

PRODUCT DETAILS

	Product 1	Product 2	Product 3	Product 4	Product 5
Type					
Cannabinoid & Terpene Content					
Dose					
Chemovar/Brand					
Price					
Amount					
Source					
Batch Number					
Product Safety					

Type: Specify the form of cannabis consumed:

- F = Flower (dried bud)
- C = Concentrate
- T = Tincture/Spray
- E = Edible/Drink
- TO = Topical

Cannabinoid & Terpene Content: Record the percentages of THC, CBD, CBN, and any known terpene profiles if available.

Dose: Note the suggested serving size and potency information.

Chemovar/Brand: Write down the name of the cannabis chemovar (strain) or variety and the brand, if available.

Price: Document the cost and amount purchased.

Source: Indicate where you purchased the products.

Batch Number: Include the batch number listed on the product.

Product Safety: Note if a Certificate of Analysis is available.

PATIENT CANNABIS DAILY LOG

CONSUMPTION DETAILS

Date:	Morning	Afternoon	Evening	Other	Other
Product #					
Amount					
Duration					
Therapeutic Effects					
Adverse Side Effects					
Reason for Use					
Mindset Before Consumption					
Companion					
Self-care					
Setting					
Activity					
Other					