

# 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: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing address: \_\_\_\_\_

## Patient information:

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

Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Last 4 digits of SSN (if none, type N/A) \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Qualifying condition (Choose 1 condition from 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

**Attach a document with any relevant medical or medication history to this form.**

**Dosage form restrictions:** (complete this section to limit which products they can buy)

- No oral preparations - No syringes, oil, liquid suspensions, capsules, pills, gummies, lozenges, tinctures, oral sprays, confections or aerosols.
- No inhalation - No vape cartridges, waxes, or resins. Unprocessed flower is allowed.
- No edibles - No gummies, lozenges or confections.
- No vaping - No vape cartridges, vape pens, waxes or resins. Unprocessed flower is allowed.
- No topical or transdermal products - No balms, bath products, lotions, salves or patches.
- No Flower - No unprocessed flower, finished cannabis, or shake.
- No Suppositories - No suppositories.

**Allowable monthly purchase limit:** (Choose 1)

Up to state limit\*  Limit to: \_\_\_\_\_ g/mg

\*113 grams by weight of unprocessed cannabis flower and 20 grams of total composite THC in all other medical cannabis dosage forms.

## Medical provider acknowledgment:

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

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

Medical cannabis pharmacy use only	Verification: Written / Verbal	Initials:	Date:
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## Appendix A: Qualifying conditions as written in Utah Code 26B-4-203

- Acute pain
  - Pain that is expected to last for 2 weeks or less.
- 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
- MS or persistent and debilitating muscle spasms
- Nausea
  - Persistent nausea that isn't responsive to other treatments 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 isn't managed with conventional medications other than opioids or physical interventions.
- Post-traumatic stress disorder (PTSD)
  - PTSD diagnosed by a healthcare provider at the United States Veterans Administration (VA), psychiatrist, psychologist, licensed clinical social worker (LCSW), psychiatric APRN, or a PA with mental health training; and that is documented in the patient's medical record and is being treated and monitored by a licensed mental health therapist.
- Rare condition or disease
  - A rare condition or disease that affects less than 200,000 individuals in the United States, and is not adequately managed using conventional medications other than opioids or physical interventions.
- Terminal illness
  - A terminal illness with a life expectancy of less than 6 months.
- Other condition
  - A condition that the Compassionate Use Board (CUB) approves.