THE healing CLINICS

My Healing Journey

Medical Cannabis Patient Diary

Use this diary to track your products, dosage, strain, method of use, and changes over time so you and your medical marijuana doctor can make informed decisions together.

Cannabinoids Quick Reference

Cannabinoids are a group of active chemical compounds responsible for therapeutic effects on the mind and body. There are over 120 known Cannabinoids (not all are psychoactive), and certainly more waiting to be discovered. This chart shows the most common compounds and their known medical benefits.

	THCa	CBG	CBDa	THC	CBDv	CBD	CBN	THCv	CBC
Relieves Pain				●		●	●		●
Slows Bacterial Growth		●	●			●			●
Relieves Depression						●		●	
Reduces Nausea				●		●			
Reduces Seizures		●				●		●	
Reduces Inflammation	●		●		●	●			●
Aides Sleep							●		
Inhibits Cancer Cell Growth	●	●				●			●
Tranquilizing						●			
Suppresses Muscle Spasms	●			●		●	●		
Relieves Anxiety						●			
Stimulates Appetite				●					
Promotes Bone Growth		●			●	●		●	●
Reduces Intestinal Spasms						●			
Slows Nerve Degeneration				●		●			
Reduces Eye Pressure				●					

This guide and the above information is provided for general guidelines and is not intended to replace medical advice from a physician. Results are not guaranteed and may vary by patient. Please contact The Healing Clinics to move forward in your healing journey.

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NEW PATIENTS

(318) 227-4088 · www.thehealingclinics.com

For Your Reference

Methods of Delivery

The method of delivery defines how to patient chooses to consume products. The method of delivery can impact how quick the patient feels a reaction as well as how long the relief lasts. These are the typical methods of delivery.



Oil
Taken orally
(by mouth)
Tincture or vape



Flower
Taken orally
(by mouth)
Smoked



Pills or Capsules
Taken orally
(by mouth)



Topical
Applied to
the skin



Edibles
Taken orally
Candy,
Gummies, etc.

Most Common Side Effects

Some patients will experience no side effects but others have reported some of the following. Please be sure to note in your diary if you experience any of these side effects so your doctor or pharmacist can adjust your dose.

- Drowsiness (feeling sleepy)
- Fatigue (feeling tired)
- Dizziness
- Dry mouth
- Cough/mucus (with smoked cannabis)
- Feeling 'high' or 'stoned'
- Nausea
- Anxiety
- Problems with decision-making or with attention
- Problems with coordination
- Change in appetite
- Diarrhea (with cannabis oil)

What You Can Try to Reduce Side Effects

If you experience mild are moderate side effects, there are methods you can try to reduce those and make them more managable.

MILD SIDE EFFECTS

1.See if side effects may begin to decrease.
2. Wait a longer period of time between dose increases.
3. Reduce the dose during the day.
4. Lower your dose of THC.
5. Increase your dose of CBD.

MODERATE SIDE EFFECTS

1. Reduce your dose.
2. Wait a longer period of time between dose increases. For example, if your treatment calls for increasing the dose every 3 days, wait 5 days instead.

Better safe than sorry! If you are experiencing strong effects that are not manageable, call 911 or go to the nearest emergency room.

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COMPASSIONATE CARE.
PERSONALIZED TREATMENT.
A HEALTHIER TOMORROW.

Daily Medical Cannabis Tracking Page

1 Date and Time

Date: _____ Time: _____

2 Product Name / Brand

_____

_____

3 Product Type

Flower Vape Cartridge Edible

Tincture Topical Capsule ☐ Other: _____

4 Delivery Method

Inhalation (Smoking) Vaporization Oral (Edible)

Sublingual (Tincture) Topical Other: _____

5 Strain

Indica Sativa Hybrid Unknown

Strain Name: _____

6 THC / CBD Strength

THC: _____ CBD: _____

(e.g. 20% THC, 5mg CBD)

7 Dosage Taken

_____

(e.g. 1 puff, 5mg, 10mg, 1 gummy, etc.)

8 Why I Used It Today / Symptoms Targeted

_____

_____

9 Symptom Level Before Use (0 – 10)

0 1 2 3 4 5 6 7 8 9 10

No Symptoms Worst Possible

10 Time Effects Started

Within 5 minutes 6 – 15 minutes 16 – 30 minutes

31 – 60 minutes Over 1 hour Not yet N/A

11 Symptom Level After Use (0 – 10)

0 1 2 3 4 5 6 7 8 9 10

No Symptoms Worst Possible

12 Benefits Noticed / Changes

_____

_____

_____

13 Side Effects or Concerns

_____

_____

14 How Long the Effects Lasted

Less than 1 hour 1 – 2 hours 2 – 4 hours

4 – 8 hours More than 8 hours Still ongoing N/A

15 Notes for My Doctor

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WEEKLY REVIEW

Look for patterns; discuss significant changes with your clinician

Week of

Next clinician discussion / appointment

PRODUCTS & CHANGES

Which products or strains did I use most often?

Any changes in product, amount, frequency, or delivery method? Why?

WHAT I NOTICED

Best symptom relief, sleep, daily functioning, or other benefits

Unwanted effects, concerns, or times I felt impaired

Changes in my symptoms, medications, routine, or stress

QUESTIONS FOR MY MEDICAL CANNABIS DOCTOR

MY APPOINTMENT SUMMARY

Bring this page or the full diary to your medical cannabis appointment

Patient initials / date

Dates covered by diary

AT A GLANCE

Products and methods I used:

Typical dose / frequency I recorded:

Most helpful changes I noticed:

Side effects or safety concerns:

WHAT HAS CHANGED?

My symptom scores or daily activities compared with when I started:

Changes in product, dosing schedule, other medicines, or health:

WHAT I WANT TO ASK