

ELEVATED WELLNESS SOLUTIONS

July 20, 2023

Patient Demographic Information

Name: MJ Doe | DOB: 06/15/1957 | Sex: M | Address: 2987 12th Street NW, Washington, DC 20011 | DCMJ ID#: 420420420

Intake Summary

Pt, MJ, is a 66-year-old male and presents with dx of stage IV colon adenocarcinoma. Pt received dx 2 years ago and has since experienced severe weight loss in the last 2 years(50lbs) and currently suffers from daily nausea, poor appetite, abdominal pain, diarrhea and anxiety. Symptoms also cause severe fatigue and negatively affect his mood. Prior to cancer dx pt ran his own business and worked 10-12 hour days. Pt has a hx of smoking cannabis “years ago” and found the experience relaxing and enjoyable. Initial pain scale ratings: cramping = 7.5/10, nausea = 7/10, diarrhea severity = 5/10.

Current Medication Regimen

Capecitabine(Xeloda) and pembrolizumab(Keytruda) to slow disease progression and optimize his life span. Amlodipine for hypertension. Atorvastatin for hyperlipidemia. Pt has been counseled on the DDIs between cannabis and amlodipine and cannabis and atorvastatin and has been advised to take cannabis 2 hours before or after these medications. Pt also advised to restrict certain activities after taking a cannabis dose due to the possibility of sedation.

Treatment Goals

Tx goals include decreasing pain scale ratings by 3 points, decreasing stomach cramping, decreasing nausea, increase appetite and energy and improving overall mood. Pt states he wishes to improve his overall quality of life and to “feel as good as I can and to be around as long as I can”. Pt wishes to use cannabinoids to prevent the necessity for opioids to manage pain.

Therapeutic Recommendations | Patient Treatment Plan

- 1:1 CBD/THC 5mg Troche gummies for appetite stimulant 1-2 hours before meals
- 250mg CBD syringe for pain symptoms tid prn
- 1g THC Fuel Biscuits Cart for mood stimulant and euphoric feeling, anti anxiety prn
- 20mg MCT oil tincture daily for abdominal cramping/nausea/diarrhea

Pt should start off with the recommended doses. Please allow 30 minutes to an hour for any relief of symptoms. If there are no signs of improvement, increase dose incrementally as needed and closely monitor for any side effects or relief of symptoms. If the pt begins to feel dizziness, nausea, paranoia, dryness of the mouth stop taking cannabinoid treatment immediately and contact your provider for assessment.

Monitoring Plan

- a. Pt should monitor for the following symptoms of THC toxicity: nausea, vomiting, dizziness, seizures. He should use a side effect journal to keep track of these symptoms should they arise. Because of the possible DDIs with atorvastatin and amlodipine MJ should also have blood work completed to establish a baseline. Together, with his medical provider, MJ can monitor for changes as a possible indicator of toxicity. Pain and severity scale will also be used to monitor change in symptoms.
- b. Because of the pts medical frailty, this writer recommends that he monitor for symptoms of THC toxicity weekly after the first week of use once he is accustomed to using cannabis. This writer will follow up with pt bi-weekly. After the initial blood work to establish baseline, this writer would recommend follow up blood tests monthly to monitor for medication toxicity and for reassessment by his medical provider.

Follow up

This writer will follow up with pt on 8/3/23 to complete pain/severity scale assessment and make treatment plan adjustments as necessary.

Contact Information

MJ is a great candidate for medical cannabis and is enthusiastic about beginning his regimen. I look forward to collaborating with you and other members of his tx team. Please have MJ complete a ROI form so that we can

share pertinent health information as needed. See attached ROI from our office for your file.

Ashley Stafford - Clinical Cannabis Consultant

202-637-7654

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Monday-Sunday | 11:30am-7pm

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