

Dispensaries are stores that sell medical and nonmedical cannabis products. Unlike pharmacies, dispensaries do not sell other medications and are not regulated by the US Food and Drug Administration or Drug Enforcement Administration.



- Medical cannabis certification refers to a patient assessment completed by a qualified health care practitioner to attest recommendation of medical cannabis for management of the patient’s condition or symptom. A certification is required to legally possess medical cannabis or to purchase medical cannabis products from a dispensary. In many states, providers can qualify as a medical cannabis certifier by taking an online training course. Employees of federally funded health care systems such as the Veterans Health Administration cannot certify patients to use cannabis.
 - In some states with legalized adult-use cannabis, some dispensaries may not require certification. Individuals in these states require proof of age, much like when purchasing alcohol.
- The cannabis products at dispensaries vary by predominant active ingredient (delta-9-tetrahydrocannabinol [THC] or cannabidiol [CBD]) and route of administration (e.g., smoked, sublingual, oral).

- The degree to which medical cannabis is regulated and treated similarly to other pharmaceutical medications (medicalization) varies greatly

by state. A standardized tool, called the “medicalization of cannabis laws standardized scale” (MCLaSS) characterizes and quantifies the extent to which medical cannabis is medicalized.¹ [Click here](#) to view a map of the US states, find their corresponding MCLaSS scores, and learn more details about its cannabis programs.

- In many states, patients interact with dispensary staff, often referred to as “budtenders,” who are not clinicians.¹
- In 2 states with legalized medical cannabis, patients are not required to meet with licensed clinicians or pharmacists, while patients in 18 states receive education on medical cannabis when buying a medical cannabis product.¹
- A nationally representative survey of patient-facing dispensary staff described how they approach making recommendations to patients.²
 - Dispensary staff take patient’s medical conditions, preference, and dispensary trainings into account more than physician input.

- Dispensary staff rarely advise patients to seek traditional medical care *instead of* medical cannabis.
- Dispensary staff tend to advise patients to inform their health care professional about their cannabis use.

Advice for Providers

Cannabis dispensaries should not be treated as medical environments. Health care professionals should provide evidence-based guidance on safely using medical cannabis and not rely on dispensary staff to provide this education.²

This advice should include:

- Contraindications to initiating cannabis use such as active hallucinations, uncontrolled heart disease, pregnancy or breast feeding, or intent to become pregnant
- Safety precautions, including warning against driving or operating heavy machinery while under the influence
- Harm reduction principles: Use regulated cannabis products instead of unregulated when given the choice; try to use products that are not smoked; use the lowest effective dose of THC possible
- Advice on how to safely dose medical cannabis in a manner that reduces risk of side effects (start at a low dose of cannabinoids and titrate up slowly).³

References

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2. Merlin JS, Althouse A, Feldman R, et al. Analysis of state cannabis laws and dispensary staff recommendations to adults purchasing medical cannabis. *JAMA Network Open*. 2021;4(9):e2124511-e2124511.
3. MacCallum CA, Russo EB. Practical considerations in medical cannabis administration and dosing. *Eur J Intern Med*. 2018;49:12-19.

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