



Last Name:

First Name:

Middle Initial:

### Cannabis Use Questions

1. How effective has medical marijuana been in treating your condition(s)?  
 Very effective  
 Somewhat effective  
 Not at all effective
2. How often do you use medical marijuana?  
 Less than once a month     1-3 times per month     Once a week  
 2-4 times a week     Almost daily     Once a day  
 Twice a day     Three times a day or more
3. If you are a daily user, what is the average amount of medical marijuana you use per day? (A large joint is about 1 gram, 1/8 oz = 3.6 grams)  
 less than 1 gram     1 gram     2 grams     3 grams     More than 3 grams  
 I am not a daily user so this does not apply to me
4. Has the amount of medical marijuana needed to control your symptoms increased, decreased, or remained the same over time?  
 Increased; it now requires more medical marijuana to control my symptoms  
 Decreased; it now requires less medical marijuana to control my symptoms  
 Remained about the same
5. Are you experiencing any problems with medical marijuana?  
 Yes  
 No
6. Do you have any questions or concerns about medical marijuana you would like the doctor to address today?  
 Yes  
 No
7. How do you medicate with medical marijuana? Please check all that apply.  
 smoke     vaporize ☺     eat or ingest ☺  
 apply cream, lotion, or ointment containing medical marijuana topically to skin
8. Do you smoke tobacco products?  
 Yes, I smoke tobacco. ☹  
 No, I do not smoke tobacco. ☺
9. Do you suffer from a chronic, persistent cough which lasts for more than 3 months a year? Do not include coughs from an acute upper respiratory infection, which are usually associated with fever, chills and flu-like symptoms.  
 Yes  
 No

By SIGNING or TYPING my FULL NAME in the BOX BELOW

I affirm that all of the information I have entered is correct.

Please enter today's date immediately below: