Title: **Dr. Eduardo Aquino, Dr. Alberto C. Reyes, and Dr. Divinia Unite vs. Heirs of Raymunda Calayag (693 Phil. 11)**

Facts

On November 13, 1990, Raymunda Calayag experienced labor and bleeding, leading her husband, Rodrigo Calayag, to bring her to St. Michael's Clinic, where Dr. Divinia Unite determined a caesarean section was necessary. She referred them to Sacred Heart Hospital (SHH), owned by Dr. Alberto Reyes, for the procedure. Raymunda was admitted to SHH, and Dr. Eduardo Aquino administered anesthesia. Post-operation, Raymunda exhibited symptoms of cyanosis and her vital signs failed, leading to resuscitation.

Post-surgery, Raymunda did not regain consciousness and was revealed to have suffered cardiac arrest, causing a vegetative state. Dr. Libarnes, a neurologist at Medical Center Manila (MCM), confirmed her condition was due to an anoxic brain injury. Subsequently, Raymunda's surgical wound reopened, and she was discharged from MCM without further improvement and died on December 14, 1990.

Rodrigo and his children filed a complaint for damages due to medical malpractice against Dr. Unite, Dr. Aquino, and Dr. Reyes at the Regional Trial Court (RTC) of Malolos, which ruled against the doctors. The Court of Appeals upheld this decision, prompting the doctors to seek review by the Supreme Court.

Issues

- 1. Did Dr. Divinia Unite and Dr. Eduardo Aquino act negligently during Raymunda's operation, leading to her death?
- 2. Is Dr. Alberto Reyes, as the hospital owner, liable for the negligence of Dr. Unite and Dr. Aquino?

Court's Decision

1. **Negligence of Dr. Unite and Dr. Aquino**: The Court determined that both doctors acted negligently. Dr. Aquino administered high spinal anesthesia, leading to Raymunda's cardiopulmonary arrest and subsequent brain damage due to lack of timely resuscitation. Dr. Libarnes and Dr. Chua's testimonies supported the finding of negligence. The RTC and Court of Appeals' findings regarding the incompetence in monitoring and the absence of timely intervention were upheld. Dr. Unite, despite attempting to shift blame, was not exempt from liability due to her supervisory role and the inappropriate use of an ill Dr. Aquino.

2. **Liability of Dr. Reyes**: The Court found no evidence supporting Dr. Reyes's control over Dr. Unite and Dr. Aquino. The application of the control test revealed that Dr. Reyes did not have an employer-employee relationship with the other doctors. Additionally, there was no evidence that Raymunda and Rodrigo believed that the doctors were SHH employees due to any action by the hospital, nullifying the doctrine of ostensible agency.

Doctrine

- Medical Malpractice: Physicians owe a duty to exercise care that is standard in their practice. Any deviation leading to patient harm can ground a claim for malpractice.
- Proximate Cause: The plaintiff must show the negligence directly caused the injury, as seen in Raymunda's brain damage due to the delay in addressing anesthesia-induced cyanosis.
- Non-Delegable Duty & Res Ipsa Loquitur: The physician directly responsible for patient care cannot absolve accountability by delegating tasks indiscriminately.

Class Notes

- **Medical Malpractice Elements**: Duty, Breach, Injury, Proximate Cause (Li v. Spouses Soliman).
- **Control Test**: Used to ascertain vicarious liability by evaluating the employment relation and control extent (Garcia-Rueda v. Pascasio).
- **Ostensible Agency**: Requires evidence the hospital led a patient to reasonably believe the negligent party was its employee and the patient relied on that belief.
- **Res Ipsa Loquitur**: Applied where negligence inference directly deduces breach from the occurrence facts alone.

Relevant Statutes:

- Article 2206 of the Civil Code: Awards death indemnity in judicial determinations applicable to wrongful deaths.

Historical Background

The case arose from an incident in 1990, highlighting the professional accountability standards for medical practitioners within Philippine jurisdiction. It underscores the jurisprudential evolution in handling medical negligence and institutional liability concerning private hospital practice and independent medical specialists.