

## INFORMED CONSENT AND PATIENT AGREEMENT, RELEASE ALL CLAIMS LIABILITY

*I understand that the Releaf medical providers are addressing specific aspects of my medical care, and unless otherwise stated, are in no way establishing themselves as primary care provider. The Releaf physician or the physician assistant working under the supervision of a licensed physician is only evaluating, and if appropriate, confirming the therapeutic indication for the use of medical marijuana.*

I have discussed the risks and benefits of using medical marijuana with the Releaf physician, medical provider or staff.

- Marijuana has sedative properties that may affect coordination and cognition. I have been specifically counseled not to drive a car, operate heavy machinery, or engage in any potentially hazardous activity while using medical marijuana. I may develop a dependency on marijuana through repeated use.
- Marijuana may cause other side effects, including dry mouth, nausea, headache, visual disturbances, increased heart rate, muscle relaxation, decreased coordination, lung irritation, weight loss or gain, altered body temperature, anxiety, paranoia, confusion, sedation, altered libido, altered perceptions, reduced testicular size, and testosterone, menstrual abnormalities, fertility, and fetal exposure in pregnancy & breast feeding.
- Medicinal marijuana provides benefits in treating or alleviating pain or other symptoms associated with certain debilitating medical conditions; however, there exists a lack of scientific consensus concerning, but not limited to, the following areas: unknown risks, dosages, frequency of dosages, delivery routes and methods, the most suitable strains for the treatment of specific conditions, and which cannabinoid compounds affect which areas of the body.

I understand and agree as follows:

- I will notify Releaf if I experience any adverse side effects from the use of medical marijuana.
- My continued use of medical marijuana will be contingent on my achieving treatment objectives and the absence of untoward side effects of physical and psychological problems associated with marijuana use.

- If I use an opioid for pain I will inform my opioid prescribing provider that I am using medical marijuana.
- Reclaim Ability Patients: Patients on medical marijuana and opioid will work with their provider to reduce overall medication associated risks. Attempts will be made to wean or maintain opioid dose < 90 MME/day with the goal of < 50 MME within 6-12 months. MMP patient must be re-certified in person every 3 months. Coinciding with 3 month re-enrollment opioid use will be evaluated. Dose escalation of opioid medications while on medical marijuana should be considered a failure of the medical marijuana program in controlling pain. This does not apply to patients with cancer pain, anxiety or movement disorder.
- Risk Mitigation: Patients on the medical marijuana programs may be subject to random urine drug screens and purchase history will be reviewed every 3 months to ensure compliance with NJ MMP.
- I consent to the use of telemedicine if my medical condition puts me at increased risk of COVID19.
- I have been informed COVID19 is a respiratory virus which can cause lung disease. I have been informed of risks of smoking and vaping and oral and topical cannabis alternatives.

I further understand that my failure to comply with the agreements and acknowledgments I have made in this document will be grounds for retraction of any authorization for me to continue to use medical marijuana. My heirs, assigns, or anyone acting on my behalf, hold the Releaf physician, physician assistant, nurse practitioner, and staff, free of and harmless from any responsibility and liability resulting from my use of cannabis.

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_