



## As a health care professional, here are **5** things you need to know about our new medicinal cannabis policy



WorkSafeNB generally doesn't approve medical cannabis as medical aid. However, it may be approved to treat a compensable injury or disease in the following situations:

- Symptoms encountered in palliative/end of life care setting;
- Nausea and vomiting while receiving chemotherapy as part of treatment for cancer;
- Loss of appetite due to treatments for cancer or AIDS;
- Spasm and spasticity due to central nervous system injury; and
- Chronic neuropathic pain.

Medicinal cannabis may also be considered for harm reduction when the injured worker's dosage of opioids is over the maximum daily limit recommended in WorkSafeNB's *Policy 25-012 Medical Aid – Opioids*.

As tetrahydrocannabinol (THC) is the cannabis component that causes impairment, authorization must be for cannabidiol (CBD) rich medicinal cannabis, with the maximum THC content being less than 1%.



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The daily dosage should start at the lowest possible quantity to improve or maintain function, with the maximum daily dosage limited to three grams or less.



To be approved, medicinal cannabis must be administered through a non-smoking related route.





In some instances prescribers must provide evidence of having followed the management recommendations from the College of Family Physicians of Canada (CFPC) and Canadian Pain Society (CPS), including evidence of failure for separate 12-week trials for tier 1 and tier 2 medications. This can be demonstrated by completing the Canadian Consortium for Investigation of Cannabinoids Checklist for the Medical Assessment of the Patient Asking about Medical Cannabis (or equivalent), along with a baseline SF36 (or similar) functional assessment form.

Read the full policy: *Medical Aid – Cannabis (Marijuana) for Medical Purposes* Read the *Stakeholder consultation summary report* 

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