

MEDICAL MARIJUANA PATIENT HEALTH WARNING:

The medical Board of CA recently clarified its Medical Marijuana practice standards – insightful parameters diligently derived from the routine practice of good faith Medicine itself. They include* :

- `Patient History AND Examination – initially in-person’. (Presumably, with additional physician licensure and developed protocols, a CA licensed Physician Assistant or Nurse Practitioner ~ONLY may ‘substitute’ under the physician’s direct supervision).
- `Confirmation of diagnosis’ (APPROPRIATE medical records, consultations, lab/radiology, etc. - presumably as `required’ by the *same* routine standards of medicine as for any other therapeutic intervention: surgery, chemotherapy, etc.).
- `Periodic review – AT LEAST annually or more frequently’.
- `PROPER medical record keeping’.

The Board’s Enforcement Chief also has recently published concerns regarding violations of The Medical Practices Act including fee-splitting, illegal non-physician hiring of physicians, improper clinic ownership, and aiding/abetting unlicensed practice of medicine.*

Additional patient risk exposure is created when Medical Marijuana recommendations are obtained from physicians whose practice includes ANY on premises (or any sham of non-equivalent) at ANY Medical Marijuana dispensary (especially those involving physician ownership/financial participation). These clear violations of multiple Federal (including Supreme) Courts rulings forbidding physician aiding and abetting distribution of medical marijuana places ALL of same physician’s medical records (as well as ALL of same dispensary’s customer lists, etc.) subject to Federal seizure and subsequent individual patient Federal investigations / prosecutions. Even dispensaries not partaking in these practices are left at increased risk of Federal invasion whenever these community (or state-wide) thresholds are violated.

Purported illnesses validated with unsubstantiated spot diagnoses theoretically legitimizing sales as ‘medical’. Smoke & Mirrors. Party On. Quality establishments dragged into same downward spiral by immediate market forces of basic survival. Smash & Grab & Metastasize profiteering by a few cost *all* patients `Oakland’. Who’s next?

While others may profit from fraudulent / negligent sham / substandard ‘Prop 215’ evaluations, it is, as usual, the trusting innocent patient victims (and their families, homes, careers, education, fundamental liberty itself, etc.) that are left with expensive and consuming (or worse) entanglements with our over burdened criminal justice systems.

Back-ally coat hanger-job medicine. A real bargain. Cover your butt with toilet paper what do you have on your hands when it gets wet: What does 1 billable hour of `legal’

cost? / How much gets done with just 1 billable hour? / How long does such a morass drag out? / What is the downside to life if ALL doesn't resolve favorably 1000%?

It's not 1996 anymore. With the cascading avalanche of science, ~10+ States, ~80% polls, and exponentially evolving global species concurrence, clearly 'Med Pot' isn't going away. Void '215' & there will just be another.

Deal with issues now or regret the lost opportunity later. Rather than continue perpetrating the heady fogged/bogged mire of the past perhaps instead let all (Local/State/Federal/patient/clinician/dispensary/et al) re-focus on constructively evolving a responsible new future compatible with this basic reality at hand. Providing a rational 'level playing field' for dispensaries (that are not even in '215'...) is under the purview of local government. Regardless of persuasion, the best interests of patients clearly mandate this fundamental fiduciary duty of social contract be additionally met by all.

*Reprints on our web site www.potdoc.com. ALL relevant parties (& especially any licensed personnel) should seek *immediate* further independent clarifications from additional personal legal sub-specialists well versed in the obscure arcane technicalities of CA Medical Practice law as well as supplemental quality criminal law advice from legal admitted to the Federal Bar prior to continuation of such acts – CMA can refer.