

Title: ****Spouses Fredelicto Flores (Deceased) and Felicisima Flores vs. Spouses Dominador Pineda and Virginia Saclolo, et al., and United Doctors Medical Center, Inc.****

Facts:

The case revolves around the medical management and subsequent death of Teresita Pineda, who sought treatment from Dr. Fredelicto Flores in April 1987 for symptoms suggestive of diabetes and vaginal bleeding. Not improving, she was advised to see Dr. Flores at the United Doctors Medical Center (UDMC) in Quezon City for further evaluation. Despite exhibiting classic diabetic symptoms, she was prepared for a Dilation and Curettage (D&C) operation by Dr. Felicisima Flores, without addressing or adequately preparing for her suspected diabetes. Teresita's condition deteriorated after the surgery, leading to her death on May 6, 1987, from complications related to Diabetes Mellitus Type II.

Her family filed for damages against the Flores spouses and UDMC, alleging medical negligence. The Regional Trial Court (RTC) ruled in favor of Teresita's family, a decision affirmed with modifications by the Court of Appeals (CA). The Flores spouses appealed to the Supreme Court (SC), challenging the findings of negligence.

Issues:

1. Whether the D&C procedure conducted on Teresita Pineda amounted to medical negligence.
2. Whether the decision to perform the D&C operation without first addressing the patient's suspected diabetes was justified.
3. Whether the negligence, if any, directly caused Teresita Pineda's death.
4. The liability of UDMC in the negligence case and the proper damages to be awarded to the respondents.

Court's Decision:

The SC found the petition unmeritorious, holding that there was negligence on the part of the petitioner spouses in proceeding with the D&C operation despite Teresita's suspected diabetes and without waiting for complete laboratory results. This negligence directly contributed to Teresita's death from diabetic complications. UDMC's liability was not deliberated as its petition for review was previously denied, and it was not a party to this case. The SC affirmed the CA's decision on the award of damages but modified the awards granting an additional P50,000.00 for death indemnity and reinstating attorney's fees.

Doctrine:

The decision reiterates the medical malpractice doctrine, emphasizing the four elements necessary to establish a case: duty, breach, injury, and proximate causation. It underscores that a medical professional must exercise the level of care and competence that any reasonably competent medical provider would under similar circumstances. Any deviation that results in injury or harm to the patient can lead to liability for negligence.

Class Notes:

- **Key Elements of Medical Malpractice**: Duty, Breach, Injury, Proximate Causation.
- **Pre-operative Care in Elective Procedures**: Comprehensive evaluation and management of comorbidities before elective surgeries are crucial.
- **Importance of Expert Testimony in Medical Negligence Cases**: Expert opinion is often critical to establishing whether there was a departure from accepted medical standards of care.
- **Liability for Complications**: Medical practitioners may be held liable for complications resulting from a breach of duty, including failure to recognize or properly manage underlying conditions.
- **Damages**: Actual and compensatory damages for pecuniary loss, moral damages for mental anguish, exemplary damages for egregious negligence, attorney's fees, and costs of litigation, and death indemnity, are recoverable in medical negligence cases.

Historical Background:

This case demonstrates the legal challenges involved in proving medical negligence within the Philippine judicial system. It underscores the judiciary's role in scrutinizing the medical decisions and practices to ensure accountability and the need for meticulous procedural adherence by healthcare providers, especially in managing patients with comorbidities. The ruling contributes to the evolving jurisprudence on medical malpractice in the Philippines by clarifying the standards for pre-operative care and the management of patients with suspected critical conditions.