



Pennsylvania Independent Regulatory Review Commission  
July 15th, 2022

Chairperson George D. Bedwick  
Vice Chairperson John F. Mizner, Esq.  
Commissioner John J. Soroko, Esq.  
Commissioner Murray Ufberg, Esq.  
Commissioner Dennis A. Watson, Esq.

Dear Sirs,

Hello and thank you for considering my remarks before the rules and regulations are finalized. My name is Lauren Vrabel and I am a licensed pharmacist in Pennsylvania who has been practicing in the Pennsylvania Medical Marijuana Program since 2018. The following are my own opinions and not those of my employer. I would like to review section 1161a.25 regarding the requirement of medical professionals who operate within the dispensary.

Prior to the adoption of synchronous interaction, the original rules and regulations required a medical professional to be onsite in order for a dispensary to operate. It would have been impossible for one pharmacist to be responsible for more than one dispensary simultaneously. Act 44 allows for synchronous interaction, but does not explicitly state that one unique pharmacist is still required per dispensary. The Department believes this is enshrined in the Act and therefore does not need to be clarified. I am asking you to consider the importance of explicitly including language in the Final Regulation that requires a 1:1 ratio of medical professional to operational dispensary, whether in person or through synchronous interaction.

Because the Department has not made a public comment on the interpretation of this section prior to the Final Regulation, the number of medical professionals at dispensaries has declined across the state due to layoffs. Dispensaries are utilizing one medical professional to cover multiple stores, sacrificing the ability to spend actual time with patients because they are consumed by checking certifications.

When I spoke at the Senate's Law and Justice Committee in March 2022 regarding the Adult Use legislation, Senator Ward asked every panel except mine, "What will keep the Medical Program medical?" Given the opportunity to respond, I would have indicated that the medical professional at the dispensary is what keeps the program medical. When we are present, patients are able to ask questions that those without our degrees cannot answer. The layman is not trained to read and understand research articles and they are not trained to assess patients medically. Medical professionals not only appropriately assess and educate patients, but they also prevent adverse events from occurring.

During my time as a cannabis pharmacist I have interviewed many patients that have experienced adverse events. One specific event stands out in my memory. The patient was new to cannabis and desperate to find relief from her severe chronic pain caused by TMJ syndrome. She went to a dispensary and asked the employee at the register for the strongest product that will help her to sleep because her pain was keeping her up at night. Without asking any additional questions the employee recommended Rick Simpson Oil (RSO) and instructed her to ingest a very small amount, no larger than half the size of a grain of rice. RSO is a very sticky

and potent product that is prepared in an oral syringe. The patient admitted to having difficulty plunging it and dispensed more than she was directed to onto a cracker before consuming. She didn't think that a little bit more could be harmful. After 30 minutes she started to feel dizzy and her heart rate sped up. This caused anxiety which led to panic. Once the patient began to go in and out of consciousness, her husband called an ambulance because he was scared. The patient was extremely overmedicated after ingesting approximately 4 times the recommended starting dose. It took several days for her to return to baseline, she was extremely embarrassed and nervous to try cannabis again, and this entire scenario could have been avoided if the patient had been asked a few more questions or directed towards the medical professional.

The medical professionals in the program serve an important purpose; to prevent public harm. While the numbers continue to dwindle, it is unlikely that the Commonwealth's Medical Marijuana Program will be able to prevent public harm in an acceptable manner. I would like to thank the members of the Independent Regulatory Review Commission for your time and consideration.

Sincerely,

Dr. Lauren Vrabel, PharmD  
PA Pharmacists Advisory Board  
Representative of Doctors For Cannabis Regulation