al. (88 SCRA 547 [1979]), and reiterated in the cases of Villones vs. ECC, et al. (92 SCRA 320 [1979]), Delos Angeles vs. ECC, et al. (94 SCRA 308 [1979]), Balatero vs. ECC, et al. (608 SCRA [1980]), LaO vs. ECC, et al. (97 SCRA 780 [1980]), Calvero vs. ECC, et al. (117 SCRA 452 [1982]), Segismundo vs. GSIS, et al. (121 SCRA 304 [March 28, 1983]), the question of compensability of petitioner's ailment hinges on the approximate, if not the exact, point in time when she contracted such ailment, which determines the law applicable in the instant case.

It is indubitable that petitioner's ailment diagnosed as glaucoma supervened in the course of her employment. This was even admitted by respondent GSIS when it denied petitioner's request for reconsideration (p. 16, ECC rec.). Petitioner entered the government service in 1946, and it was only in 1971 or after a period of almost twenty-five (25) years that her ailment became manifest as headache and blurring vision (p. 11, ECC rec.). Apparently, it was aggravated in 1972 when she collapsed while teaching, with the back part of her head (cerebellum) hitting the floor, after which she complained of recurring headache and painful eyes.

On April 10, 1976, Dr. Benicio M. Torralba diagnosed petitioner's ailment as:

"Absolute glaucoma, OD. [right eye]. Simple chronic glaucoma, OS. [left eye]" (p. 9, ECC rec.).

Likewise, on November 10, 1976, Dr. Romeo Galang of the Pampanga Eye, Ear, Nose, Throat and General Hospital, examined petitioner's eyes and made the following findings:

"Vision:

O.D. Negative.

O.S. CF 1/2 foot.

"Fundusoscopic examination:

O.D. (lens is cataractous)

O.S. cupping of the disc (glaucomatous)"

[p. 12, ECC rec.].

The findings of respondent ECC's Medical Officer also indicated that petitioner's ailment is glaucoma -- primary, chronic simple, wide-angle type (p. 19, ECC rec.). However, while the ECC Medical Officer correctly diagnosed petitioner's ailment as such, her findings (which was the basis of the ECC decision) on the predisposing factors of petitioner's disease were actually those of another type of glaucoma referred to as the chronic congestive, narrow-angle type. The findings of the ECC Medical Officer state that "among the predisposing factors are vasomotor and emotional instability, hyperopia and especially heredity" (ibid).

Medical authorities state:

"Two well-defined types of primary glaucoma exist which differ from each other in the type of patient affected, their clinical course and symptomatology, and in their prognosis and treatment -- closed-angle and simple glaucoma. As a general rule, the first type is characterized by sudden episodic subacute attacks of raised tension, the most notable features of which are a diminution of vision and the subjective appearance of halos caused by corneal oedema. From the less severe of these attacks the eye may seem to recover to a considerable extent, but subsequent episodes tend to involve a permanent raising of the tension (chronic congestive glaucoma) which may result in blindness (absolute glaucoma) or an acute attack may abolish vision. The second type, on the other hand, develops slowly, quietly and insidiously over many years with a characteristic triad of symptoms -- raised tension, typical field defects and cupping of the disc -- until in the 'absolute' stage the eye becomes intensely hard, all vision is lost and the disc develops a deep atrophic cup.

xx xx xx

"Closed-angle Glaucoma. This form of glaucoma occurs typically in persons, usually women, in the fifth or sixth decade; it may, however, occur earlier or later. It is seen particularly in those who are highly strung and anxious in disposition and usually show an instability in their vaso-motor reactions.

"The type of eye affected is characteristic. It is usually hypermetropic, the anterior chamber is shallow with the

lensiris diaphragm far forward and its angle narrow; the last feature is a constant characteristic. The narrowness of the angle may be due to the smallness of many of these eyes, the configuration of the ciliary body, and often to the relative size of the lens in comparison with the smallness of the eye so that this tissue crowds the root of the iris against the cornea, narrowing the filtration passages. Narrow-ness of the angle is often a hereditary characteristic but does not become apparent until the fourth or fifth decade, a development typical of advancing years associated to some extent with the growth of the lens.

xxx xxx xxx

"Simple Glaucoma presents an entirely different clinical picture from the acute form. While the latter occurs preferentially in women in the fifth and sixth decades, of an excitable habit and with unstable vasomotor system, simple glaucoma occurs in either sex a decade later, affecting people who are of no specific psychological pattern but who are generally the subject of sclerosis. While closed angle glaucoma is characterized by premonitory symptoms and a turbulent course, simple glaucoma is quietly and practically symptomless. The first type always occurs in a specific type of eye with a narrow angle of the anterior chamber. The second occurs with any type of angle; this, as is found in the population generally, is therefore usually wide. In the first type, field-defects and cupping of the disc appear late and develop rapidly; in the second, early and insidiously. Both forms of the disease, however, lead to the same end -- a stage of permanent congestion, absolute glaucoma and blindness. In both types the condition is almost always eventually bilateral.

"The clinical course simple glaucoma is characteristic. No symptoms are generally experienced although mild headache and eye-aches may occur. An observant person may notice a defect in the visual field; while reading and close work often present increasing difficulties due to accommodative failure owing to pressure upon the ciliary muscle and its nerve supply. An increase in the strength of presbyopic glasses is therefore often required. On the whole, however, the disease is so insidious that it is often not noticed until the vision of one eye is almost lost and that of the other seriously impaired, when it may be discovered only by accident" (PARSONS' Diseases of the Eye, Sir Steward Duke-Elder, 15th ed, 1969, pp. 289, 290, 298-299).

Significantly, petitioner experienced headache and blurring vision in 1971. On August 24, 1972, after she collapsed with the back of her head hitting the floor, she often complained of recurring headache and painful eyes. In 1976, when she was examined by Dr. Benicio Torralba and Dr. Romeo Galang she already lost one eye due to absolute glaucoma (last stage of primary glaucoma), and another eye seriously impaired due to primary simple chronic glaucoma.

It is also important to note that in the instant case, the petitioner had served the government as an elementary school teacher for almost 29 years prior to her disability retirement. She spent more than half of her teaching services in the barrio of San Rafael, Mexico Pam-panga, which according to the certification of its Barrio Captain, Julian Quillar, executed on May 25, 1979, is still without electricity (p. 4, ECC rec.).

We are well aware of the fact that only a handful of public elementary school teachers are fortunate enough to be assigned in urban areas where the working conditions are comparatively much better than those in the rural areas. A large majority of public elementary school teachers, as in the case of the petitioner, work in remote places such as sitios and barrios under poor working conditions. Thus, the daily task of conducting classes (normally composed of 40 to 50 pupils in urban areas and up to 70 pupils in rural areas) in an atmosphere that is, by any standard, not conducive to learning becomes even more physically taxing to the teachers. Tremendous amount of paper work during and after office hours (from correcting examination papers, assignments, school projects and reports to writing lesson plans and the computation and recording of grades) can be very physically draining especially to the senior members of the teaching profession such as the petitioner. Such and other related school activities of a teacher, aggravated by sub-standard, if not adverse, working conditions, give rise to increased

tension, if not emotional and psychological disturbance on the part of the teachers. This is especially true in the case of public elementary school teachers whose pupils, being of tender age and immature, need to be disciplined and to be taught good manners and right conduct, as well as to be assisted in their formal school lessons.

Medical experts report that "glaucoma is a symptomatic condition, not a disease sui generis. The characteristic physical sign is increased intra-ocular pressure. xx xx Thus a rise in blood pressure in the capillaries usually associated with states of congestion causes a raised ocular tension owing to the increased volume of the dilated vessels and the increased transudation of fluid into the chambers of the eye" (PARSONS' Diseases of the Eye, S.S. Duke-Elder, 15th ed., 1969, p. 285).

According to the certification issued by Dr. Delfin Rosales, petitioner's attending physician in the Philippine Eye Research Institute at the Philippine General Hospital, "x x her work and the strain on her eyes could have contributed significantly to aggravating the glaucoma she is suffering right now" (p. 14, ECC rec.).

WE must not also neglect to mention the fact that public elementary school teachers are the lowest paid government workers, considering the nature and importance of the services they render. They are the most reliable and dedicated public servants being constantly called upon by officials of the local and national government to assist in various extra-curricular and civic activities which contribute to the welfare of the community and the country. Their responsibility in molding the values and character of the young generations of the country, cannot be overestimated.

"Significantly, even Republic Act No. 4670, otherwise known as the Magna Charta for Public School Teachers, mandates in one of its provisions that 'teachers shall be protected against the consequences of employment injury in accordance with existing laws. The effects of the physical and nervous strain on the teacher's health shall be recognized as compensable occupational diseases in accordance with existing laws'" (Calvero vs. ECC, et al., 117 SCRA 462 [1982]).

It is therefore patent that petitioner's ailment had its onset earlier than when she started to have headache and blurring vision -- after serving for about twenty-five (25) years as a public school teacher. According to the above-quoted medical authorities, "the disease is so insidious that it is often not noticed until the vision of one eye is almost lost and that of the other seriously impaired, when it may be discovered by accident" (Ibid., pp. 298-299). It was the incident on August 24, 1972, wherein she accidentally banged the rear portion of her head (cerebellum) on the floor that led to the discovery of her ailment -- long before the effectivity of the New Labor Code.

Consequently, the law that governs the instant case is the Workmen's Compensation Act, as amended, and not P.D. No. 626, as amended. Thus, this Court ruled:

"Petitioner's claim having accrued prior to the New Labor Code, the presumption of compensability, the principle of aggravation, the award of attorney's fees and the payment of administrative fees must be observed and applied. And the Employees' Compensation Commission as the successor of the defunct Workmen's Compensation Commission is duty bound to observe and apply the foregoing principles in passing upon worker's compensation. xx x" (Corales vs. ECC, et al., 88 SCRA 554 [1979]; LaO vs. ECC, et al., 97 SCRA 780 [1980]; Panangui, et al. vs. ECC, et al., G.R. No. 56259 [March 18, 1983]).

Under Section 44 of the Workmen's Compensation Act, a presumption of compensability is established, although rebuttable by substantial evidence to the contrary. And this Court ruled in Segismundo vs. GSIS, et al. (G.R. No. 50941 [March 28, 1983]), that, "(T)he presumption of compensability places upon the employer the burden of establishing the contrary by substantial evidence. As there was no evidence presented by the employer to rebut the

presumption, there can therefore be no occasion for respondent Commission to absolve the deceased's employer. The presumption of compensability becomes conclusive (*Pantoja vs. Republic*, 87 SCRA 443; *Cañonero vs. WCC*, 81 SCRA 712; *Lorenza vs. WCC*, 81 SCRA 434; *Santros vs. WCC*, 75 SCRA 365)."

And, "the cause of the ailment is immaterial; what is important is that it occurred or was aggravated in the course of employment" (*Evangelista vs. ECC, et al.*, 111 SCRA 66 [1982]). "It then becomes unquestionable that once the illness supervened at the time of the employment, there is a rebuttable presumption that such illness arose out of the employment or was at least aggravated by such employment" (*Panangui, et al. vs. ECC, et al.*, G.R. No. 56259 [March 18, 1983]).

Furthermore, in the case of *LaO vs. ECC, et al.* (97 SCRA 780, 791 [1980]), this Court ruled that "x x x where the cause of the illness of the claimant or of the death of the deceased is not definitely determinable, the medical report of findings presented by respondent employer (the ECC or GSIS) does not or cannot constitute substantial evidence to prevail over the presumption of compensability and aggravation and thus defeat the compensability of the claim."

Moreover, in *Calvero vs. ECC, et al.* (117 SCRA 461 [1982]), this Court ruled that the presumption of compensability established by law, could not be overcome by the opinion of the ECC Medical Officer that there was no causal connection between the ailment and claimant's employment nor was the risk of contracting it increased by the working conditions.

Respondents ECC and GSIS, however, maintain that the presumption of compensability and the doctrine of aggravation are not applicable in the instant case. Respondent System argues that petitioner could not have been awarded any disability claim in 1971 because she continued working there-after. This argument raised the issue of whether or not the term "disability compensation" implies that the compensation must be for loss or diminution of salary. However, this question has been resolved in *Corales vs. ECC, et al.* (88 SCRA 555, 556 & 557 [1979]), and related cases, thus:

"xx x We have recognized the fact that an employee medically pronounced disabled for work can, despite thereof, pursue his work by sheer determination and ingenuity.

"In the subsequent cases of *Romero vs. WCC, et al.* (77 SCRA 480, June 30, 1977) and *Gonzales vs. WCC, et al.* (81 SCRA 709-710), We enunciated that:

"Disability, as a basis for compensation, is the combination of partial or total physical incapacity and of inability to work, or inability to work with the same ease and competency as before the injury, or the loss, total or partial, of earning power from the injury (*Corpus Juris*, Section 535, p. 813).

"Disability is used either in the medical or physical sense, as evidenced by obvious loss of members or by medical testimony that the claimant simply cannot make the necessary muscular movements and exertions; it is used to mean de facto inability to earn wages, as evidenced by proof that claimant has not in fact earned anything.

"This medical and wage-loss aspects of disability may be more clearly illustrated as follows: A claimant may be, in a medical sense, utterly shattered and ruined, but may by sheer determination and ingenuity contrive to make a living for himself; conversely, a claimant may be able to work, in both his and doctor's opinion, but awareness of his injury may lead employers to refuse him employment.

"The problem of the administrators of the Act is the proper balancing of these medical and wage-loss factors. An absolute insistence on medical disability in the abstract would produce a denial of compensation in the latter case, although the wage-loss is a real and as directly traceable to the injury as in any other instance. At the other extreme, an insistence on the wage-loss as the best would deprive the claimant in the former illustration of an

award, thus not only penalizing his laudable efforts to make the best of his misfortune but also fostering the absurdity of pronouncing man non-disabled in spite of the unanimous contrary evidence of medical experts and of common observation (Larson, Vol. II, p. 3)."

Furthermore, in the same case, this Court said:

"A look at Section 13 of the Workmen's Compensation Act, as amended, reveals that it does not require that illness or disability should result in wage-loss to entitle one to an award of medical expenses or benefits. That section clearly states that 'immediately after an employee has suffered an injury or contracted sickness and during the subsequent period of disability, the employer or insurance carrier shall provide the employee with such services, appliances and supplies as the nature of his disability and the process of his recovery may require; and that which will promote his early restoration to the maximum level of his physical capacity x x x.'"

Moreover, "with the approval of her optional retirement, the question as to petitioner's disability is thus foreclosed. Under Memorandum Circular No. 133 of October 19, 1967 issued by the Office of the President, optional retirement may be allowed before reaching the compulsory age of retirement only upon proof that the employee is already physically incapacitated to render sound and efficient service [Meñez vs. ECC, et al., 97 SCRA 87, 97 (1980); Delos Angeles vs. ECC, et al., 94 SCRA 308, 312 (1979); Faicol vs. WCC, et al., 93 SCRA 811, 818 (1979); Cañonero vs. WCC, 81 SCRA 712, 720 (1978); Romero vs. WCC, 77 SCRA 482, 490 (1977)]" (Calvero vs. ECC, et al., supra, pp. 459-460). But, as pointed out by petitioner's counsel, like the real teacher that she is, petitioner went on working through sheer determination despite the fact that her vision was rapidly deteriorating. She should not therefore be deprived of her compensation but on the contrary she should be rewarded for her un-stinted devotion to her duties as a teacher (p. 97, rec.).

Finally, this Court, in the case of Panangui vs. ECC, et al. (121 SCRA 69 [March 18, 1983]), emphatically ruled that "(A)s We have consistently and even persistently stated before in numerous cases, We have always viewed and treated compensation claims on a much broader perspective and have always resolved such claims on the basis of the fundamental and well-entrenched constitutional precepts of social justice and protection to labor."

WHEREFORE, THE DECISION OF THE EMPLOYEES' COMPENSATION COMMISSION IS HEREBY SET ASIDE AND THE MINISTRY OF EDUCATION AND CULTURE IS HEREBY ORDERED

1. TO PAY PETITIONER THE SUM OF TWELVE THOUSAND (P12,000.00) PESOS AS DISABILITY COMPENSATION BENEFITS;
2. TO REIMBURSE PETITIONER HER MEDICAL AND HOSPITAL EXPENSES DULY SUPPORTED BY PROPER RECEIPTS;
3. TO FURNISH PETITIONER REHABILITATION SERVICES INCLUDING MEDICAL SURGICAL OR HOSPITAL TREATMENT AS WELL AS APPLIANCES TO HELP RESTORE HER EYESIGHT AND BECOME PHYSICALLY INDEPENDENT;
4. TO PAY PETITIONER ATTORNEY'S FEES EQUIVALENT TO 10% OF THE AMOUNT OF THE AWARD; AND
5. TO PAY ADMINISTRATIVE COSTS.

SO ORDERED.

Concepcion, Jr., Guerrero, Abad Santos, De Castro, and Escolin, JJ., concur.
Aquino, J., no part.

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