



Medical Cannabis Program – Practitioner Guidance for Post-Traumatic Stress Disorder (PTSD)

This document provides guidance to practitioners who may issue certifications to patients for post-traumatic stress disorder (PTSD).

1. Practitioners should review the Diagnosis and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) criteria for the diagnosis of PTSD to ensure an accurate diagnosis of PTSD has been made and is documented in the patient’s medical record prior to issuing a certification for medical cannabis for PTSD.
2. Practitioners are strongly encouraged to consult with their patient’s behavioral health specialist prior to initiating medical cannabis treatment. If the patient does not have a relationship with a behavioral health specialist, a referral should be encouraged.
3. Pursuant to Article 3 Section 30 (1) (d) of the Cannabis Law, practitioners must review past treatments, and determine, in the practitioner’s professional medical opinion that the patient is likely to receive therapeutic or palliative benefit from medical cannabis for the serious condition, in this case for the treatment of PTSD.
4. Medical cannabis is not recommended for PTSD patients under 18 years of age.
5. Practitioners should make an effort to determine patients’ current or prior cannabis use in determining appropriate frequency and level of dosing, which may differ between patients who are experienced cannabis users and cannabis naïve patients.
6. Practitioners should consider an approach to a treatment plan and document the patient’s agreement to the plan. Provided that the patient has consented, the practitioner should communicate the patient’s treatment plan with the patient’s behavioral and non-behavioral health care providers, if applicable, as well as any supporting family or friends.
7. Patients should also be assessed for suicide ideation/attempts, psychosis, substance use disorder, or any other complicating psychological disturbance.
8. Practitioners should incorporate baseline/monitoring questionnaires for PTSD, depression and suicidality, and symptoms of psychosis.
 - o National Suicide Prevention Lifeline, 1-800-273-8255 <https://suicidepreventionlifeline.org/>.

The patient, and if feasible their supporting family member or friend, should be counseled on warning signs of suicide, psychosis or psychiatric events and should be provided with a crisis hotline number to call in the event of an acute psychiatric incident of concern. Listed below are some helpful resources:

- o To find a mental health program in New York State, visit the following directory from the New York State Office of Mental Health: <https://my.omh.ny.gov/bi/pd/saw.dll?PortalPages>
- o The New York State HOPEline, 1-877-846-7369, offers help 24 hours a day, 365 days a year for alcoholism, drug abuse and problem gambling.

Questions? Contact the Medical Cannabis Program at medical@ocm.ny.gov or call 888-626-5151