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| **Hospital Meeting Agenda** | | | |
| **Date:** | | **Time:** | |
| **Location:** | | **Meeting called by:** | |
| **Food Provided** | | **Facilitator** | |
| **Note taker** | |  | |
| **Attendees** | | | |
| **Please read** | | | |
| **Please bring** | | | |
| **Agenda Items** | | | |
| **TOPIC** | **PRESENTER** | | **TIME ALLOTTED** |
| **Welcome Staff** |  | |  |
| **Statement of goals and guidelines** |  | |  |
| **Celebrations, Anniversaries** |  | |  |
| **Housekeeping Items/safety updates** |  | |  |
| **Review from prior meeting** *(previous decisions, problems implementing, unresolved issues, status reports)* |  | |  |
| **Continuing Education Topics** |  | |  |
| **New Business** *(problems/concerns, new medical and office topics, upcoming events)* |  | |  |
| **Spotlight successes and rewards** |  | |  |
| **Topics for next meeting** |  | |  |
| **Adjourn** |  | |  |
| **Other Information** |  | |  |
| **Observers** |  | |  |
| **Resources** |  | |  |
| **Special notes** |  | |  |