

## CANNABIS FOR MEDICAL PURPOSES

Amendment 3

**Standards of Practice** of the Yukon Medical Council (“the Council”) are the minimum standards of professional behavior and ethical conduct expected of all physicians registered in the Yukon. Standards of Practice will be referenced in the management of complaints and in discipline

Health Canada has approved the use of cannabis for medical purposes. This standard is based on information provided in the Health Canada [Access to Cannabis for Medical Purposes Regulations](#). Physicians wishing to authorize the use of cannabis for medical purposes should be familiar with the *Access to Cannabis for Medical Purposes Regulations* and The College of Family Physicians Canada (CFPC) document [Authorizing Dried Cannabis for Chronic Pain or Anxiety](#).

Physicians have the choice to treat or not to treat their patient’s medical condition or symptom(s) with cannabis. If a Physician chooses to refer a patient’s request for treatment using cannabis to another medical clinic, then the physician’s responsibilities within this standard do not apply.

- (1) A physician who chooses not to treat a patient’s medical condition or symptom(s) with cannabis should do so in accordance with the *Code of Ethics* and *Standard Moral or Religious Beliefs Affecting Medical Care*.
- (2) A physician who chooses to treat patients with cannabis must:
  - (a) attempt to find conventional therapies effective in treating the patient’s medical condition or symptom(s);
  - (b) assess the patient’s risk of addiction using a standard addiction risk tool;
  - (c) receive informed consent in accordance with *Standard Informed Consent*;
  - (d) review available prescription databases to obtain a patient medication profile;
  - (e) comply with federal regulations, including Health Canada’s *Information for Health Care Professionals*; and
  - (f) complete the patient’s medical document.
- (3) A patient’s medical document must include the:
  - (a) patient’s
    - i. given name and surname;
    - ii. date of birth; and
    - iii. personal health care number,
  - (b) physician’s

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**Terms used in the Standards of Practice:**

- *Physician* means any person who is registered or who is required to be registered under the Medical Profession Act.
- *Must* refers to a mandatory requirement.
- *May* means that the physician may exercise reasonable discretion.
- *Patient* includes, where applicable, the patient’s legal guardian or substitute decision maker.

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- i. licence number;
  - ii. given name and surname;
  - iii. business address and telephone number; and
  - iv. facsimile number and email,
- (c) address of the location at which the physician treated the patient;
  - (d) daily quantity of cannabis to be used by the patient expressed in grams;
  - (e) period of use specified as a number of weeks or months (not to exceed one year) beginning on the day the patient's medical document is signed; and
  - (f) physician's signature and date of signing.
- (4) A physician completing a patient medical document must:
- (a) evaluate the patient on a regular basis to determine the benefits and risks of cannabis as treatment for the medical condition or symptom(s) stated in the patient medical document;
  - (b) at minimum see the patient every three months following stabilization<sup>i</sup>;
  - (c) provide ongoing care to the patient for the underlying medical condition or symptom(s) for which cannabis is the treatment, including a process to identify misuse or abuse of cannabis; and
  - (d) if requested, provide to the Council a copy of the patient's medical document.
- (5) A physician must not:
- (a) dispense or provide cannabis directly to any patient or person; or apply to become a licensed producer of cannabis.

	In Force	Date	Author
Approval	YMC Approved	September, 2015	Laurel Miller
Amendment 1	Added HC regs and CFPC guide	May, 2018	Stephanie Connolly
Amendment 2	Amend physicians responsibilities for waiving	September 18, 2018	Lindsay Jordan
Amendment 3	removed specifying type of cannabis in medical documentation	July 2020	Ashley Hill

<sup>i</sup> The stabilization phase is defined by the use of a stable amount, medical condition or symptom(s) relief and reasonable confidence that no misuse is occurring.

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