

***DO NO HARM CLINIC Ltd.***

#9 -3151 LAKESHORE DR. SUITE # 421  
KELOWNA, BC. V1W 3S9

FAX: (888) 370-2033 Email: [donoharmclinic@gmail.com](mailto:donoharmclinic@gmail.com)

**INSTRUCTION LETTER**

You have indicated interest in Medical Marijuana (MM).  
The first step is determining if you have an Eligible Diagnosis (ED) for MM use.

If you wish to proceed complete the Clinic's Registration Form, Terms and Conditions and the Consent to Share Medical Records and fax these forms back to the clinic at **1-888-370-2033** or scan and email the forms back to [donoharmclinic@gmail.com](mailto:donoharmclinic@gmail.com).

Since 2009 the Do No Harm Clinic has reviewed thousands of medical records of potential MM patients. Although you may have a legitimate medical condition your issue needs to be formally diagnosed to be eligible for MM. This clinic does **not** diagnosis or prescribe but rather can provide a confirmation of a diagnosis based on the medical records you provide us. If you presently have in your possession some medical documentation proving your diagnosis please call me at 250-212-4899. Otherwise to obtain medical proof of your diagnosis it will be necessary to fax the consent to share medical records to your primary physician/ health care provider.

You will find the necessary paperwork attached to this email.

If you have not heard from me within 14 days after you have completed and faxed the forms back to the clinic, please email me.

The fee for this is \$100 and is not covered by Provincial Health Insurance.

If you have any questions please give me a call at [250-212-4899](tel:250-212-4899).

Regards,

Yvonne  
Clinic Director