

Amyloidosis MDT meeting agenda [template]

This agenda template is provided by Alnylam, developed with input from UK clinicians involved in and supporting multidisciplinary teams (MDTs) for amyloidosis.

Date:

Time:

Location / virtual link:

Chairperson:

MDT co-ordinator / secretary:

Meeting minutes:

1. Welcome and attendance

- Record attendees and apologies
- Confirm attendance requirement is met

2. New referrals

Each new referral to be presented with the following structured information:

Patient clinical summary

- Demographics (age, sex)
- Relevant medical and family history (cardiac, renal, neurological)
- Presenting symptoms and duration
- Key comorbidities and functional status

Diagnostic test summary

- Imaging: ECG, CMR and bone scintigraphy (DPD or equivalent)
- Laboratory investigations: serum free light chains (FLC), serum and urine electrophoresis (EP) with immunofixation

Working/probable diagnosis

- Subtype of amyloidosis if suspected

Specialist input or further investigations required

- Additional imaging, repeat biopsy, or organ-specific review
- Referral to Clinical Genetics if hATTR suspected or confirmed

3. Case presentations (active management)

- **Treatment planning:**
 - Proposed treatment options
 - Homecare consideration and logistics
 - Risk-benefit considerations
- **Treatment outcome updates:**
 - Response to therapy (haematologic/organ response criteria)
 - Tolerability and side effects

4. Follow-up cases

- **Onward referral outcome:**
 - Specialist referral (cardiology, nephrology, neurology, psychology)
- **Long-term follow-up outcome:**
 - Disease monitoring schedule (biomarkers, imaging, organ function)
 - Arrange annual review with repeat weight, FBC, UE and LFT at each visit
 - Supportive care needs
- **Family screening and support**
 - Family cascade genetic testing and results
 - Involve Clinical Genetics for counselling and surveillance

5. Diagnostic reviews

- Review challenging pathology, imaging, or genetic findings
- Cross-specialty input (radiology, pathology, cardiology, nephrology, haematology)

6. Research and clinical trials

- Updates on recruitment and eligibility for amyloidosis trials
- Presentation of ongoing or upcoming research projects

7. Operational items

- MDT process improvements and audit outcomes
- Training and education updates for MDT members

8. Summary of decisions & action points

- Agreed management plan for each patient
- Named clinician responsible for each action
- Timescale for follow-up actions
- Confirmation of next MDT meeting date

[Abbreviations]

ATTR, Transthyretin amyloidosis; hATTR, Hereditary (variant) transthyretin amyloidosis; CMR, Cardiac Magnetic Resonance imaging; DPD – 3,3-Diphosphono-1,2-propanodicarboxylic acid (bone scintigraphy tracer); ECG, Electrocardiogram; EP, Electrophoresis, FBC, Full Blood Count; FLC, Free Light Chains; LFT, Liver Function Test; MDT, Multidisciplinary Team; MRI, Magnetic Resonance Imaging.