MDT AGENDA

Date:

Venue:

HOUSE KEEPING

Attending:

1. **Apologies:**

2. Minutes:

MATTERS ARISING

3. Residents for follow-up discussion from previous meeting

Name. NHI		**Presenter:**	
Name, NHI		**Presenter:**	
Name, NHI		**Presenter:**	
Name, NHI		**Presenter:**	

NEW DISCUSSION

4. Residents for new MDT discussion

Name. NHI		**Presenter:**	
Name, NHI		**Presenter:**	
Name, NHI		**Presenter:**	

5. Hospital presentations

Name. NHI		**Presenter:**	
Name, NHI		**Presenter:**	
Name, NHI		**Presenter:**	

6. Deaths / discharges

Name. NHI		**Presenter:**	
Name, NHI		**Presenter:**	
Name, NHI		**Presenter:**	

OTHER

7. Other business

Item	
Item	