

Ethical Dilemmas in Patient Consent for Multidisciplinary Diagnostic and Therapeutic Procedures: Balancing Autonomy and Professional Responsibility

Mada A. Alanizi¹, Norah Y. Alsulaiman², Lamia K. Albugami³,
Fay A. Alkhuredly⁴, Johara A. Almutairi⁵, Ahmed A. Shareefi⁶

Health Affairs at the Ministry of National Guard

Abstract

Background: Obtaining informed consent in multidisciplinary healthcare settings presents unique ethical challenges, as professionals from different disciplines must balance patient autonomy with their responsibility to ensure optimal care. This study explores the ethical dilemmas faced by radiologists, dentists, physiotherapists, nurses, and laboratory specialists in a tertiary hospital when obtaining consent for diagnostic and therapeutic procedures.

Methods: A qualitative cross-sectional study was conducted using semi-structured interviews and focus groups with 50 healthcare professionals across five disciplines. Thematic analysis was used to identify key ethical challenges related to informed consent.

Results: Key findings highlighted the challenges of fragmented communication, the tension between patient autonomy and professional responsibility, and the difficulty in ensuring patient understanding. A lack of interdisciplinary coordination in the consent process was identified as a major contributor to patient confusion and ethical dilemmas.

Conclusion: The study recommends the development of multidisciplinary consent protocols, improved interdisciplinary communication, and ongoing ethics training to address these ethical challenges. These strategies will enhance patient understanding and improve the quality of informed consent in complex healthcare settings.

Keywords: Informed Consent, Multidisciplinary Care, Patient Autonomy, Professional Responsibility, Ethical Dilemmas, Healthcare Communication.

Introduction

Informed consent is a foundational principle in healthcare, ensuring that patients are aware of, understand, and agree to the medical procedures and treatments they will undergo. It is rooted in the ethical principle of autonomy, which emphasizes a patient's right to make informed decisions about their own care (Beauchamp & Childress, 1994). However, in multidisciplinary healthcare settings, such as tertiary hospitals, obtaining informed consent becomes more complex. When radiologists, dentists, physiotherapists, nurses, and laboratory specialists are all involved in a patient's care, each profession may contribute distinct diagnostic

or therapeutic procedures, creating potential ethical dilemmas in ensuring that consent is truly informed and holistic.

The complexity arises from the fact that each healthcare provider brings unique expertise and perspectives to the patient's care, but they may approach consent differently based on their professional roles and interactions with the patient. For example, a radiologist might focus on the risks and benefits of imaging procedures, while a physiotherapist may explain the physical interventions involved in rehabilitation. Meanwhile, the dentist and laboratory specialist may have different considerations related to invasive dental procedures or diagnostic tests, respectively (Gawande, 2014). This division of responsibilities raises questions about whether patients can fully grasp the scope of their care when it is provided by multiple disciplines.

Moreover, healthcare professionals face ethical tensions in balancing respect for patient autonomy with their responsibility to provide care that is in the patient's best interest (O'Neill, 2002). In some cases, patients may not fully understand the implications of refusing a particular intervention recommended by one discipline, which can lead to suboptimal outcomes. This creates a dilemma for healthcare providers, who must navigate the fine line between respecting patient choices and ensuring that those choices are well-informed and not detrimental to their overall health.

This study aims to explore the ethical challenges in obtaining and managing informed consent across multidisciplinary teams, focusing on how healthcare professionals from radiology, dentistry, physiotherapy, nursing, and laboratory science balance patient autonomy with their professional responsibility. By examining real-world case studies and professional experiences, this research seeks to identify strategies for ensuring that informed consent is ethically sound in complex healthcare environments.

Literature Review

Informed Consent in Healthcare

Informed consent is a key ethical and legal requirement in healthcare, ensuring that patients understand the risks, benefits, and alternatives of medical treatments or procedures before agreeing to them. Rooted in the principle of autonomy, informed consent respects patients' rights to make decisions about their own care (Beauchamp & Childress, 1994). The process involves not only providing adequate information but also ensuring that patients have the capacity to make decisions, and that their consent is given voluntarily, without coercion or undue influence (Faden & Beauchamp, 1986). While the core components of informed consent are well-established, the implementation of this process can vary depending on the healthcare setting and the nature of the intervention.

In multidisciplinary care, obtaining informed consent becomes more complex as multiple healthcare professionals, each with their own areas of expertise, may be involved in diagnosing and treating a patient. This can lead to ethical dilemmas around whether patients truly understand the full scope of the procedures being recommended and how each discipline's interventions contribute to the overall treatment plan (Manson & O'Neill, 2007).

The Complexity of Informed Consent in Multidisciplinary Settings

Multidisciplinary care involves various professionals working together to provide comprehensive care to patients, particularly in tertiary hospitals where complex medical cases are common. Each discipline—radiology, dentistry, physiotherapy, nursing, and laboratory science—contributes specialized knowledge and

interventions. While this approach enhances the quality of care, it presents unique challenges in ensuring that informed consent is adequately obtained and understood.

For instance, in radiology, consent often revolves around the risks of radiation exposure or invasive imaging techniques. Dentists, meanwhile, may need to obtain consent for surgical or restorative procedures, which come with different sets of risks and considerations. Physiotherapists must explain the physical risks associated with rehabilitation exercises, while laboratory specialists may focus on the implications of diagnostic tests and the use of biological samples. Nurses, who often have the closest contact with patients, may provide general information and answer questions, but they may not have detailed knowledge of all the disciplines involved (Loh et al., 2002).

A study by Gawande (2014) highlighted that patients in multidisciplinary settings can feel overwhelmed by the amount of information they receive, leading to confusion about the roles of different healthcare providers. This can affect the quality of consent, as patients may not fully understand the implications of each procedure when faced with multiple, overlapping interventions. The study emphasized the need for improved communication and coordination among healthcare teams to ensure that patients receive clear and consistent information, making the consent process more ethically sound.

Ethical Challenges: Balancing Autonomy and Professional Responsibility

The ethical principle of autonomy requires that patients are free to make their own healthcare decisions, but healthcare professionals have a duty to ensure that those decisions are well-informed and not harmful to the patient's overall health. This creates a tension between respecting patient autonomy and fulfilling professional responsibilities, particularly in multidisciplinary care settings where different providers may have differing perspectives on the patient's best interests (O'Neill, 2002).

One common ethical challenge arises when patients refuse specific procedures recommended by one discipline, such as refusing a radiological scan or physiotherapy intervention. While patients have the right to refuse treatment, the healthcare team must ensure that the refusal is based on a full understanding of the risks involved in not proceeding with the intervention. In cases where patients do not fully comprehend the implications of refusal due to a lack of clear information from multiple providers, healthcare professionals are ethically obliged to revisit the consent process to provide additional clarification (Gawande, 2014). This balancing act can create ethical dilemmas for professionals, particularly in cases where the patient's refusal may result in harm.

In addition, professionals may experience role-specific ethical tensions. For example, radiologists are often removed from direct patient care and may rely on other members of the healthcare team to explain the risks of imaging. Similarly, laboratory specialists typically do not interact directly with patients but contribute significantly to decision-making through diagnostic testing. These role distinctions can lead to challenges in coordinating consent, particularly if patients receive fragmented or inconsistent information (Manson & O'Neill, 2007).

Informed Consent and Interdisciplinary Communication

Effective interdisciplinary communication is essential for obtaining informed consent in multidisciplinary care. Studies show that when healthcare professionals communicate poorly or fail to coordinate their messaging, patients may receive conflicting information, leading to confusion or mistrust (Silverman et al., 2016). This can undermine the consent process and result in patients making decisions based on incomplete

or misunderstood information. Moreover, healthcare teams that fail to communicate effectively about a patient's preferences and decisions may inadvertently proceed with treatments that the patient has not fully consented to.

A study by Loh et al. (2002) emphasized that clear communication between healthcare providers and patients is crucial in ensuring that consent is ethically obtained in multidisciplinary settings. They argued that healthcare teams need to be trained in delivering consistent, coherent information that covers all aspects of the patient's care. By aligning the information provided across disciplines, teams can minimize the risk of misunderstandings and ensure that patients are able to make informed decisions.

Legal and Ethical Guidelines for Multidisciplinary Informed Consent

Legal frameworks and ethical guidelines have evolved to address the complexities of informed consent in multidisciplinary care. In many jurisdictions, consent must be obtained by the healthcare provider responsible for a particular intervention, but in multidisciplinary settings, this responsibility can become diffuse. Ethical guidelines from organizations such as the American Medical Association and the World Health Organization emphasize that all healthcare providers involved in a patient's care share the responsibility of ensuring that consent is informed, voluntary, and based on an understanding of the entire treatment plan (AMA, 2016).

Furthermore, legal cases have highlighted the potential consequences of failing to obtain proper informed consent in complex care settings. In several landmark cases, courts have ruled that healthcare teams are liable when patients are not adequately informed about the risks of procedures involving multiple disciplines. These rulings have reinforced the need for comprehensive, patient-centered consent processes that account for the involvement of various healthcare professionals (Irvine and McPhee, 2007).

Informed consent is a critical component of ethical patient care, but it becomes particularly challenging in multidisciplinary healthcare settings where different professionals contribute to a patient's treatment. Ethical dilemmas arise when patients are faced with complex information from multiple disciplines, creating challenges in ensuring that their consent is truly informed. To address these challenges, healthcare teams must focus on improving communication, coordination, and education around the consent process. By aligning the perspectives of radiologists, dentists, physiotherapists, nurses, and laboratory specialists, multidisciplinary teams can better support patient autonomy while fulfilling their professional responsibilities.

Methodology

Study Design

This study utilized a qualitative, cross-sectional design to explore ethical dilemmas in obtaining informed consent across multiple healthcare disciplines in a tertiary hospital. The study focused on how healthcare professionals from radiology, dentistry, physiotherapy, nursing, and laboratory services navigate the complexities of informed consent while balancing patient autonomy with professional responsibility. The research was conducted over a period of six months (January to June 2024) in a large tertiary hospital with a capacity of 1,000 beds, offering a wide range of multidisciplinary services.

Study Setting

The study was conducted in a tertiary care hospital where multidisciplinary care is routinely provided to patients with complex healthcare needs. The hospital includes departments of radiology, dentistry,

physiotherapy, nursing, and laboratory sciences, all of which were involved in the study. The setting provided an ideal environment to explore real-world ethical dilemmas in patient consent, as it required close collaboration among various healthcare professionals.

Participants

The participants included healthcare professionals from the following departments:

- Radiology: Radiologists and radiologic technologists involved in diagnostic imaging and invasive procedures.
- Dentistry: Dentists performing oral surgeries, restorations, and other dental interventions.
- Physiotherapy: Physiotherapists responsible for rehabilitation and physical interventions.
- Nursing: Nurses providing direct patient care, education, and support during medical procedures.
- Laboratory Services: Laboratory specialists responsible for diagnostic testing, handling patient samples, and interpreting results.

A purposive sampling technique was used to select 50 healthcare professionals from these five disciplines (10 participants from each department). The inclusion criteria were:

- At least three years of experience in their respective field.
- Involvement in multidisciplinary care where informed consent is required for procedures.
- Willingness to participate in interviews and share their experiences related to obtaining informed consent.

Data Collection

Data were collected through semi-structured interviews with healthcare professionals. Each interview lasted 30 to 45 minutes and was conducted by trained researchers experienced in qualitative research methods. The interviews were guided by open-ended questions designed to explore the following themes:

- How participants explain their procedures to patients and obtain informed consent.
- Challenges faced in communicating risks, benefits, and alternatives when multiple professionals are involved.
- Experiences in situations where patient autonomy conflicted with professional recommendations.
- Strategies used to coordinate consent processes across different disciplines.

The interviews were audio-recorded with participant consent, transcribed verbatim, and anonymized to protect confidentiality.

Additionally, two focus group discussions were held with representatives from each department to encourage dialogue about common ethical challenges and shared strategies for overcoming them. These discussions allowed participants to reflect on interdisciplinary communication and the ways in which different departments collaborate on obtaining informed consent.

Data Analysis

The transcribed interviews and focus group discussions were analyzed using thematic analysis, following the six-step approach outlined by Braun and Clarke (2006):

1. Familiarization: Researchers repeatedly read the transcripts to become familiar with the data.
2. Generating Initial Codes: Key themes and patterns related to ethical dilemmas in obtaining informed consent were identified and coded.
3. Searching for Themes: Codes were grouped into broader themes that reflected the ethical challenges, such

as "conflicts in patient autonomy vs. professional responsibility," "communication barriers," and "multidisciplinary consent coordination."

4. Reviewing Themes: The themes were reviewed and refined to ensure they accurately reflected the data.

5. Defining and Naming Themes: Each theme was clearly defined and named to capture the essence of the ethical dilemmas experienced by the participants.

6. Writing the Report: A comprehensive report was produced, illustrating the key themes with direct quotes from participants to provide rich insights into their experiences.

Ethical Considerations

This study was approved by the ethics committee, and all participants provided informed consent prior to their involvement. Confidentiality was ensured by anonymizing all data, and participants were informed that they could withdraw from the study at any time without consequence. Given the sensitive nature of the topic, care was taken to ensure that participants felt comfortable discussing ethical challenges, and psychological support was made available in case any participants experienced distress while recounting difficult cases.

Limitations

While the study provided valuable insights into the ethical challenges of obtaining informed consent in multidisciplinary care, it was limited to a single tertiary hospital. As such, the findings may not be generalizable to other healthcare settings with different organizational structures or patient populations. Additionally, the study focused on healthcare professionals' perspectives, and future research could benefit from including patient perspectives on the consent process.

Findings

The analysis of interviews and focus group discussions revealed several key themes regarding the ethical dilemmas faced by healthcare professionals in obtaining informed consent for multidisciplinary diagnostic and therapeutic procedures. These themes highlight the complexity of balancing patient autonomy with professional responsibility, particularly when multiple healthcare providers are involved in patient care.

1. Challenges in Communicating Risks and Benefits Across Disciplines

One of the most prominent challenges identified was the difficulty in conveying complex information about different procedures, each provided by different professionals. Participants reported that while they are experts in their specific fields, they often struggled to explain how their procedures fit into the broader treatment plan when other disciplines were also involved. This was especially true when patients had to consent to multiple interventions, such as radiological imaging, dental surgery, physiotherapy sessions, and laboratory testing.

- A radiologist noted:

“When I explain a scan, I’m focused on the risks related to radiation or the procedure itself, but I can’t fully explain how it ties into their overall treatment because I’m not involved in every other aspect of their care. Patients often ask questions that go beyond my area, and I have to refer them back to their primary physician or another specialist.”

- A dentist mentioned:

“Dental procedures, especially surgeries, require detailed consent about pain management, potential

complications, and recovery time. When the patient is also seeing a physiotherapist and other specialists, it can be overwhelming for them to take in all the information and make an informed decision.”

The result was often confusion or partial understanding on the patient’s part, as different professionals approached consent with their specific roles in mind. This fragmentation sometimes undermined the overall consent process, leaving patients unsure about the full scope of their treatment.

2. Patient Autonomy vs. Professional Responsibility

Healthcare providers across all disciplines reported ethical dilemmas when patients made decisions that conflicted with their professional recommendations. Many participants described cases where patients refused certain procedures due to fear, misinformation, or personal preferences, even when these interventions were considered necessary for their care.

- A physiotherapist stated:

“We had a patient who refused further physiotherapy after a joint replacement surgery because they were afraid it would cause more pain. Even though we tried to explain how important it was for their recovery, they were firm in their decision. It put us in a difficult position because we knew they were risking long-term complications.”

- A nurse highlighted:

“There are times when patients refuse lab tests or treatments because they’ve heard conflicting information from different providers, or they don’t fully understand the necessity. It’s our responsibility to respect their decision, but it’s hard when we know the refusal could negatively impact their health.”

These situations created significant ethical tension for healthcare providers, who had to balance their duty to respect patient autonomy with their responsibility to ensure the best possible health outcomes. Participants also expressed concern about the legal implications of proceeding with or foregoing treatments when patient consent was either incomplete or refused altogether.

3. The Role of Nursing in Facilitating Informed Consent

Nurses were often identified as playing a critical role in the informed consent process, acting as intermediaries between patients and specialists. Given their direct and continuous interaction with patients, nurses were frequently the ones who clarified information, answered follow-up questions, and ensured that patients understood the procedures they were consenting to.

- A nurse shared:

“Often, after the doctors or specialists leave, patients ask me to explain things again. They might not have understood the technical terms or they’re unsure about the risks. It’s part of my job to make sure they’re comfortable with what’s happening.”

However, nurses also reported feeling ethically challenged when asked to explain procedures that fell outside their scope of expertise. In such cases, they felt responsible for ensuring that patients understood the risks but were also aware of the limitations of their knowledge.

4. Coordination Between Disciplines in Obtaining Consent

One of the key findings was the lack of consistent coordination between different disciplines in obtaining

informed consent. Participants noted that while each professional was responsible for obtaining consent for their specific procedures, there was little communication between departments regarding how consent was managed across the patient's entire treatment plan.

- A laboratory specialist noted:

"We don't always know what the other departments have told the patient about their treatment. I've seen cases where a patient agrees to a blood test, but then later refuses imaging because they weren't sure how it all fits together."

- A dentist remarked:

"There's a disconnect sometimes. I might go through the entire consent process with a patient, and then they're confused later because they weren't told how the dental work relates to their rehabilitation or ongoing care."

This lack of integration in the consent process often resulted in patients feeling overwhelmed or receiving inconsistent information, leading to potential breaches in the ethical principle of fully informed consent. Many participants suggested that better interdisciplinary communication and shared decision-making processes could help address this issue.

5. Patient Understanding and Decision-Making Capacity

Another major theme that emerged was the difficulty in ensuring that patients truly understood the implications of the procedures they were consenting to. In cases where patients had multiple complex interventions, such as imaging, dental surgery, and physiotherapy, participants expressed concerns that patients did not always have the capacity to fully grasp the details of each intervention.

- A physiotherapist stated:

"Sometimes the information overload is too much for patients. We're giving them so many details in such a short time that it's hard for them to process everything. It's a big challenge because we want them to make informed choices, but they might just agree to everything out of confusion or fear."

Participants also noted that certain patient populations, such as the elderly or those with cognitive impairments, were particularly vulnerable to misunderstandings during the consent process. These cases required additional care and often involved family members in the decision-making process, further complicating the ethical dynamics of autonomy and consent.

6. Proposed Solutions and Best Practices

During the focus group discussions, several best practices and proposed solutions emerged to address the ethical dilemmas in informed consent. One of the most widely suggested strategies was the development of multidisciplinary consent protocols that ensure consistent messaging across disciplines. Participants also recommended more frequent interdisciplinary meetings to discuss patient cases and ensure that consent was being handled uniformly.

- A radiologist suggested:

"I think we need standardized protocols that outline how we approach consent when multiple departments are involved. That way, patients aren't hearing five different explanations—they get one comprehensive overview of their care."

- A dentist added:

“Interdisciplinary meetings could really help us align our messages. We all need to be on the same page so that patients feel confident in the care they’re receiving.”

Participants agreed that better coordination and communication between disciplines, along with patient education efforts, could help mitigate many of the ethical challenges currently experienced in obtaining informed consent.

Discussion

The findings from this study underscore the complex ethical dilemmas healthcare professionals face when obtaining informed consent for multidisciplinary diagnostic and therapeutic procedures in a tertiary hospital setting. The involvement of multiple disciplines—radiology, dentistry, physiotherapy, nursing, and laboratory services—creates a multifaceted care environment where ensuring truly informed consent becomes challenging. This discussion will explore these key dilemmas, their implications, and potential solutions based on the study’s findings.

1. Challenges in Communicating Risks and Benefits Across Disciplines

The study highlighted that one of the most significant challenges in obtaining informed consent in multidisciplinary care is the difficulty healthcare professionals face in explaining the risks and benefits of their specific interventions while also ensuring that patients understand the broader context of their treatment plan. Each professional tends to focus on their own discipline-specific procedures, which can lead to fragmented communication and confusion for the patient. This finding aligns with previous research indicating that patients often struggle to fully grasp the implications of multidisciplinary care when faced with numerous procedures and specialists (Gawande, 2014).

When patients receive information from multiple healthcare providers without clear integration, they may fail to see how each procedure fits into the overall treatment plan. This fragmentation of information risks undermining the ethical principle of autonomy, as patients may give consent based on incomplete understanding of their care. The complexity of modern healthcare systems demands that professionals not only explain their own procedures but also provide patients with a cohesive picture of how these procedures work together (Loh et al., 2002).

2. Balancing Patient Autonomy and Professional Responsibility

Another key ethical tension identified in the study was the conflict between respecting patient autonomy and ensuring professional responsibility. Healthcare providers across all disciplines expressed difficulties when patients refused certain interventions that the providers deemed necessary. This situation presents an ethical dilemma, as professionals must respect the patient's right to refuse care while grappling with their duty to provide the best possible health outcomes.

In these cases, healthcare professionals often feel a deep sense of responsibility to ensure that patients are making well-informed decisions, particularly when refusal of treatment could lead to poor health outcomes. This ethical tension between autonomy and beneficence (doing good) is well-documented in healthcare literature (O'Neill, 2002). Providers are ethically obligated to respect patient choices, but they also have a duty to protect patients from harm, which can create internal conflicts, especially in multidisciplinary settings where the impact of one refusal may affect the outcomes of other treatments.

3. The Role of Nursing in Facilitating Consent

Nurses were identified as playing a crucial role in facilitating informed consent, acting as intermediaries between patients and specialists. This finding is consistent with the literature, which highlights nursing as a key profession in patient communication, especially in helping to clarify information and ensuring that patients understand the procedures they are consenting to (Silverman et al., 2016). Nurses often have the most direct and sustained contact with patients, positioning them as central figures in bridging the communication gaps that arise in multidisciplinary care.

However, this study also revealed that nurses often face ethical challenges when asked to explain procedures outside their scope of expertise. This places an additional burden on nurses to ensure that patients are not only informed but that their understanding of complex procedures across multiple disciplines is accurate. It raises the question of how much responsibility should rest on nurses to ensure informed consent and highlights the need for better interdisciplinary coordination.

4. Coordination Between Disciplines in Consent Process

One of the most critical findings was the lack of coordination between disciplines in the informed consent process. Participants described a disconnect between departments, which often resulted in patients receiving fragmented or inconsistent information. This lack of a unified approach can lead to ethical breaches in the consent process, where patients may not have a full understanding of the cumulative risks, benefits, and alternatives of their treatment plan.

The ethical principle of veracity (truth-telling) requires that patients receive clear, honest, and comprehensive information about their care (Beauchamp & Childress, 1994). In a multidisciplinary context, this means that communication between healthcare providers must be consistent and aligned. If each professional provides only partial information related to their specific role, patients are left to piece together the broader context, which can lead to misunderstandings and suboptimal decision-making. The findings suggest that a more integrated approach to obtaining consent is necessary, where professionals coordinate their explanations and ensure that patients are fully informed about the entire scope of their care.

5. Patient Understanding and Decision-Making Capacity

The study also highlighted the difficulties healthcare professionals face in ensuring that patients truly understand the information provided to them, especially when dealing with complex or cognitively impaired patients. Informed consent is not simply about providing information; it is about ensuring that patients have the capacity to comprehend that information and make informed decisions based on it (Faden & Beauchamp, 1986).

Participants expressed concerns that patients, especially those with multiple conditions or who are elderly, may struggle to fully understand the cumulative risks and benefits of multidisciplinary procedures. This raises ethical questions about how to protect patient autonomy while also ensuring that their decisions are well-informed. In cases where patients lack full decision-making capacity, involving family members or legal guardians in the consent process becomes crucial, but this can further complicate the ethical dynamics of autonomy and responsibility.

6. Proposed Solutions: Multidisciplinary Coordination and Communication

The findings of this study point to several potential solutions for addressing the ethical dilemmas in obtaining informed consent in multidisciplinary care. One key recommendation is the development of

standardized, multidisciplinary consent protocols that ensure all professionals involved in a patient's care are on the same page when explaining procedures. This would help reduce confusion and ensure that patients receive consistent information from all members of the healthcare team.

Additionally, regular interdisciplinary meetings where patient cases are discussed in detail could help healthcare providers align their messages and coordinate consent processes. Such meetings would allow professionals to share insights from their respective fields, ensuring that all providers understand the broader context of the patient's care and can communicate it effectively.

Finally, ongoing ethics training for healthcare providers, with a focus on multidisciplinary consent processes, could help professionals better navigate the ethical challenges of balancing autonomy and responsibility. By equipping providers with the skills to communicate complex information in a coordinated and patient-centered manner, healthcare teams can improve the quality of informed consent and enhance patient outcomes.

Conclusion

The ethical dilemmas identified in this study highlight the complexities of obtaining informed consent in multidisciplinary healthcare settings. Challenges related to fragmented communication, patient autonomy, and professional responsibility were prominent themes, underscoring the need for improved interdisciplinary coordination. To address these issues, healthcare teams must adopt more integrated approaches to consent, ensuring that patients are fully informed about the broader context of their care while respecting their autonomy. By implementing standardized protocols, enhancing communication, and prioritizing ethics training, healthcare providers can better navigate these ethical challenges and improve patient care.

References

1. American Medical Association (AMA). (2016). Code of Medical Ethics: Informed Consent. AMA Press.
2. Beauchamp, T. L., & Childress, J. F. (1994). *Principles of biomedical ethics*. Edicoes Loyola.
3. Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101.
4. Faden, R. R., & Beauchamp, T. L. (1986). *A history and theory of informed consent*. Oxford University Press.
5. Gawande, A. (2014). *Being mortal: illness, medicine and what matters in the end* (Vol. 12). London: Profile Books.
6. Irvine, R., & McPhee, J. (2007). Multidisciplinary team practice in law and ethics: an Australian perspective. In *Ethics* (pp. 143-156). Policy Press.
7. Loh, W. Y., Butow, P. N., Brown, R. F., & Boyle, F. (2002). Ethical communication in clinical trials: issues faced by data managers in obtaining informed consent. *Cancer: Interdisciplinary International Journal of the American Cancer Society*, 95(11), 2414-2421.
8. Manson, N. C., & O'Neill, O. (2007). *Rethinking informed consent in bioethics*. Cambridge University Press.
9. O'Neill, O. (2002). *Autonomy and Trust in Bioethics* (Vol. 37). Cambridge University Press.
10. Silverman, J., Kurtz, S., & Draper, J. (2016). *Skills for communicating with patients*. crc press.