

# Palliative Care Planning Meeting Agenda

Date: [Insert Date]

Time: [Insert Time]

Location: [Insert Location]

## Agenda Items:

1. Welcome and Introductions
2. Review of Patient's Current Status
3. Discussion of Goals of Care
4. Advance Care Planning
5. Family and Caregiver Support
6. Next Steps and Action Items
7. Q&A Session
8. Closing Remarks

## Participants:

- [Name/Title]
- [Name/Title]
- [Name/Title]

For any questions or additional topics you wish to discuss, please contact [Organizer's Contact Information].