Cannabis Care Guide for Pharmacists

2025

Short Version—Core items without supplemental guidance



Cannabis Care Guide for Pharmacists INITIAL Consultation

1. REASON FOR USE 4. RISK ASSESSMENT a. What are your reasons for using cannabis? a. Risk factors: b. What do you hope cannabis will do for you? ☐ Are you under age 25? c. How well is it working? ☐ Are you pregnant or planning pregnancy? d. Do you have questions or concerns? ☐ Are you breastfeeding? ☐ Do you have a personal/family history of psychosis? 2. ACCESS ☐ Do you use substances (alcohol, opioids) or have a a. Are other providers working with you to manage your history of use that resulted in harm? cannabis and health concerns? ☐ Do you have an anxiety or mood disorder? b. Do you have a medical authorization? ☐ Do you have medical conditions related to the lungs, c. Have you discussed these symptoms with your primary heart, kidney or liver? care provider? b. Do you drive or use cannabis while at work? d. May I share our discussion with your primary care provider? How long do you wait to drive after using cannabis? e. How else are you managing these health concerns? c. Are you experiencing any of these effects? f. Where do you purchase or obtain your cannabis? ☐ Euphoria/getting "high" g. How do you pay for your cannabis? ☐ Fast heartbeat, change in blood pressure h. What is the cost per month? ☐ Drowsiness i. Do you have any concerns related to cost? □ Dizziness ☐ Dry mouth 3. REGIMEN ☐ Constipation a. How do you currently use cannabis? ☐ Dry eye, red eye b. How often do you use cannabis? ☐ Anxiety, fear, panic, memory problems c. How much cannabis do you typically use daily? ☐ Cough (if smoking or vaping) d. What are the THC and CBD strengths of the products you ☐ Vomiting/hyperemesis use? Do you have the products here with you? ☐ Other:_____ e. Have you tried other cannabis products or cannabinoids in the past?

4. RISK ASSESSMENT (continued)

d. CUDIT-SF (screen for cannabis use disorder)10

How often in the past 6 months:	Never	Less than monthly	Monthly	Weekly	Daily / almost daily
Did you find you were not able to stop using cannabis once you had started?	0	1	2	3	4
Have you devoted a great deal of time to getting, using or recovering from cannabis?	0	1	2	3	4
Have you had a problem with memory or concentration after using cannabis?	0	1	2	3	4

	тот	ΓAL =		If score ≥ 2: Positive screen for possible cannabis use disorder					
5.	DRU	RUG INTERACTION REVIEW							
a.	Doy	you use any of the following medications or substances?							
] Alcohol							
		Opioids							
		Benzodiazepines							
		Gabapentin							
		Other medications causing cognitive impairment:							
	_								
	_								
	_								
		Cocaine							
		Amphetam	nines						
		Nicotine p	roducts (smoki	ng)					
Ь.	Do y for y		ther substances	or medications not prescribed					
	_								
	_								

If score ≤ 1:

Provide education on potential risk of cannabis use disorder.

- c. Assessment of the following interactions requires an updated medication list:
 - THC is primarily metabolized by CYP 2C9, 2C19 and 3A4.
 - THC is an inhibitor of CYP 3A4, 2C9, 2D6 and 2B6.
 - CBD is primarily metabolized by CYP 3A4 and 2C19.
 - CBD is an inhibitor of CYP 3A4, 2C19, 2D6, 2C8, 2C9, 1A2, 2B6, UGT1A9, UGT2B7 and P-gp.
 - Cannabis is a CYP1A2 inhibitor but smoking cannabis can induce CYP1A2.^{7,13-16}

The clinical impact of drug interactions with cannabis is an evolving area, and current knowledge is very limited. However, assessment and monitoring are still recommended.

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Cannabis Care Guide for Pharmacists

Cannabis continues to be used frequently for medical and non-medical purposes. Pharmacists are well positioned to assess patients for the benefits and harms associated with cannabis use, regardless of the reasons for use. This clinical guide helps pharmacists to assess, support and refer patients who use cannabis.

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