

# Limited medical provider recommendation form for medical cannabis



## Medical provider information

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

DOPL license type:  MD  DO  APRN  PA  DPM

DOPL professional license number: \_\_\_\_\_ DEA number: \_\_\_\_\_

DOPL controlled substance number: \_\_\_\_\_ NPI number: \_\_\_\_\_

Clinic or practice name: \_\_\_\_\_

Clinic or practice email address: \_\_\_\_\_

Clinic or practice mailing address: \_\_\_\_\_

Clinic or practice telephone number: \_\_\_\_\_

## Patient information

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Age (Patient cannot be younger than age 21): \_\_\_\_\_ DOB: \_\_\_\_\_

Last 4 digits of SSN (If none, type N/A): \_\_\_\_\_ Telephone number: \_\_\_\_\_

Qualifying condition \_\_\_\_\_

(See qualifying conditions in Appendix B. Please only select 1 condition).

- If the qualifying condition is PTSD, mark here to certify that you have the required documentation as stated in Appendix B.
- If the qualifying condition is a rare condition, mark here to certify that you have reviewed the NIH website and confirmed that the patient's condition is listed.
- If the patient has a terminal illness, mark here to certify that the patient's life expectancy is less than 6 months.
- Mark here if you have dosing guidelines or directions for your patient. Otherwise, the medical cannabis pharmacist will provide dosing guidelines. (See dosing guidelines in Appendix A).

Medical cannabis cards are issued for 1 year. To issue the patient's medical card for less than 1 year, mark:

3 months or  6 months

*I certify that the information provided in this form is true and correct and that I have met at least once in person with the patient identified in the form.*

Medical provider signature: \_\_\_\_\_ Date: \_\_\_\_\_

Medical cannabis pharmacy use only	Verification: Verbal / Written	Initials:	Date:
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Patient full name: \_\_\_\_\_ DOB: \_\_\_\_\_

## Appendix A: Dosing guidelines

If no dosage form or total quantity is specified, the patient will be allowed all forms up to the state limit in consultation with a pharmacy at a medical cannabis pharmacy.

- Dosage form:
- All forms allowed
  - All forms allowed except: \_\_\_\_\_
  - Aerosol
  - Capsule
  - Concentrated oil
  - Gelatinous cube or lozenge
  - Liquid suspension
  - Resin
  - Sublingual preparation
  - Tablet
  - Topical preparation
  - Transdermal preparation
  - Unprocessed cannabis flower

Total dosage quantity for 30 days of treatment:  Up to state limit  
 Restrict quantity to \_\_\_\_\_ g/mg

Note: In any 28-day period, a patient may not purchase more than the smallest amount of these 3 options:

- An amount sufficient to provide 30 days of treatment based on the dosing parameters that the provider recommends.
- 113 grams by weight of unprocessed cannabis flower.
- 20 grams of total composite THC in all other medical cannabis dosage forms.

Relevant medical or medication history:

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## Appendix B: Qualifying conditions as written in Utah Code 26B-4-2

- Acute pain
  - Pain that is expected to last for 2 weeks or longer for an acute condition, including a surgical procedure, for which medical professionals may prescribe opioids for a limited time.
- Alzheimer’s disease
- Amyotrophic lateral sclerosis (ALS)
- Autism
- Cachexia
- Cancer
- Crohn’s disease or ulcerative colitis
- Epilepsy or debilitating seizures
- HIV or AIDS
- Hospice care
  - Any condition resulting in the patient receiving hospice care.
- MS or persistent and debilitating muscle spasms
- Nausea
  - Nausea that is persistent and not significantly responsive to traditional treatment, and is **not** related to pregnancy, cannabis-induced cyclical vomiting syndrome, or cannabinoid hyperemesis syndrome.
- Persistent pain
  - Pain that lasts longer than 2 weeks and is not adequately managed, in the provider’s opinion, despite treatment attempts using conventional medications other than opioids or opiates or physical interventions.
- Post-traumatic stress disorder (PTSD)
  - PTSD that is documented in the patient’s record and is being treated and monitored by a licensed mental health therapist and that has been diagnosed by a healthcare provider at the United States Veteran’s Administration (VA), or by a psychiatrist, masters-prepared psychologist, masters-prepared licensed clinical social worker (LCSW), a psychiatric APRN, or a PA with mental health training.
- Rare condition or disease
  - A rare condition or disease that affects less than 200,000 individuals in the United States, as defined in section 526 of the Federal Food, Drug, and Cosmetic Act, and is not adequately managed, in the provider’s opinion, despite treatment attempts using conventional medications other than opioids or opiates or physical interventions.
- Terminal illness
  - A terminal illness with a life expectancy of less than 6 months.