



ANNUAL UPDATE ON MEDICAL MARIJUANA PUBLIC EDUCATION CAMPAIGN

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**Celeste Philip, MD, MPH
State Surgeon General and Secretary**

Rick Scott, Governor

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I. Introduction – Legislative Direction

During Special Legislative Session held in June 2017, Senate Bill 8A was passed and subsequently signed by Governor Rick Scott on June 23, 2017. Senate Bill 8A amended section 381.986, Florida Statutes (F.S.), and includes provisions directing the Florida Department of Health (department) to develop a statewide public service education campaign to inform and educate Floridians on newly established medical marijuana laws and the importance of responsible use.

There are specific objectives established in statute including publicizing accurate information regarding the legal requirements for licit use and possession; the safe use of medical marijuana and preventing access by those other than the qualified patient, particularly children; and the short-term and long-term effects of medical marijuana use, particularly on minors and young adults.

Section 381.986 F.S. also directs the department to contract with an independent entity to conduct annual evaluations of the campaign. Per statute, during year one of the program, the evaluator shall conduct surveys to establish baseline data on youth and adult cannabis use, the attitudes of youth and the general public toward cannabis and marijuana, and any other data deemed necessary for long-term analysis.

II. Research / Florida Survey Research Center

As directed by the Legislature, the department has contracted with an independent entity to conduct surveys to establish baseline data. In July, the department established an interagency agreement with the Florida Survey Research Center (FSRC), housed within the University of Florida, to conduct this research.

Per the agreement the FSRC began work on August 30, 2017 to develop a survey instrument to be sent to a randomized sample in each of the five regions established in section 381.986, F.S.:

Northwest Region consists of Bay, Calhoun, Escambia, Franklin, Gadsden, Gulf, Holmes, Jackson, Jefferson, Leon, Liberty, Madison, Okaloosa, Santa Rosa, Taylor, Wakulla, Walton, and Washington Counties.

Northeast Region consists of Alachua, Baker, Bradford, Clay, Columbia, Dixie, Duval, Flagler, Gilchrist, Hamilton, Lafayette, Levy, Marion, Nassau, Putnam, St. Johns, Suwannee, and Union Counties.

Central Region consists of Brevard, Citrus, Hardee, Hernando, Indian River, Lake, Orange, Osceola, Pasco, Pinellas, Polk, Seminole, St. Lucie, Sumter, and Volusia Counties.

Southwest Region consists of Charlotte, Collier, DeSoto, Glades, Hendry, Highlands, Hillsborough, Lee, Manatee, Okeechobee, and Sarasota Counties.

Southeast Region consists of Broward, Miami-Dade, Martin, Monroe, and Palm Beach Counties.

FSRC will obtain 400 completed responses from each of the five regions for a total of 2,000 survey completions statewide. The survey is being mailed, however, respondents have the option to complete online. FRSC developed the survey with input from the department as well as utilizing national surveys as a framework. The survey instrument was approved by the Institutional Review Board (IRB) at the University of Florida.

As of January 16, 2018, 2,000 surveys have been distributed with 206 completed and returned. An additional 2,000 surveys will be distributed in the coming weeks. FSRC will then compile all data and analyze for trends from both a regional and statewide perspective. A final report on the baseline data will be available this spring. The department will determine message strategy based on the information gleaned from the research. A copy of the survey instrument is included in Appendix A.

III. Background Review

In addition to the baseline knowledge research the department is ascertaining through the survey instrument, the department has also conducted a review of existing medical marijuana education campaigns in other states.

Educational materials were reviewed from over a dozen states with existing medical and recreational marijuana laws. Analysis included the market type, size, and an overview of the states' marijuana laws including details pertaining to ID cards, age limits and reciprocity policies. During the review, department staff analyzed the branding, creative design, tone and messaging used to connect with target audiences regarding various topics associated with marijuana.

The background state reviews, coupled with survey data, will assist the department in creating a comprehensive medical marijuana educational campaign to reach target audiences with timely and effective information. Examples of collateral materials the department found appropriate and potentially adaptable to Florida are included in Appendix B.

IV. Preliminary Outreach Efforts

In order to ensure the department is optimizing the appropriation for this important public health education campaign, the bulk of our marketing will not be available until the research is complete. It is important to the department that the right messages are identified and positioned in the right places, in the most effective way.

However, while research is ongoing, there are certain outreach activities that the department has begun that tackle the more straightforward components of our objectives—primarily, how to legally obtain medical marijuana as a patient and how to legally order medical marijuana as a physician.

Our key message for this stage of the campaign has been to “know the facts.” At this stage, the department is working to establish itself as the trusted resource to patients and families – as the go to for accurate, easily accessible, easily understood and up-to-date information to guide them. Credibility is the foundation of every public health education campaign.

The department has used the agency Facebook and Twitter accounts to share messaging. Examples of social media messages are included in Appendix C. The department has also created a one-pager and visual story that walks patients through the process of obtaining medical marijuana. The one pager is included in Appendix D and the visual story is available at <http://www.floridahealth.gov/programs-and-services/office-of-medical-marijuana-use/know-the-facts/index.html>.

Recognizing that a key stakeholder in a successful medical marijuana regulatory framework is physicians, the department has created a website specifically for this audience. By visiting www.flhealthsource.gov/ommu, physicians can quickly access the most pertinent information including CE requirements, frequently asked questions, and other resources.

The department continues to make updates to the department’s Office of Medical Marijuana Use (OMMU) site, www.flhealth.gov/ommu, as new information becomes available such as new dispensing locations and updates to the different stages of the regulation and rulemaking process. A key component in our marketing plan moving forward is to create a stand-alone website that serves as a one-stop-shop for medical marijuana in Florida. This will make finding information easier for all interested stakeholders and is in line with the approach other states have taken.

Based on feedback from the Florida Legislature during Committee Weeks ahead of the 2018 session, the department increased the frequency of our bi-weekly medical marijuana use updates. Our OMMU Update now goes out each Friday and contains metrics on patient counts, ID card application timeframes, approved Medical Marijuana Treatment Center locations and the number of qualified ordering physicians. The update also includes the status on pending litigation as well as key implementation updates. A recent update is included in Appendix E.

V. Marketing Plan

While the department awaits survey results, we have put together a preliminary marketing strategy in order to budget the \$500,000 appropriated by the Legislature. Even without seeing the survey results, the department recognizes there are a few key audiences we need to reach from a safety perspective including pregnant and nursing mothers, parents, and youth-serving professionals, such as teachers or faith-based leaders.

The department has identified potential marketing strategies and the necessary collateral as well as potential statewide partners. As soon as the baseline research is available, the department will procure a brand guide and website. While we are currently hosting the OMMU site on the department website, it is critical that there be a one-stop-shop thoughtfully constructed to be a resource for the many audiences.

Recognizing the wide variety of residents we need to reach, we are planning to utilize a variety of communication mechanisms including social media, digital media, billboards, radio, health care provider and parenting magazines, and printed patient and provider guides. Each of these tools will drive traffic back to the website, which will function as “home base.” Based on our draft spending plan, we anticipate achieving more than 115 million impressions with a cost per thousand impressions (CPM) of less than \$5. The department’s draft spending plan is included in Appendix F.

VI. Year 2 Reporting

The next reporting year will include a comprehensive look at our public education strategy. The department intends to continue with the established relationship with FSRC to conduct follow up research on changes in behavior and perception following the roll out of multifaceted educational materials. As mentioned, the department intends on working with a third party to establish the standalone website. As part of that outsourcing, the department will require testing and performance metrics that will include market-based surveying or focus groups. Based on

what data show in the follow up FSRC survey, the department is committed to adjusting education strategy to close knowledge gaps identified.

The Florida Department of Health and researchers at the University of Florida are interested in learning more about Floridians' knowledge of and opinions about marijuana use. Your opinions are important to us and will help us better understand a significant topic facing our state. Please be assured that all responses are confidential – no identifying information will be associated with your survey responses.

We appreciate your time and participation. Please complete this survey by marking the appropriate response or filling in a response in the space provided.

Knowledge & Opinions on Marijuana Use

First, we have some questions about your knowledge of and opinions about marijuana use.

1. Do you think adults should be allowed to legally use marijuana for medical purposes if their doctor orders it, or do you think that marijuana should be illegal even for medical purposes?

<input type="radio"/>	Allow medical use
<input type="radio"/>	Illegal even for medical purposes
<input type="radio"/>	Not sure / Prefer not to answer

2. Do you think adults should be allowed to legally use marijuana for recreational purposes, or do you think that recreational marijuana use should remain illegal?

<input type="radio"/>	Allow recreational use
<input type="radio"/>	Illegal for all purposes
<input type="radio"/>	Not sure / Prefer not to answer

3. To the best of your knowledge, which of the following is/are legal in the state of Florida? [Please mark ALL that apply.]

<input type="radio"/>	Low-THC cannabis, ordered by a licensed doctor for approved medical conditions
<input type="radio"/>	Medical marijuana, ordered by a licensed doctor for approved medical conditions
<input type="radio"/>	Recreational marijuana, for adults age 21 and older
<input type="radio"/>	None of the above
<input type="radio"/>	Not sure / Prefer not to answer

4. Do you think that allowing medical marijuana makes it easier for people to get marijuana even if they don't have a real medical need, or does it make no difference?

<input type="radio"/>	Yes, makes it easier
<input type="radio"/>	No, does not make a difference
<input type="radio"/>	Not sure / Prefer not to answer

5. Some states have decided to allow medical and/or recreational marijuana use, but it is still prohibited under federal law. Do you think the federal government should or should not enforce federal marijuana laws in these states?

<input type="radio"/>	Should
<input type="radio"/>	Should not
<input type="radio"/>	Not sure / Prefer not to answer

6. Knowing that some states have decided to allow legal medical and/or recreational marijuana use, would it bother you if:

	Yes	No	Depends	Not sure
A. A business selling marijuana opened in your neighborhood	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
B. People used marijuana in public	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
C. People used marijuana in their own homes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. To the best of your knowledge, does marijuana use have any short- or long-term health impacts?

<input type="radio"/> Yes
<input type="radio"/> No
<input type="radio"/> Not sure / Prefer not answer

8. To the best of your knowledge, does marijuana use pose any unique risks to children or teens?

<input type="radio"/> Yes
<input type="radio"/> No → Go to Question 9
<input type="radio"/> Not sure / Prefer not answer → Go to Question 9

IF YES: Which of the following risk(s) do you think marijuana use by children or teens poses?
[Please mark ALL that apply.]

<input type="radio"/> Difficulty thinking & problem solving	<input type="radio"/> Decline in school performance
<input type="radio"/> Problems with memory & learning	<input type="radio"/> Increased risk of mental health issues
<input type="radio"/> Impaired coordination	<input type="radio"/> Impaired driving
<input type="radio"/> Difficulty maintaining attention	<input type="radio"/> Potential for addiction
<input type="radio"/> Other (please describe):	
<input type="radio"/> Not sure	<input type="radio"/> Prefer not to answer

9. To the best of your knowledge, does marijuana use pose any unique risks to women who are pregnant or nursing?

<input type="radio"/> Yes
<input type="radio"/> No → Go to Question 10
<input type="radio"/> Not sure / Prefer not answer → Go to Question 10

IF YES: Which of the following risk(s) do you think marijuana use by women who are pregnant or nursing poses? [Please mark ALL that apply.]

<input type="radio"/> Low birth weight	<input type="radio"/> Developmental problems
<input type="radio"/> Future problems with learning	<input type="radio"/> Problems related to smoke inhalation
<input type="radio"/> Other (please describe):	
<input type="radio"/> Not sure	<input type="radio"/> Prefer not to answer

10. In your opinion, how much of a problem, if any, is children accidentally ingesting marijuana? Would you say it's not a problem at all, rarely a problem, occasionally a problem, or frequently a problem?

<input type="radio"/> Not a problem
<input type="radio"/> Rarely a problem
<input type="radio"/> Occasionally a problem
<input type="radio"/> Frequently a problem
<input type="radio"/> Not sure / Prefer not answer

11. Do you think that allowing medical marijuana makes it more likely that children will accidentally swallow marijuana, or does it make no difference?

<input type="radio"/>	Yes, makes it more likely
<input type="radio"/>	No, does not make a difference
<input type="radio"/>	Not sure / Prefer not answer

Marijuana in Florida

Next, we have some specific questions about marijuana use in the state of Florida.

12. How knowledgeable would you say you are about laws related to marijuana use in Florida? Would you say you're very knowledgeable, somewhat knowledgeable, or not at all knowledgeable?

<input type="radio"/>	Very knowledgeable
<input type="radio"/>	Somewhat knowledgeable
<input type="radio"/>	Not at all knowledgeable
<input type="radio"/>	Not sure / Prefer not answer

13. From which of the following sources have you seen, heard, or read about laws related to marijuana use in Florida? [Please mark ALL that apply.]

<input type="radio"/>	Local newspaper	<input type="radio"/>	State of Florida website(s)
<input type="radio"/>	National newspaper	<input type="radio"/>	US government website(s)
<input type="radio"/>	Local TV news	<input type="radio"/>	Other website(s)
<input type="radio"/>	National/Cable TV news	<input type="radio"/>	Facebook, twitter, other social media
<input type="radio"/>	Friends/family members	<input type="radio"/>	On-line news sites or blogs
<input type="radio"/>	Other (please describe):		
<input type="radio"/>	Not sure	<input type="radio"/>	Prefer not to answer

14. To the best of your knowledge, which of the following are allowed under the Florida State Legislature Medical Use of Marijuana Act (Senate Bill 8A)? [Please mark ALL that apply.]

<input type="radio"/>	Smoking medical marijuana	<input type="radio"/>	Growing medical marijuana at home
<input type="radio"/>	Eating edible forms of medical marijuana	<input type="radio"/>	An unlimited number of retail dispensaries
<input type="radio"/>	Vaping medical marijuana	<input type="radio"/>	Any licensed physician can order
<input type="radio"/>	Only terminal conditions qualify	<input type="radio"/>	Any pharmacy can dispense
<input type="radio"/>	Physician orders allow unlimited refills	<input type="radio"/>	None of these are legal in Florida
<input type="radio"/>	Other (please describe):		
<input type="radio"/>	Not sure	<input type="radio"/>	Prefer not to answer

15. To the best of your knowledge, which of the following are required for a patient to legally obtain and possess medical marijuana in Florida? [Please mark ALL that apply.]

<input type="radio"/>	An ID Card
<input type="radio"/>	An order from a qualifying physician
<input type="radio"/>	A qualifying medical condition
<input type="radio"/>	Entry on the state registry
<input type="radio"/>	Not sure
<input type="radio"/>	Prefer not answer



16. Keeping in mind that all of your answers in the survey are confidential, have you, yourself, ever used marijuana?

<input type="radio"/>	Yes
<input type="radio"/>	No
<input type="radio"/>	Not sure / Prefer not answer

Demographics

Finally, please answer a few background questions so we know that we've heard from all kinds of people in Florida.

17. What is your gender? ☐ Female ☐ Male ☐ Prefer not to say

18. In what month and year were you born? Month: Year:

19. Including yourself, how many people currently live in your household?

20. And, how many of these people in your household are under the age of 18?

21. What is the highest level of education you have completed?

<input type="radio"/>	Less than 12 th grade
<input type="radio"/>	High school graduate (includes GED)
<input type="radio"/>	Some college, no degree
<input type="radio"/>	2-year college degree (Associate, Technical, etc.)
<input type="radio"/>	4-year college degree (Bachelor's)
<input type="radio"/>	Graduate or professional degree (Master's, Ph.D., M.B.A, etc.)
<input type="radio"/>	Prefer not to say

22. Do you consider yourself ...? [Please select ALL that apply.]

<input type="radio"/>	American Indian or Alaska Native
<input type="radio"/>	Asian
<input type="radio"/>	Black or African American
<input type="radio"/>	Native Hawaiian or Other Pacific Islander
<input type="radio"/>	White
<input type="radio"/>	Spanish / Hispanic / Latino
<input type="radio"/>	Other (please specify):
<input type="radio"/>	Prefer not to say

23. What is your 5-digit zip code? ☐ Prefer not to say

Thank you for completing this survey. Please seal your survey in the enclosed postage-paid return envelope and send it to us at your earliest convenience. We appreciate your time and participation!

MARIJUANA IN COLORADO

Be educated. Be responsible.

.....

Who can buy, have or use it?

- ▲ You must be 21 to purchase, possess or use retail marijuana or marijuana products. It's illegal to give or sell retail marijuana to minors.
- ▲ Colorado residents 21 years and older can purchase as much as 1 ounce of retail marijuana at a time. Non-residents can purchase up to 1 ounce.
- ▲ Adults 21 years and older can purchase, possess, grow and transport as many as 6 marijuana plants in an enclosed and locked space, as long as it is not sold to anyone else. Only 3 of the plants can be mature (flowering) at any one time. If the home has residents under the age of 21, the grow area must be enclosed and locked in a separate space that minors cannot access.

If you use, where can you?

- ▲ Marijuana use is legal within the confines of private property. Just keep in mind that property owners can ban the use and possession of marijuana on their properties. Renters should be aware of their property owners' rules.
- ▲ Consuming marijuana is banned in public areas. This includes: amusement, sporting and music venues, as well as

parks, playgrounds, sidewalks, roads, and on federal land—including ski slopes.

- ▲ Always be aware of the property owners' rules.
- ▲ It's illegal to possess marijuana in a passenger area of a vehicle if it is in an open container with broken seals, with some of the contents removed, and if there is evidence of consumption.
- ▲ It's illegal to leave Colorado with any marijuana products. Additionally, Denver International Airport has banned the possession, use, display and/or giving of marijuana products on its property.

Additional laws and guidelines:

- ▲ It's illegal to drive while impaired by marijuana. You can be charged with a DUI if found with more than 5 nanograms of THC in your blood. If you've recently used marijuana, it's best not to drive at all.
- ▲ Use caution with Marijuana-infused products and pay attention to the total number of milligrams in your product. If you aren't sure how marijuana will affect you, ingest less than one serving, and wait at least four hours before eating/drinking more.
- ▲ Despite legalization, employers can still test for marijuana and make employment decisions based on drug test results. Know your workplace policies before you use.



GOOD *to* KNOW

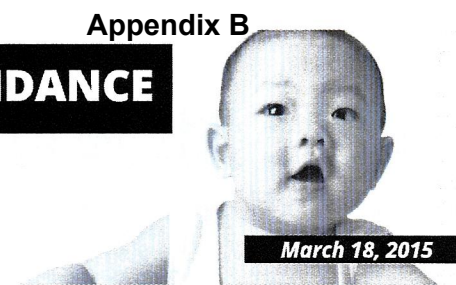
GoodToKnowColorado.com



COLORADO
Department of Public
Health & Environment

MARIJUANA PREGNANCY AND BREASTFEEDING GUIDANCE

FOR COLORADO HEALTH CARE PROVIDERS



SCREENING QUESTIONS

In addition to asking about alcohol, tobacco, and other drug use (including prescription drugs), now that marijuana is legal in Colorado, we recommend asking all teens and women who could become pregnant about marijuana use.

1. Have you used marijuana in the last year?

If no: Go to question 2

If yes: *When was the last time you used marijuana? How do you use marijuana? What form of marijuana do you use? How often do you use and how much?*

If pregnant: *How has your use of marijuana changed since finding out you are pregnant?*

If concerned about substance abuse:

Use the Cannabis Use Disorder Identification Test (CUDIT) and referral recommendations found in the resources section.

2. Does anyone use marijuana in your home?

If yes or no: *It is important to ensure that your home is safe for your child. Make sure that any potentially harmful substances are out of reach of your child, including marijuana, alcohol, prescription drugs or household substances.*

If yes: Provide additional education on avoidance of secondhand smoke and safe storage, more information below.

TIPS FOR USING THIS GUIDANCE:

All information in italics scripted talking points to share with your patients, written at about a middle school reading level.

PRENATAL VISITS

It is important to reassess substance use at each visit, because many women continue using substances throughout the pregnancy or may begin or resume using substances during pregnancy.

Discuss importance of cessation of marijuana and other potentially harmful substances during pregnancy and breastfeeding and offer support if needed, found in the resource section.

Discuss patient's plan for marijuana use after pregnancy. *Tell me about whether you intend to use marijuana after delivering your baby.*

Discuss breastfeeding and marijuana: *Are you planning to breastfeed your child?* If yes, see breastfeeding section for more information.

Please inform your patient: *Marijuana is now legal for adults over 21. But this doesn't mean it is safe for pregnant moms or babies. Some hospitals test babies after birth for drugs. If your baby tests positive for THC at birth, Colorado law says child protective services must be notified.*

As a prenatal care provider, if you are concerned about a patient's substance use, you can recommend testing of mother during prenatal care and/or at delivery or testing of the newborn at birth.

Newborn testing information:

- Meconium testing generally identifies maternal marijuana use after 24 weeks gestation.
- Urine testing generally identifies maternal marijuana use after 32 weeks gestation.
- Umbilical cord testing generally identifies maternal marijuana use after 24 weeks gestation.

WELL WOMAN VISITS:

Discuss contraception options if patient wants to continue recreational or medical marijuana, alcohol or other substance use and/or does not desire pregnancy.

If patient desires a pregnancy, discuss importance of cessation of marijuana and other potentially harmful substances. Consider use of contraception while the patient is working towards cessation of substances.

AT DELIVERY:

- Use marijuana screening questions at delivery.
- Be aware of your facility's guidelines regarding drug testing of mothers and newborns and issues of consent.
- Urine drugs screens (maternal or newborn) can be falsely positive. A positive test in the absence of reported maternal drug use should be confirmed by gas chromatography/mass spectrometry (GC/MS) or liquid chromatography/mass spectrometry (LC/MS/MS).
- Alternative newborn testing includes meconium or umbilical cord sampling.
- Discuss risks regarding marijuana use after pregnancy and/or during breastfeeding with your patient.

TALKING TO YOUR PATIENTS:

ABOUT MARIJUANA:

Can you tell me about why you are using marijuana? How does marijuana help you?

If using marijuana to treat a medical issue: **Talk to your prenatal health care provider about the use of other treatments for medical issues during pregnancy.**

If patient is using for nausea, anxiety or sleep: **There are other options that are safe ways to deal with these issues during pregnancy.**

Address potential alternative treatments, if appropriate, and talk about transitioning to alternative treatments or cessation. **Do you want to stop using marijuana? How difficult do you think it will be to stop using marijuana? Do you think you can stop? If you need help, assistance is available.**

Health care providers can use the HealthTeamWorks' Screening, Brief Intervention, Referral to Treatment tool found at healthteamworks.org/guidelines/sbirt.html or provide the patient with additional referrals from the resources section. **For your health and your baby's health, I will ask you about this at your next visit/appointment.**

ABOUT MEDICAL MARIJUANA:

The decision to continue medical marijuana use (as with any medication) during pregnancy and/or breastfeeding is based on whether the benefits of the treatment outweigh the potential risks to the baby. That is something we should discuss (or you can discuss further with your prenatal health care provider).

Providers: Discuss risks/benefits of marijuana use and potential alternatives, as appropriate.

TALKING TO YOUR PATIENTS: EFFECTS OF MARIJUANA

Language for patients: There is no known safe amount of marijuana use during pregnancy.

Tetrahydrocannabinol (THC) can pass from the mother to the unborn child through the placenta. The unborn child is exposed to THC used by the mother.

Language for patients: THC is the chemical in marijuana that makes you feel "high." Using marijuana while you are pregnant passes THC to your baby.

Use of marijuana during pregnancy is associated with negative effects on exposed children, no matter when it is used during pregnancy. The negative effects include decreased academic ability, cognitive function and attention. These effects may not appear until adolescence.

Language for patients: Using marijuana while pregnant may harm your baby. It may make it hard for your child to pay attention and learn. This also may make it harder for your child to do well in school.

Smoking marijuana has the added risk to the mother and baby of harmful smoke exposure. However, using marijuana in edible or vaporized form still exposes the baby to THC. There is no known safe amount of marijuana use in pregnancy. The safety of vaporizing marijuana (or tobacco) is unknown.

Language for patients: Some people think that using a vape pen or eating marijuana is safer than smoking marijuana. But marijuana in any form may be harmful. THC in marijuana may be bad for your baby.

TALKING TO YOUR PATIENTS: MYTHS ABOUT MARIJUANA

Myth: Marijuana is safe to use while pregnant or breastfeeding. You cannot eat or use some foods and medicines while pregnant or breastfeeding. This is because they might harm the baby. This includes marijuana.

Myth: Since it is legal, it must be safe. Using marijuana during pregnancy can harm your baby, just like alcohol or tobacco. Being legal does not make it safe.

Myth: Since marijuana is natural, it must be safe. Not all natural substances or plants are safe. Tobacco and poisonous berries are

great examples. Marijuana contains THC, which may harm a baby.

Myth: Since some people use marijuana as a medicine, it must be safe. Marijuana can be recommended by a doctor in special cases. A doctor decides whether the benefits are greater than the risks. It is unsafe to use any medicines while pregnant or breastfeeding that are not recommended by a health care provider. This includes marijuana. Talk to your health care provider about safer choices that do not risk harming your baby.

Myth: Marijuana can be good for your baby.

Some researchers found that marijuana may be bad for children whose moms used marijuana during pregnancy. Some children did not do well in school when they were older. It may also make it hard for your child to pay attention and learn.

Myth: Marijuana-like (cannabinoid) chemicals occur in the body, so it must be safe. Some cannabinoids, called endocannabinoids, occur naturally in the body and in breast milk. These endocannabinoids help

your nerve cells communicate better. However, THC from marijuana is much stronger than your natural endocannabinoids. THC can upset the natural endocannabinoid system in your body. Pregnant and breastfeeding mothers should not use marijuana to avoid any risks of THC.

Myth: Marijuana is a safe treatment for nausea during pregnancy. THC in marijuana may harm your baby. Talk to your health care provider about safer choices that do not risk harming your baby.

MANDATORY REPORTERS:

Marijuana is legal for those over age 21, just like alcohol, but it is important to make sure patients with children are aware of responsible use of marijuana and other legal substances.

If you as a health care provider have a suspicion of abuse or neglect (i.e. that the health or welfare of a child is threatened), it is your duty as a mandatory reporter to report child abuse or neglect. You can access the mandatory reporter training at coloradocwts.com/community-training.

Colorado Child Abuse and Neglect Hotline: 1-844-CO-4-KIDS.

In Colorado, reports about child abuse or neglect are handled at the county level. Procedures can be different from county to county. If you have questions about how your county social services department addresses these reports, please contact them directly.

TALKING TO YOUR PATIENTS: LAWS

If pregnant women report their substance use to their prenatal health care provider and/or have a positive drug test during a prenatal care visit, Colorado law prevents that information from being used in criminal prosecution. (C.R.S. § 13-25-136)

Tetrahydrocannabinol (THC), both recreational and medical, is considered a Schedule 1 drug under federal and Colorado law. (C.R.S. § 18-18-203)

Current Colorado law defines a baby testing positive at birth for a Schedule I substance (including recreational or medical THC or other drugs) as an instance of child neglect, which requires a report to social services. (C.R.S. § 19-3-102)

Please inform your patient: *Marijuana is now legal for adults over 21. But this doesn't mean it is safe for pregnant moms or babies. Some hospitals test babies after birth for drugs. If your baby tests positive for THC at birth, Colorado law says child protective services must be notified.*

POSTPARTUM SCREENING

Please inform your patient:
Now that marijuana is legal for adult use (21 years and older) in Colorado, we are asking all parents about marijuana because we want to help keep your kids safe.

- *Before you knew you were pregnant how much marijuana did you use?*
- *How much marijuana did you use during your pregnancy?*
- *How much marijuana have you used since the birth of your child?*
- *Does anyone use marijuana in your home?*
- *Are you currently breastfeeding?*

BREASTFEEDING AND MARIJUANA

Marijuana use should be addressed in a discussion of breastfeeding plans, especially if the mother used prior to pregnancy or during pregnancy.

Language for patients: *Breastfeeding has many health benefits for both the baby and the mother.*

However, any THC consumed by the mother enters her breast milk and can be passed from the mother's milk to her baby, potentially affecting the baby.

Language for patients: *THC in marijuana gets into breast milk and may affect your baby.*

THC is stored in the body in fat, and babies have a high percentage of body fat, including in their developing brains. Because THC is stored in fat, it remains in the body for a long time.

Language for patients: *THC is stored in body fat. A baby's brain and body are made with a lot of fat. Since your baby's brain and body may store THC for a long time, you should not use marijuana while you are breastfeeding.*

Because of the potential risks to the baby, the American Academy of Pediatrics states that marijuana should not be used while breastfeeding.

If a mother wishes to breastfeed, use the referral options outlined in the resources section to help her stop using marijuana.

At this time, there is limited research on breastfeeding and marijuana use, including: the amount of THC in breast milk, the length of time THC remains in breast milk and effects on the infant.

It is unknown how long after any use of marijuana that it is safe to breastfeed or how long THC remains in breast milk after occasional marijuana use as compared to regular use.

We don't know how long it takes for THC to clear from the breast milk. Some mothers may be motivated to "pump and dump" their breast milk in order to maintain milk production while waiting for THC to be eliminated from breast milk.

Language for patients: *Because THC is stored in body fat, it stays in your body for a long time. This means that "pumping and dumping" your breast milk will not work the same way it does with alcohol. Alcohol is not stored in fat so it leaves the body faster.*

Some facilities test a mother's urine to determine drug use in order to inform breastfeeding advice. The link between THC levels in maternal urine and breast milk is unknown.

PARENTING AND MARIJUANA

Marijuana use can affect a person's ability to care for a baby. It is appropriate to ask about marijuana or other substance use before letting a person care for a baby.

Language for patients: *Being high while caring for a baby is not safe. Do not let anyone who is high take care of your baby. It is not safe for your baby to sleep with you, especially if you are high.*

Language for patients: *Be sure you know Colorado's marijuana laws if you choose to use. Go to GoodToKnowColorado.com.*

SECONDHAND SMOKE

Marijuana is included in the Colorado Clean Indoor Air Act, which requires indoor areas such as workplaces, restaurants, bars and hospitals and common areas of apartment buildings to be smoke-free. (C.R.S. § 25-14-204)

Language for patients: *Second-hand smoke from marijuana has many of the same cancer causing chemicals as smoke from tobacco. A smoke-free environment is safest and healthiest. Do not allow smoking in your home or around your baby.*

DRIVING AND MARIJUANA

Colorado law specifies that drivers with five nanograms/ml of active THC in their whole blood are considered to be driving under the influence (DUI). (C.R.S. § 42-4-1301(6)(a)(IV))

In Colorado, it is illegal to use marijuana in a vehicle, and the open container law applies to marijuana. (C.R.S. § 42-4-1305.5)

Language for patients: *It is not safe to drive a car while high. Do not let your baby ride in a car if the driver is high.*

ACCIDENTAL INGESTION

If a child accidentally ingests a marijuana product and is experiencing symptoms, call the poison control hotline for free, fast, expert help: 1-800-222-1222. If the symptoms are severe, call 911 or go to an emergency room.

Symptoms may include drowsiness, unsteady walking, difficulty sitting up or irregular breathing.

SAFE STORAGE

Language for patients: *Many edible marijuana products look similar to candy or baked goods that appeal to children.*

Language for patients: *All marijuana containing products and other potentially harmful substances should be kept in a locked area. Make sure your children cannot see or reach the locked area. Locked up is safest, but substances should be out of reach and out of sight of your child. Keep marijuana in the child-resistant packaging from the store.*

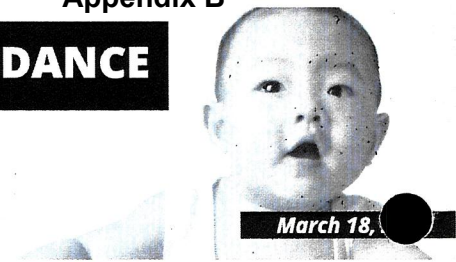
Language for patients: *Child-resistant packaging is designed to be effective for children under age 5 years of age. All marijuana-containing products purchased from a dispensary or store must leave the store in child-resistant packaging. Keep your marijuana-containing products in their original packaging.*

Language for patients: *If you have homemade products, ensure they are labeled or marked to distinguish them from similar products in the home and stored out of reach of children.*

Language for patients: *If there are children present in the home, Colorado law requires that any retail marijuana grow be located in a separate, enclosed and locked area. (C.R.S. §18-18-406(3)(b)). It is recommended that if children are present in the home of a medical marijuana grower, that the grow site be restricted to prevent access by a child.*

MARIJUANA PREGNANCY AND BREASTFEEDING GUIDANCE

FOR COLORADO HEALTH CARE PROVIDERS



FOR HEALTH CARE PROVIDERS

If Concerned about Substance Use Disorder:

SBIRT Colorado Screening, Brief Intervention, Referral to Treatment Guidance
improvinghealthcolorado.org/clinical-guidelines-healthcare-providers/

Cannabis Use Disorders Identification Test (CUDIT-R)
bpac.org.nz/BPJ/2010/June/docs/addiction_CUDIT-R.pdf

Referrals for Substance Use Treatment:

1-800-CHILDREN or 1-866-LAS FAMILIAS (Spanish Language)

linkingcare.org

Other Resources:

Retail Marijuana Public Health Advisory Committee; Monitoring Health Concerns Related to Marijuana in Colorado: 2014

colorado.gov/pacific/cdphe/retail-marijuana-public-health-advisory-committee

Colorado mandatory reporter training
coloradocwts.com/community-training

Colorado Child Abuse and Neglect Hotline: 1-844-CO-4-KIDS.

FOR PATIENTS/FAMILIES:

Colorado.gov/marijuana, which includes fact sheets for pregnant and breastfeeding moms and for parents of older children. The website also includes Spanish language information and links to Spanish language resources.

Goodtoknowcolorado.com

1-800-CHILDREN or 1-866-LAS FAMILIAS (Spanish Language)

REFERENCES:

Retail Marijuana Public Health Advisory Committee; Monitoring Health Concerns Related to Marijuana in Colorado: 2014

colorado.gov/pacific/cdphe/retail-marijuana-public-health-advisory-committee

American Academy of Pediatrics, Policy statement in Pediatrics 2012, Breastfeeding and the Use of Human Milk Pediatrics:

aappublications.org/content/129/3/e827.full.html

4. Check for allergens - medical cannabis-infused products may be produced in the same facility where common allergens such as tree nuts or peanuts are used.
5. Do not consume medical cannabis-infused products and alcohol together.
6. Do not drive or operate heavy machinery - edible marijuana products and some other infused products remain in your system for several hours longer than inhaled products, so you should not operate a vehicle for the rest of the day after consuming them.
7. Keep all medical-cannabis-infused products away from children and pets - store medical cannabis-infused products in a secure location. In case of accidental consumption by a child, call the Poison Center Hotline, 1-800-222-1222, immediately.
8. Label homemade medical cannabis-infused products.
9. Never offer medical cannabis-infused products to others.
10. Seek medical help if needed.

Medical Cannabis can make a person physically sick, especially in children. If you took too much medical cannabis or are experiencing an unwanted or unexpected reaction, call the Poison Center Hotline at 1-800-222-1222.



Information about medical cannabis-infused products is provided for informational purposes only and should not be used for diagnosing purposes or be substituted for medical advice.



Illinois Department of Public Health
Division of Medical Cannabis

Phone: 855-636-3688

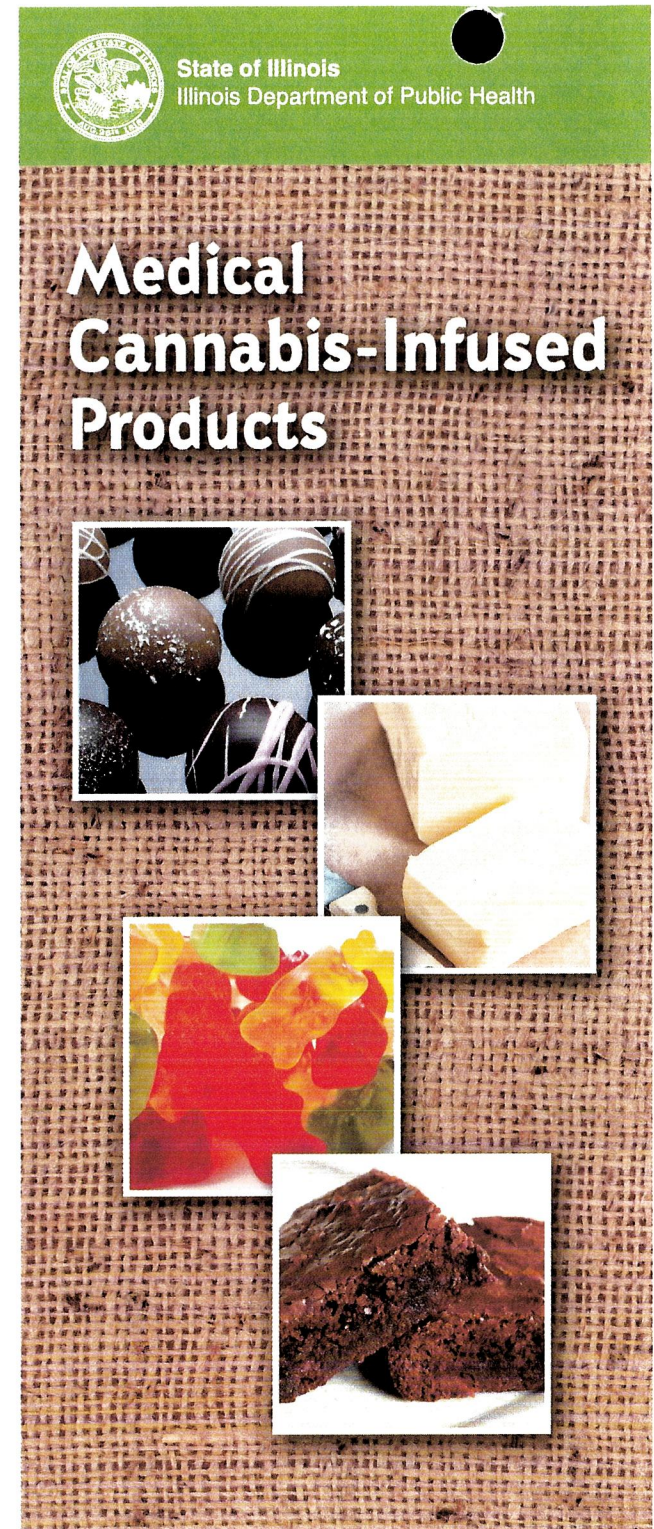
E-mail: dph.medicalcannabis@illinois.gov

Visit <http://dph.illinois.gov/topics-services/prevention-wellness/medical-cannabis>
for more information

Apply on-line
<https://medicalcannabispatients.illinois.gov/>

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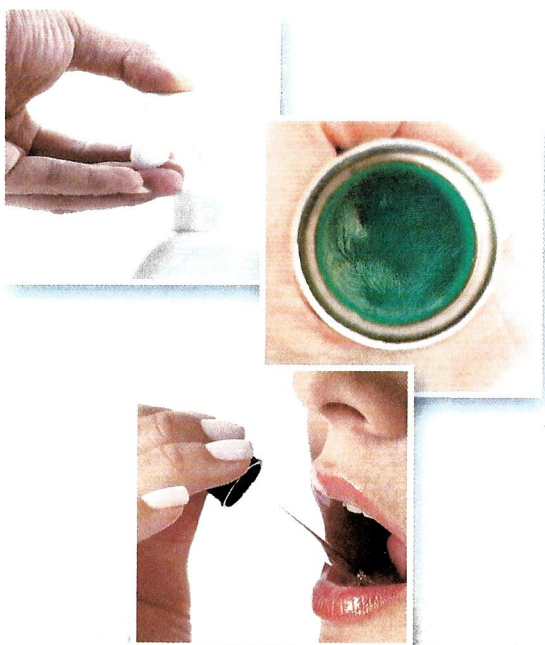
IOCI 16-629



What are medical cannabis-infused products?

These are products such as foods (or “edibles”) and tinctures that are infused with concentrated marijuana oils. Edibles are the most popular form of cannabis-infused products, and are also the most likely to result in over-consumption. Types of medical cannabis-infused products may include, but not limited to:

- edibles such as baked goods, candy or lozenges;
- teas and sodas;
- tinctures, tonics, and oils which are added to food, medicines, and liquids, or consumed directly in small drops or by placing drops under the tongue;
- topicals, which are applied directly onto the skin in the form of oils, balms, salves, lotions, sprays or ointments.



Pros

- Provide long-lasting relief
- Good alternative for people averse to inhaling
- Dosage may be more precise than with smoked products
- Topical cannabis does not produce a psychoactive effect

Cons

- Can take more time to be effective
- Dosage can vary widely depending on weight, metabolism, experience, and other factors
- Appealing to children and pets (and should be locked up to avoid accidents)
- Creates a different “high” than smoking which may be unfamiliar to patients

How will medical cannabis-infused products affect me?

The effects of medical cannabis-infused products are much different than smoking or vaporizing. Medical cannabis-infused products usually have a longer effect on the body and those effects vary from person to person and are dependent on the type and amount consumed, as well as the method in which they are consumed.

New users often experience different effects than more experienced users. Some medical cannabis patients feel no effect the first time they try it. Others — especially those who use too much their first time — may experience unpleasant feelings, such as an increased heart rate or a sense of paranoia.

What should I know before using medical cannabis-infused products?

Registered patients should use caution when using medical cannabis-infused products. It is much easier to over-consume and over-medicate with ingested products. It is important to understand there are two very significant differences between inhaling and ingesting medical cannabis:

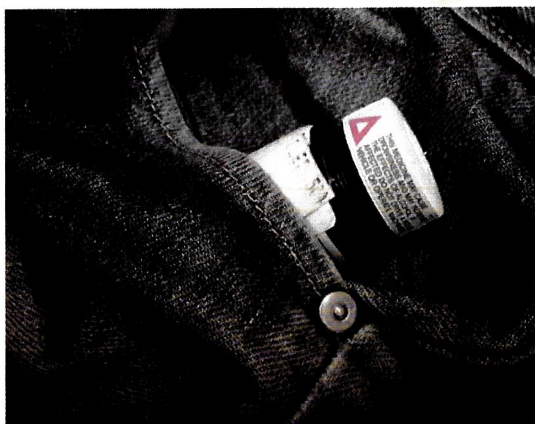
- Ingesting medical cannabis typically produces stronger and longer-lasting effects because of the way the body processes it.
- Inhaling medical cannabis results in an immediate effect, which peaks within 10 - 15 minutes, while ingesting medical cannabis can take up to two hours to take effect and can peak for a couple of hours after that.

If you choose to use medical cannabis-infused products

1. Do not eat raw cannabis - raw cannabis does not deliver therapeutic benefits and is not recommended.
2. Beware of the potency of cannabis-infused products. Start with a low dosage and go slowly. Always read the product packaging label. Some products, such as dense, rich brownies can take longer to digest, which means it will take longer to feel the effects. Products like infused drinks and tinctures are absorbed into the body much more quickly, so the effects will be felt much sooner.
3. Review the labeling of each medical cannabis-infused product.

KNOW THE FACTS

- "Pharm parties" are quickly becoming popular among adolescents. Prescription drugs are dumped in a bowl and taken by the handful, which results in dangerous drug interactions and overdoses.
- Every day, 2,500 youth 12- to 17-years of age abuse a prescription pain reliever for the first time.
- Among young adults 18- to 25-years of age, prescription drug abuse is second only to marijuana use.
- Prescription drug abuse causes the largest percentage of deaths from drug overdosing.
- Surveys show nearly half of teens believe prescription drugs are much safer than illegal street drugs. Sixty percent to 70 percent of teen prescription drug abusers say home medicine cabinets are their source.



Medicines recommended for disposal by flushing

www.fda.gov/Drugs/ResourcesForYou/Consumers/BuyingUsingMedicineSafely/EnsuringSafeUseofMedicine/SafeDisposalofMedicines/ucm186187.htm#Flushing_list

Prescription drug packages inserts

<http://dailymed.nlm.nih.gov/dailymed/about.cfm>

Information about the dangers of prescription drugs

www.talkaboutrx.org



Illinois Department of Public Health

Division of Medical Cannabis

535 W. Jefferson St.
Springfield, IL 62761

Toll-free: 855-636-3688

Phone: 217-785-4093

TTY: 800 547-0466

E-mail: DPH.MedicalCannabis@illinois.gov

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IOCI 15-164



State of Illinois
Illinois Department of Public Health

Mind Your Meds



BASIC MEDICATION SAFETY TIPS

SAFEGUARD YOUR MEDICATIONS

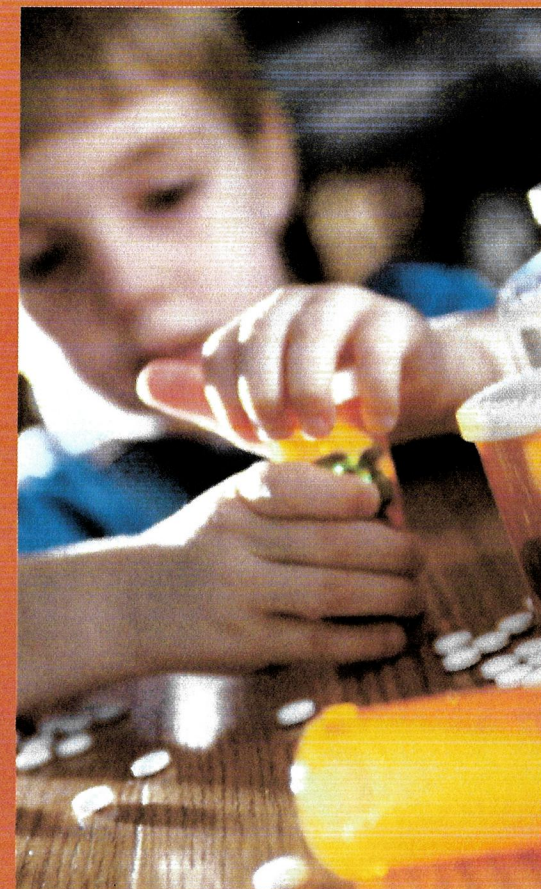
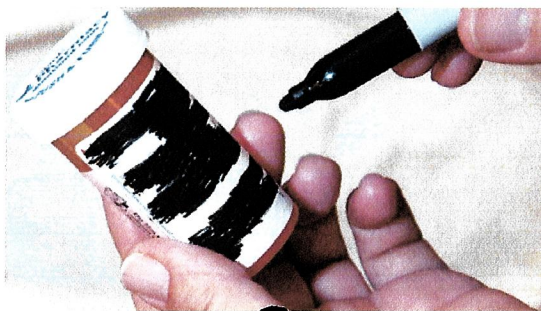
- **Store medications in a secure and dry place.** Do not leave medications in a visible place. Consider using a lock box or hiding them somewhere where they cannot be found.
- **Keep track of your medicine.** Count how many pills you have at any given time to check for missing medicine.
- **Don't share your medications under any circumstances.**
- **Keep a low profile.** Your medications are your business. Do not tell your friends about the medicines you take.



DISPOSE UNUSED MEDICATIONS

Medications play an important role in treating many conditions and diseases, but when they are no longer needed it's important to dispose of them properly to avoid harm to others. Here are ways to properly remove expired, unwanted or unused medicines from the home.

- **Medicine take-back programs.** Contact your city or county government's household trash and recycling service to see if there is a medicine take-back program.
- **Disposal in household trash.** Mix medicines (do not crush tablets or capsules) with an unpleasant substance, such as kitty litter or expired food, then place the mixture in a container, such as a sealed plastic bag, and throw it in your household trash.
- **Always remember to scratch out information on the prescription label** to make it unreadable.



Medications can be harmful and fatal when used by someone other than the person for whom the medicine was prescribed. To prevent accidental ingestion by children, pets or anyone else, some medications have specific disposal instructions to be flushed down the sink or toilet as soon as they are no longer needed, and when they cannot be disposed of through a medicine take-back program. For a detailed list of medicines that can be flushed, see the website information on the back of the brochure.

Where can I learn more?

Visit the NYSDOH website for more information on the Medical Marijuana Program in New York State.

If you have additional questions, please contact the Medical Marijuana Program at the NYSDOH:

Medical Marijuana Program
1-866-811-7957

Email:
mmp@health.ny.gov

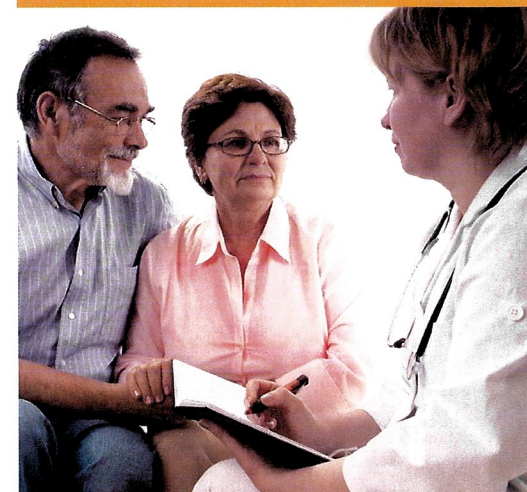
Website:
www.health.ny.gov/regulations/medical_marijuana/



Department
of Health

The New York State Medical Marijuana Program :

Patient Information



The Medical Marijuana Program in New York State ensures that medical marijuana is available for certified patients with certain serious conditions.

The program also ensures that approved medical marijuana products are manufactured and dispensed in a manner that protects public health and safety.

Who qualifies for medical marijuana treatment?

The law makes patients eligible to use medical marijuana if they have been diagnosed with a specific severe, debilitating or life-threatening condition accompanied by an associated or complicating condition, as follows:

- Cancer
- HIV/AIDS
- Amyotrophic lateral sclerosis (ALS)
- Parkinson's disease
- Multiple sclerosis
- Spinal cord nerve injury with intractable spasticity
- Epilepsy
- Inflammatory bowel disease
- Neuropathy
- Huntington's disease

The associated or complicating conditions are: cachexia or wasting syndrome, severe or chronic pain, severe nausea, seizures or severe or persistent muscle spasms.

What is the cost?

- A registration application fee to the New York State Department of Health (NYSDOH) of \$50.00.
- Medical Marijuana Product Cost – The cost of the product is paid directly to the registered organization each time the registered patient or designated caregiver purchases medical marijuana. All patients who qualify are responsible for this cost. Insurance companies are not required to cover medical marijuana.

What is the process for getting medical marijuana?

1. Talk with your Health Care Provider

Talk with your health care provider to see if medical marijuana might help you. Your health care provider must certify you for the use of medical marijuana.

- Your health care provider may decide that medical marijuana is right for your qualifying condition. If so, your health care provider will give you a signed certification form. You need this form before you can apply for a registry ID card.
- If your health care provider is not registered with NYSDOH to certify you as a patient, he or she may give you the name of another health care provider who is registered.
- ***Health care providers:** You must register with NYSDOH in order to certify patients for the medical marijuana program. Learn more about registering: https://www.health.ny.gov/regulations/medical_marijuana/practitioner/

2. Apply for Registry ID Card

Once you have a signed certification form from your health care provider, you will be ready to register online.

- Go to <https://MY.NY.gov>, click the "Health Applications" icon, and then click the "Medical Marijuana Data Management System" link to register. If you do not have a NY.gov account, you will need to go to <https://MY.NY.gov> and click the "Don't have an Account?" button to create a personal NY.gov account first.
- To register, you must give the following the information:
 - The certification number from the upper right-hand corner of the certification form your health care provider gave you.
 - Proof of identity and New York State residency. Information regarding acceptable proof can be found here: https://www.health.ny.gov/regulations/medical_marijuana/patients/registration_prerequisites.htm.
 - If you are the parent or legal guardian of a patient under the age of 18, you must submit a copy of your government-issued ID and a copy of the patient's birth certificate.
- During the registration process, you may designate up to two caregivers, who can get medical marijuana on your behalf. Caregivers must also register, after your registration is approved, with NYSDOH at <https://MY.NY.gov> (see above).
- If approved, NYSDOH will issue your registry ID card. If more information is needed, NYSDOH will contact you.

3. Visit a Medical Marijuana Dispensing Facility

Once you have your registry ID card, you will be able to visit a registered organization's dispensing facility to purchase the medical marijuana your health care provider recommended.

- Bring your certification form and registry ID card with you.
- A list of dispensing facility locations and links to the registered organizations' websites can be found here: https://www.health.ny.gov/regulations/medical_marijuana/application/selected_applicants.htm. Visit each registered organization's website for details on their hours of operation and contact information.

Where can I learn more?

Visit the NYSDOH website for more information on the Medical Marijuana Program in New York State.

If you have additional questions, please contact the Medical Marijuana Program at the NYSDOH:

Medical Marijuana Program
1-866-811-7957, Option 1

Email:
mmp@health.ny.gov

Website:
www.health.ny.gov/regulations/medical_marijuana/



Department
of Health

The New York State Medical Marijuana Program :

Physician Information



The Medical Marijuana Program in New York State ensures that medical marijuana is available for certified patients with serious conditions.

The program also ensures that approved medical marijuana products are manufactured and dispensed in a manner that protects public health and safety.

Do you have patients who may benefit from medical marijuana?

This brochure provides information on how health care providers qualify for the program, how to register with the New York State Department of Health (NYSDOH) and how to certify your patients.

Which health care providers are qualified to participate?

Health care providers interested in participating in the Medical Marijuana Program must meet the following criteria:

- Be a physician licensed by, and in good standing with, New York State.
- Be qualified by training or expertise to treat patients with one or more of the following severe, debilitating diseases: cancer, HIV/AIDS, amyotrophic lateral sclerosis (ALS), Parkinson's disease, multiple sclerosis, spinal cord injury with spasticity, epilepsy, inflammatory bowel disease, neuropathy and Huntington's disease.

Is participation required?

No, participation in the Medical Marijuana Program is voluntary. However, in order to certify patients for the medical use of marijuana, practitioners must first follow the steps as outlined in the next section.

What steps do I need to take before I can certify patients?

If you meet the qualifications and are interested in participating, you must take these steps:

1. Complete the four-hour NYSDOH-approved online course – The course is provided by TheAnswerPage, an established online medical education site.

- The following topics are covered in the course: the pharmacology of marijuana, contraindications, side effects, adverse reactions, risks and benefits, warnings and precautions, and abuse and dependence.
- The cost to take the course is \$249.
- Successful completion of the course will provide 4.5 hours of CME credits. The course is available at the following link: <http://www.theanswerpage.com/new-york-state-practitioner-education-medical-use-marijuana>

2. Register with the NYSDOH Medical Marijuana Program –

- Email the course completion certificate (in PDF format) to NYSDOH at mmp@health.ny.gov, along with your state license number and Health Commerce System (HCS) User ID.
- NYSDOH will verify this information and send you an email confirmation and instructions on how to register.

Once registered, how do I certify patients?

Once you are registered, you can begin certifying patients. For each patient you certify, you must first:

- **Be qualified to treat the patient's serious condition;**
 - Determine whether the patient meets the requirements for certification (see www.health.ny.gov/regulations/medical_marijuana/practitioner/);
 - Have the patient under your continued care for their serious condition(s);
 - Upon review of past treatments, determine that the patient is likely to receive therapeutic or palliative benefit from medical marijuana; and
 - Consult the Prescription Monitoring Program Registry.
- **Access the Medical Marijuana Data Management System** electronically on the NYSDOH Health Commerce System (HCS) to certify patients. You will need to enter the following information:
 - Patient's demographic information;
 - At least one of the eligible severe debilitating or life-threatening condition(s), **AND** an accompanying condition or symptom; and
 - Dosing recommendations for the patient.
- **Print out the certification, sign it and provide it to the patient.** A copy of the certification must be placed in the patient's medical record.

OMMU Sample Social Media Messages

- If you or a loved one are wanting information about #FLHealth's #MedicalMarijuana Use registry or how to apply? Visit the Office of Medical Marijuana Use website for more details: <http://www.floridahealth.gov/programs-and-services/office-of-medical-marijuana-use/medical-marijuana-use-registry/index.html>
- Find a qualified ordering physician in your area that can properly diagnose and prescribe #MedicalMarijuana for you or a loved one with this search tool from #FLHealth: <https://appsmqa.doh.state.fl.us/MQASearchServices/MedicalMarijuanaPhysician>
- Processing time for your #MedicalMarijuana application may be delayed if it is incomplete or incorrect. Get application and photo #tips from #FLHealth's Office of Medical Marijuana Use: <http://www.floridahealth.gov/programs-and-services/office-of-medical-marijuana-use/registry-id-cards/documents/identification-card-for-patient-help.pdf?p=1514577605470>
- Patients and caregivers may only fill orders for #MedicalMarijuana with one of the state's approved medical marijuana treatment centers. Find one near you: <http://www.floridahealth.gov/programs-and-services/office-of-medical-marijuana-use/dispensing-organizations/index.html>
- A lot of rumors are going around! Make sure you have the correct information about #FLHealth's Office of #MedicalMarijuana Use with these FAQs: <http://www.floridahealth.gov/programs-and-services/office-of-medical-marijuana-use/frequently-asked-questions/index.html>
- Do you need to change, replace or surrender your #FLHealth #MedicalMarijuana Use card? Learn more: <http://www.floridahealth.gov/programs-and-services/office-of-medical-marijuana-use/registry-id-cards/documents/change-replacement-or-surrender-request.pdf?p=1514577944133>

OMMU Sample Social Media Images





FLORIDA DEPARTMENT OF HEALTH

Office of Medical Marijuana Use

Low-THC Cannabis & Medical Marijuana

Patient's Guide

HOW IT WORKS

1

A physician diagnoses a patient with a qualifying condition for low-THC cannabis or medical marijuana.
If the patient is younger than 18 or terminal, a second physician must concur and this determination must be reflected in the patient's medical records.

2

The physician obtains voluntary, written, informed consent from the patient.

3

The physician enters the order into the Medical Marijuana Use Registry.

4

The patient must apply for a Medical Marijuana Use Registry Identification card and receive conformation of temporary approval.

5

The patient may fill the order at any approved Medical Marijuana Treatment Center.

Know the Responsibilities of Your Physician:

- Obtain voluntary, written, informed consent from the patient or the patient's legal guardian
- Enter an order for the named patient into the Marijuana Use Registry and update the registry within 7 days of any change

A Qualified Patient Must:

- Be diagnosed with a qualifying condition
- Has/obtains a Medical Marijuana Use Registry Identification Card. (\$75/yr)
- Be a Florida resident

Qualifying Conditions

Cancer

Epilepsy

Glaucoma

HIV/AIDS

Crohn's disease

Parkinson's disease

Multiple sclerosis (MS)

Medical conditions of the same kind or class as or comparable to those above

Post-traumatic stress disorder (PTSD)

Amyotrophic lateral sclerosis (ALS)

A terminal condition diagnosed by a physician other than the qualified physician issuing the physician certification

Chronic nonmalignant pain caused by a qualifying medical condition or that originates from a qualifying medical condition and persists beyond the usual course of that qualifying medical condition

For More Information:

- To find a qualified physician
- To locate a Medical Marijuana Treatment Center
- To learn more

Go to www.flhealth.gov/ommu

THE OFFICE OF MEDICAL MARIJUANA USE:

4052 Bald Cypress Way,
Tallahassee, FL 32399

850-245-4657

MedicalmarijuanaUse@flhealth.gov





WEEKLY UPDATE – January 18, 2018

The Florida Department of Health's (DOH) top priority is the health and safety of Florida's families and are dedicated to ensuring patients have safe access to low-THC cannabis and medical marijuana. Through the DOH Office of Medical Marijuana Use (OMMU), we are working diligently every day to implement the many requirements in Amendment 2 and those set by the Florida Legislature in Senate Bill 8A. We remain committed to moving this process forward, and will do so in an expedient and thoughtful manner. To keep the public informed of the latest updates, DOH will issue a weekly update on this issue.

OMMU by the Numbers

Patients in the Registry: 69,579*

Qualified Physicians: 989

Approved Medical Marijuana Treatment Centers:
13

Approved Retail Dispensing Locations: 26

Processing Time for Complete Paper Application: 30 days

Processing Time for Complete Online Application: 20 days

Approved ID Card Applications: 46,411 *

Applications in Processing: 3,500

Implementation Updates

- **Low-THC cannabis and medical marijuana has been and continues to be available for qualified patients.** Patients may search for qualified ordering physicians using the new search tool on the OMMU Patients Page. Patients and caregivers may fill their orders at any of the 25 dispensing locations, or via delivery from approved MMTCs below.
- On Monday, January 8, the call center officially transitioned to the third party vendor. With that transition, the phone number changed to a toll-free number 800-808-9580. The call center is open weekdays from 8 a.m. to 5 p.m., excluding state holidays.
- During the 2017 Special Legislative Session, the Florida Legislature passed Senate Bill 8-A which included many changes to creating physician certifications for qualifying patients. Updates have been made to the Medical Marijuana Use Registry as required by 381.986, F.S. Updated user

*Note, not all patients entered into the medical marijuana use registry apply for medical marijuana use identification cards.

guides are available at: <http://www.floridahealth.gov/programs-and-services/office-of-medical-marijuana-use/medical-marijuana-use-registry/index.html>

- DOH issued a press release on January 19, 2018 reminding Floridians to avoid medical marijuana scams. The release can be viewed [here](#).

Medical Marijuana Treatment Centers

Name	Dispensing Locations
Trulieve	Tallahassee, Tampa, Clearwater, Pensacola, Miami, Edgewater, Lady Lake, Jacksonville, Orlando, St. Petersburg, Bradenton, Fort Myers, Gainesville, delivery
Surterra Therapeutics	Pensacola, Tallahassee, Tampa, North Port, delivery
Curaleaf	Miami, Kendall, Lake Worth, delivery
Knox Medical	Tallahassee, Gainesville, Orlando, Jacksonville, Lake Worth, St. Petersburg, delivery
Aphria	Dispensing via delivery
The Green Solution	Dispensing via delivery
GrowHealthy	Dispensing via delivery
3 Boys Farm	<i>Cultivation Authorization only</i>
Loop's Nursery & Greenhouses, Inc.	<i>Cultivation Authorization only</i>
Plants of Ruskin, Inc.	<i>Cultivation Authorization only</i>
Sunbulb Company, Inc.	<i>Cultivation Authorization only</i>
Treadwell Nursery	<i>Cultivation Authorization only</i>
Keith St. Germain Nursery Farms	N/A

Legal Updates

The implementation of Amendment 2 and Senate Bill 8A continues to be frequently litigated. While some of these lawsuits have little impact on our progress, others – particularly those regarding the constitutionality of the law we are tasked with executing – have significant impact on DOH's ability to implement certain requirements of Senate Bill 8A.

Home Grow	Redner v. DOH, et. al., 13th Judicial Circuit Case No. 17-CA-5677 <i>Hearing took place December 20, 2017 and we await ruling.</i>
Smoking Ban	People United for Medical Marijuana v. DOH, et. al., 2d Judicial Circuit Case No. 2017-CA-1394 <i>Hearing has been set for January 25, 2018.</i>
Constitutionality of Black Farmers Provision 381.986(8)(a)2 F.S.	Smith v. DOH, 2d Judicial Circuit Case No. 2017-CA-001972 <i>Hearing took place on December 28, 2017. Judge Dodson granted the injunction.</i>
Constitutionality of Citrus Farmers Provision 381.986(8)(a)3 F.S.	Tropiflora, LLC v. DOH, 2d Judicial Circuit Case No. 2016-CA-1330 <i>Awaiting injunction hearing to be scheduled.</i>
Application Process	Bill's Nursery, Inc. v. DOH, 2d Judicial Circuit Case No. 2017-CA-002411

	<i>Hearing regarding motion to consolidate with Smith v. DOH scheduled for February 2, 2018.</i>
MMTC Licensure	Nature's Way v. DOH Case No. 17-5801 <i>Hearing scheduled for January 29, 2018</i>
Constitutionality of Rules	Florigrown LLC v. DOH Case No. 2017-CA-002549

General Background Information

Medical Marijuana ID Card Application Process: Once a patient has been diagnosed by a qualified ordering physician and entered into the Medical Marijuana Use Registry, they can immediately begin the identification card application process. The department encourages applicants to complete the process online as this decreases processing time. Patients receive an email from OMMU once their email is added to the registry by their qualified ordering physician which directs them to the application. Once an application is reviewed and approved, patients receive an approval email which can be used to fill an order at an approved MMTC while they await their physical card.

Medical Marijuana Use Registry: All orders for medical marijuana are recorded and dispensed via the Medical Marijuana Use Registry. The Medical Marijuana Use Registry is accessible online, with real time information to ordering physicians, law enforcement and medical marijuana treatment center staff. Patients and caregivers may also access the Medical Marijuana Use Registry to submit a Medical Marijuana Use Registry Identification Card application, and check the status of their application.

Medical Marijuana Treatment Centers: Approved medical marijuana treatment centers are the only businesses allowed to grow, process, or sell medical marijuana in Florida. Each medical marijuana treatment center must receive authorization at three stages, (1) cultivation authorization, (2) processing authorization, and (3) dispensing authorization, prior to dispensing low-THC cannabis or medical marijuana. Medical marijuana cannot be mailed.

For more information visit www.flhealth.gov/ommu

Proposed Spending Plan*Total Budget \$500,000*

<u>Tactic</u>	<u>Estimated Budget</u>	<u>Estimated Impressions</u>	<u>Estimated CPM</u> <i>(Cost per 1,000 impressions)</i>
Pre & Post Assessment (1 st year)	\$60,000	n/a	n/a
Health Care Provider Magazines	\$8,500 (1 run per magazine per quarter)	474,800 per quarter	\$4.42
Other Provider Magazines	\$10,000	TBD	TBD
Parenting Magazines	\$25,000	22 Issues in Regional Mags	TBD
Billboards	\$100,000	98M	\$1.02
Website & hosting	\$30,000	TBD	TBD
Streaming Radio	\$30,000	3.4M	\$8.69
Facebook	\$30,000	3.7M	\$8.09
Twitter	\$30,000	4.6M	\$6.48
Google Adwords	\$12,000	TBD (budget \$1,000 per month)	TBD
Network Radio Spots	\$30,000	4.8M	\$6.14
Printed Provider Materials for Qualified Ordering Physicians	\$7,500	100,000 rack cards (.07 per piece)	\$75
Printed Provider Materials for OB GYNs	\$7,500	100,000 rack cards (.07 per piece)	\$75
Printed Materials for WIC Clinics	\$7,500	100,000 rack cards (.07 per piece)	\$75
Printed Materials for Community Partners	\$7,500	100,000 rack cards (.07 per piece)	\$75
Printed Patient Guides	\$90,000	180,000 tri-folds (.50 per piece)	\$500
Printed Provider Guides	\$1,500	3,000 tri-folds (.50 per piece)	\$500
Shipping Costs	\$10,000	n/a	n/a
TOTALS	\$497,000	More than 115M	Less than \$4.32