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# Medical Cannabis Program

## Cannabis *N*<sub>ugs</sub> *O*<sub>f</sub> *W*<sub>isdom</sub>

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# Disclaimer

- The opinions shared during this meeting do not necessarily reflect the position of the Medical Cannabis Program.
- The Medical Cannabis Program does not endorse any specific product, producer, or vendor.

# Objectives

- Review utilizing the Online Patient Portal
- Discuss Cannabis Impairment and Road Safety
- Review role of Consumption Areas
- Discuss Safety Considerations
- Review effectiveness of Cannabis testing

# Portal Pointers

- Barcode/ ID Code
- Answer Caregiver Question
- Tracking the status of an enrollment application
- \*Please inform patients that they too can follow the status of their application using the online portal.
- \*Please remind patients that they must create an online portal account and complete the application before the MCP can issue a card.

## Patient Application



**Application Type**

New Application  Renewal

Barcode / ID Code **1**

**1. Patient Information**

First Name	<input type="text"/>	Last Name	<input type="text"/>
Suffix	<input type="text" value="v"/>	Middle Name	<input type="text"/>
Date of Birth	<input type="text" value="MM-DD-YYYY"/>	If a Designated Caregiver is needed, the Patient email address MUST be different from the Caregiver email address.	
Phone	<input type="text" value="( ) - -"/>		
Email Address	<input type="text"/>		

Mailing Address

Identification

Self-Identification

**2. Designated Caregiver**

Does the Patient wish to have a Caregiver? **2**  Yes  No

### My Applications

Barcode	Application	Percentage	Exp.
455HZC3JK6	<span>Pending/Waiting Additional Information</span> Patient Application <a href="#">Luna Eclipse</a>	70%	
8XXS3F26U8	<span>Pending/Waiting Additional Information</span> Patient Application <a href="#">Logan Roy</a>	93%	
ZK729XBL88	<span>Pending/Waiting Additional Information</span> Patient Application <a href="#">Jerry Maguire</a>	70%	
49PHF99DX2	<span>Pending</span> Patient Application <a href="#">John Zztest</a>	70%	
6A72VA3S2G	<span>Pending/Waiting Additional Information</span> Patient Application <a href="#">Dionne Davenport</a>	70%	
<span>Replace</span> F796P5UPL8	<span>Issued</span> Patient Application <a href="#">Mcp Patient</a>	100%	06-28-2023
A6958PC5UT	<span>Pending/Waiting Additional Information</span> Patient Application <a href="#">Mcp Patient</a>	81%	05-01-2023
<span>Replace</span> 67R8HV4D2P	<span>Issued</span> Medical Provider Application	100%	09-01-2023
N95X55JB4V	<span>Pending/Waiting Additional Information</span> Caregiver Application (Patient Information: Do Notreply)	52%	

[Add New Patient Application](#)

# Myths Busted

- Having a medical cannabis card provides patient with a valid legal excuse for potentially driving while impaired - **WRONG**
- Smoking cannabis is no longer illegal while driving a vehicle - **WRONG**
- Cannabis use makes you a safer driver - **WRONG**

# Cannabis Impairment

- Cannabis is the second most widely used recreation drug worldwide after alcohol.<sup>1</sup>
- Acute Cannabis use is associated with cognitive deficits and psychomotor impairment.<sup>2</sup>
- Deficits are caused when THC crosses the blood-brain barrier and affects the brain.
- “CBD-only” products should be safe to drive on, but may contain substances that can cause impairment (delta-8 THC).

# Impacts of Cannabis use on driving<sup>3,4</sup>

- Slowing your reaction time and ability to make decisions
- Impairs coordination
- Distorts perception

# How one drives<sup>5</sup>

- Small amounts of THC in the blood
  - More cautious
  - Drive slower than normal (even too slow)
- Larger amounts of THC in the blood
  - Weave in and out of lanes
  - React slowly at lights and obstacles
  - Less aware of speed

# Collisions Risk

- Three published meta-analyses each concluded that the acute use of cannabis definitively increases collision risk.<sup>6,7,8</sup>
- Increased the risk for a traffic crash up to 50% following cannabis use.<sup>9</sup>

# Likely driver profile<sup>10</sup>

- Adolescent or young adult
- CUD
- Medicinal patient
- Addition of alcohol

# Timeline

- The psychoactive effects of cannabis are experienced immediately after smoking, with peak levels of intoxication occurring after approximately 30 minutes and lasting several hours.<sup>11</sup>
- Following oral ingestion, psychotropic effects set in with a delay of 30 to 90 minutes and reach their maximum after 2 – 3 hours. Effects can last for approximately 4 – 12 hours.<sup>12</sup>
- Yet, a recent CDC report revealed that the number of people who acknowledged operating a motor vehicle after consuming cannabis increased by 47% in a four-year span.<sup>13</sup>

# Cannabis consumption areas

- Must be licensed by RLD.
- CRA allows for both indoor and outdoor consumptions areas.
- Must follow local zoning and city/county code limits.
- May be limited to indoor spaces only.
- May be limited to 21 and over only.
- Cannabis products may be served and consumed by smoking, vaping, or ingesting.
- Alcohol cannot be sold or consumed in area.

# Consumption area application



**STATE OF NEW MEXICO**  
 MICHELLE LUJAN GRISHAM, GOVERNOR  
 Linda M. Trujillo, Superintendent  
 Clay Bailey, Deputy Superintendent

## CANNABIS CONSUMPTION AREA WITH ON-SITE RETAIL LICENSE APPLICATION

Annual Licensing Fee: \$2,500.00. All fees are non-refundable and must be paid via a cashier's check made out to the Cannabis Control Division. Forms not completed in their entirety will be deemed incomplete by the division.

Cannabis Consumption Area with On-Site Retail shall mean and include a licensed cannabis retail premise where cannabis may be purchased (for on-site consumption only), and, unless licensed by the Lynn and Erin Compassionate Use Act, consumed by persons 21 years of age and over.

A cannabis consumption area must be limited to one of the following uses:  
 1. Consumption of cannabis by smoking, vaping, and ingesting edible products; or  
 2. Consumption of cannabis edible products by ingestion only.

Smoking in a cannabis consumption area on a licensed premises shall be allowed only if the cannabis consumption area is in a designated smoking area or in a standalone building from which smoke does not infiltrate other indoor workplaces or other indoor public places where smoking is otherwise prohibited pursuant to the Dee Johnson Clean Indoor Air Act.

**SECTION 1 - APPLICANT INFORMATION:** Please provide the below business information for your cannabis business. \*\*\*THE APPLICANT MUST BE AN OWNER\*\*\*

Business Organizational Structure: (check one):

- Sole Proprietorship   
  Limited Liability Company   
  General Partnership  
 Corporation   
  Limited Partnership   
  Limited Liability Partnership

Name (individual or sole proprietor first and last; all other business types use legal business name)

Doing Business As (DBA)

Primary Business Address                      City                      State                      Zip Code

   

Mailing Address (if different than primary address) City                      State                      Zip Code

   

Business Website (if any)                      Email Address                      Phone Number

  

Applicant SS#, TIN, or FEIN                      Applicant Retail Establishment License Number

 

Days and Hours of Operation:

**NOTE: Attach a detailed premises plan, including entrance, exit, video cameras, fire safety, consumption area, and lighting.**

**SECTION 2 - PRIMARY CONTACT PERSON** This will be the contact person for any questions regarding the application.

Name                      Title                      Phone Number                      Email Address

   

**SECTION 3 - ATTESTATION/CERTIFICATION.**

- Applicant will adhere to cannabis consumption area requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, or division rules;
- Applicant will adhere to waste procedures for cannabis or cannabis products;
- Applicant will adhere to cannabis transport requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, or division rules;
- Applicant will adhere to security requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, or division rules, including requirements relating to safety and security procedures, security devices to be used, placement of security devices, personal safety, and crime prevention techniques;
- Applicant will adhere to quality assurance requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, or division rules;
- Applicant will adhere to applicable federal, state and local laws governing the protection of public health and the environment, including occupational health and safety, food safety, environmental impacts, natural resource protections, air quality, solid and hazardous waste management, and wastewater discharge;
- Applicant will ensure that qualified patients who are minors are accompanied by their primary caregiver at all times while on the premises of a cannabis consumption area;
- Applicant attest that any person that directly offers, sells, or serves cannabis or cannabis products shall hold a cannabis server permit;

Cannabis Control Division | 1209 Camino Carlos Rey Santa Fe, NM 87507 |  
 P.O. Box 25101 Santa Fe, NM 87504 | (505) 476-4500 | rid.state.nm.us

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# Safety Recommendations

- Avoid concomitant alcohol use.
- Plan not to drive, consider safe transportation option beforehand.
- Have a designated driver.
- Train budtenders to recognize impairment.
- \*Wait at least 4 - 6 hours after **smoking** cannabis containing THC before attempting to drive, bike, or perform any safety-sensitive activity.
- \*Wait at least 8 - 12 hours after **eating** or **drinking** products containing THC before attempting to drive, bike, or perform any safety-sensitive activity.

# Smoked vs. Eaten

- Smoked<sup>14</sup>
  - Rapid rise in blood THC = rapid onset of effects.
  - Rapid fall in blood THC after smoking ceases as THC is distributed into organs with higher blood supplies.
  - Effects can persist for **four** to **six** hours
- Eaten<sup>15</sup>
  - Absorption of THC is much slower and less predictable.
    - Variable absorption from the gut and significant first-pass metabolism in the liver
  - In the liver, THC converted to 11-hydroxy-THC.
    - 11-hydroxy-THC is both more **potent** and **longer-lasting** than THC.
  - Intoxicating effects are therefore delayed and can last up to **twelve** hours and be **more pronounced**.

# Alcohol vs. THC

- **Alcohol** - is a small, water-soluble molecule that crosses the blood brain barrier and quickly establishes an equilibrium concentration between what is in the blood and what is in the brain. The blood therefore offers a representation of how much alcohol is affecting the brain.
- **THC** - is a large fat-soluble molecule that is lipophilic and quickly crosses the blood brain barrier (BBB). High THC blood levels may indicate recent use, but after just 30 minutes, THC levels in the blood begin to drop precipitously (80 to 90% from peak levels). This drop occurs while at the same time intoxication in the brain is beginning to ramp up.<sup>16</sup>

# Take Away (blood tests)

- *Alcohol* testing *may* represent how impaired a person is.
- *THC* testing *does not* reflect how impaired someone may be.

# Lipophilic Leaching

- In chronic users, THC seeps back into the blood stream resulting in detectable THC in blood long after last use.<sup>17</sup>

# Urine vs. Blood vs. Breath (THC)

- Urine
  - Easy to use
  - Does not detect the psychoactive component (THC) and therefore cannot measure impairment.<sup>18</sup>
  - Detects THC metabolite THC-COOH which can linger in the body for weeks with no impairing effects.<sup>19</sup>
- Blood
  - Difficult to perform roadside
  - Detects THC, so may offer some indication of impairment
  - High levels of THC indicate recent use, while low levels may persist for many days<sup>20</sup>
- Breath
  - Difficult to capture THC in breath since it is moist and does not contain fats<sup>21</sup>
  - Presence of THC does not signify impairment

# Limits to Measuring Cannabis Impairment

- Cannabis can stay in the system for weeks and appear in roadside tests despite no longer causing impairment.
- Tracking cannabis impaired driving is difficult because drivers who use both alcohol and cannabis are cited for high blood alcohol concentration and rarely tested for additional substances.
- Limitations in drug detecting technology.
  - Can detect past drug use, but cannot indicate pattern of use
  - Cannot indicate impairment
  - Time is of the essence
- Lack of an agreed upon limit to determine impairment.
  - No national standard, but 5 ng/ml THC concentration has been adopted in many states as a metric to “infer impairment”

# Testing for THC<sup>22,23,24</sup>

- Breath
  - positive up to 3 hours
- Oral fluid/Saliva
  - positive for 24 – 48 hours (*after last use*)
  - Oral fluid THC concentrations are not adequate for predicting blood THC concentration
- Blood
  - positive up to 3 weeks
- Urine
  - Infrequent use (<2 times/week) - positive for 1 - 7 days
  - Moderate use (4 times/week) - positive for 7 - 15 days
  - Heavy use (daily) - positive for 15 – 30 days
  - Chronic Heavy use – positive for 30 – 60 days
- Hair
  - positive up to 90 days

# Detection Windows of Marijuana Drug Tests



<sup>1</sup> THC, the psychoactive ingredient in marijuana, is detected in breath, oral fluid, and blood. THC-COOH, a metabolite of THC, is detected in urine and hair.

<sup>2</sup> April 2014 National Highway Traffic Safety Administration's "Drugs and Human Performance Fact Sheet."

Marijuana detection window using breath: Lynch et al. Correlation of Breath and Blood  $\Delta^9$ -Tetrahydrocannabinol Concentrations and Release Kinetics Following Controlled Administration of Smoked Cannabis, Clinical Chemistry, July 2019.

Marijuana detection windows using oral fluid, blood, urine, or hair: <https://www.addictioncampuses.com/marijuana/detection-time/>

The length of time marijuana can be detected in drug tests. Photo: Hound Labs

# Additional Testing

- Drug Recognition Evaluation and Classification Program (DREs)
  - Officers trained on administering Multi-part assessment to look for impairment.
- All impairment is not the same.
  - DRE protocols geared more toward alcohol, depressants, anesthetics and less so toward cannabis

# What's Next?

- New Mexico 's Cannabis Regulation Act did not include specifics on DWI threshold.<sup>25</sup>
- State Legislature may amend the bill to establish a *per se* THC limit.<sup>25</sup>
- Blood THC > 2ng/ml, and possibly even THC > 5ng/ml, does not necessarily represent recent use of cannabis in frequent cannabis users.<sup>26</sup>
- Such limits may inadvertently criminalize drivers who use cannabis for medical purposes.<sup>27</sup>

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# Any questions?



# For More Information

- Website: [www.nmhealth.org/go/mcp](http://www.nmhealth.org/go/mcp)
- Phone: (505) 827-2321
- Email: [medical.cannabis@doh.nm.gov](mailto:medical.cannabis@doh.nm.gov)

**THANK YOU!!**