

Discussion Points for Palliative Care Planning Meeting

Date: [Insert Date]

Time: [Insert Time]

Location: [Insert Location]

Attendees:

- [Name - Role]
- [Name - Role]
- [Name - Role]

Agenda:

- 1. Patient Overview**
 - Current health status
 - Patient's primary diagnosis
 - Recent changes in condition
- 2. Goals of Care**
 - Consideration of patient's wishes and preferences
 - Discussing potential treatment options
- 3. Symptom Management**
 - Identifying current symptoms
 - Reviewing existing management strategies
- 4. Support Services**
 - Available resources for the patient and family
 - Psychosocial support options
- 5. Follow-up Plan**
 - Next steps and responsibilities
 - Scheduling future meetings

Additional Notes:

[Any relevant information or reminders]

Contact Information:

[Your Name]

[Your Role]

[Your Contact Information]