

Medtronic

Eyebrow (optional)

# RR Planner Board

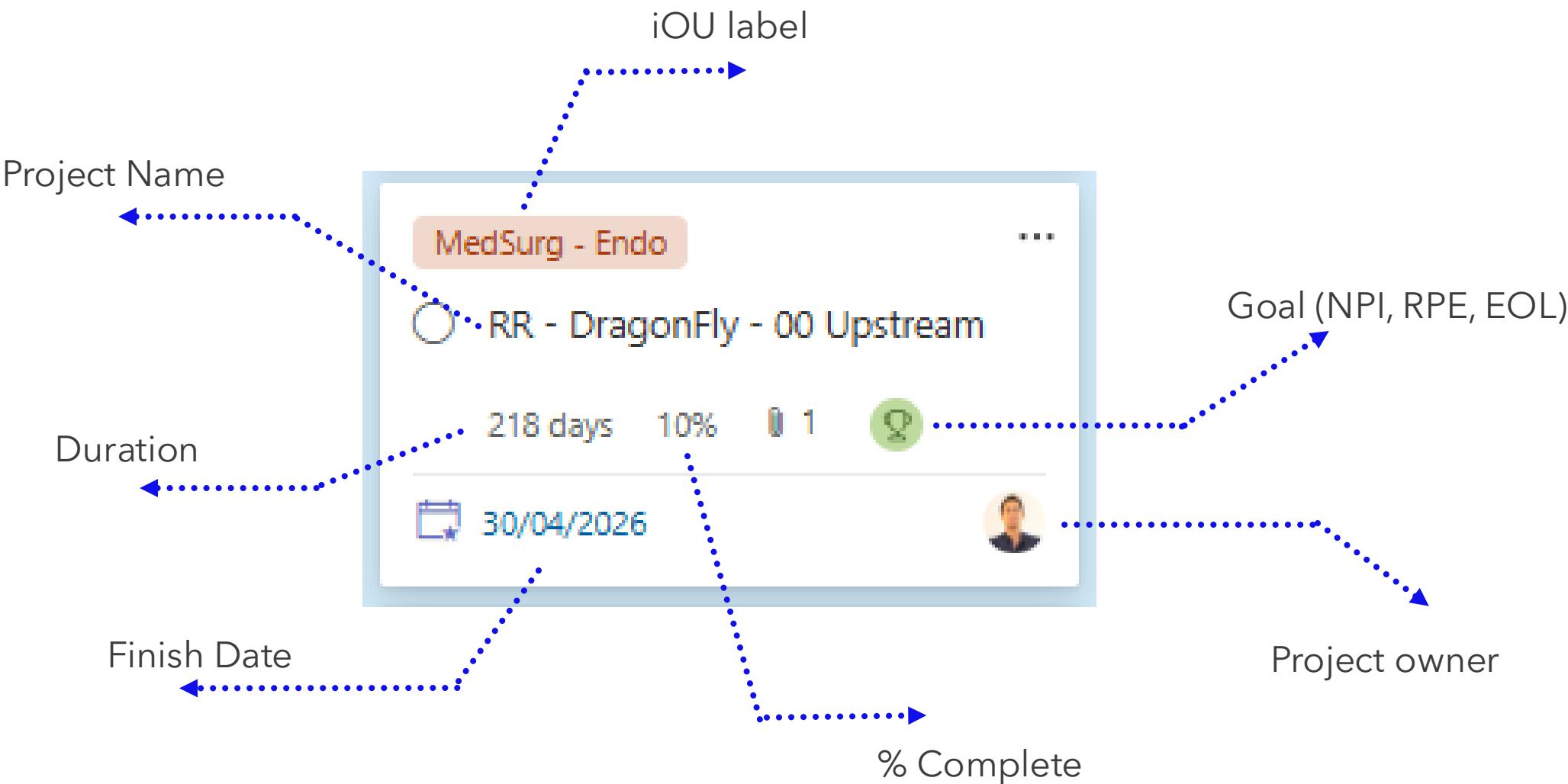
Subtitle (optional)

Month 20XX

First Last Name

# RR Project Card

Subtitle (optional)



## Other Fields:

- PMO-ID
- Launch date
- Region
- On-Track
- Escalations
- Risks & Issues
- Next Activity

# RR Projects Planner Board Flow

