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# CANNABIS-INDUCED PSYCHOSIS SYMPTOM CHECKLIST

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# A Parent's Guide to Recognizing the Signs and Taking Action

## How to Use This Checklist

Dear Parent,

If you're reading this, you're likely worried about changes you're seeing in your young adult. You may have been to the emergency room, seen multiple doctors, and heard frightening words like "psychotic break" or "schizophrenia."

This checklist will help you:

- ✓ **Identify the specific symptoms** your son or daughter is experiencing
- ✓ **Document the timeline** of when symptoms appeared
- ✓ **Distinguish Cannabis-Induced Psychosis (CIP)** from other conditions
- ✓ **Know what to do next**

**This is not a diagnostic tool.** Only qualified medical professionals can diagnose CIP.

However, this checklist will help you gather the critical information clinicians need to make an accurate diagnosis.

## What Is Cannabis-Induced Psychosis (CIP)?

Cannabis-Induced Psychosis is a condition where marijuana use triggers a psychotic episode that can look identical to schizophrenia. The key differences:

- CIP comes on suddenly (days to weeks)
- CIP typically starts after marijuana use begins or increases
- CIP is often reversible with proper treatment and abstinence

Unlike schizophrenia, which is typically a lifelong condition, CIP can be treated and resolved—IF caught early and treated properly.

### IMPORTANT

Research shows that 50% of untreated CIP cases progress to permanent psychotic illness. Early intervention matters.

The window for optimal treatment is typically 6-12 months from symptom onset.

## How to Complete This Checklist

Check any symptoms you've observed in your young adult

Note when each symptom first appeared

Be as specific as possible about frequency and severity

Bring this completed checklist to medical appointment

Keep it updated as symptoms change

**Remember:** You know your child better than anyone.

Trust what you're seeing.





PART 1

# Hallucinations & Perceptual Disturbances

Things that aren't real. Check any that apply:

**(Being Things)**

**Not there**

## Visual Hallucinations (Seeing Things)

## Seeing people who aren't there

Date first noticed:

Frequency:    ☐ Daily    ☐ Weekly    ☐ Occasionally

## Seeing shadows, shapes, or movements in peripheral vision

Date first noticed:

Frequency:    Daily    Weekly    Occasionally

## Seeing objects morph, breathe, or change

Date first noticed:

Frequency:    ☐ Daily    ☐ Weekly    ☐ Occasionally

## Seeing patterns, colors, or lights that aren't there

Date first noticed:

Frequency:    Daily    Weekly    Occasionally

## Auditory Hallucinations (Hearing Things)

## Hearing voices when no one is speaking

Date first noticed:

What the voices say:    Threatening    Commanding    Commentary  
                                         Conversational

## Hearing music, sounds, or noises others don't hear

Date first noticed:

## Hearing their name being called

Date first noticed:

## Other Sensory Hallucinations

Feeling things on or under their skin (tactile hallucinations)

Date first noticed:

Smelling odors others don't smell

Date first noticed:

Tasting things that aren't there

Date first noticed:

## NOTES SECTION:

Describe any hallucinations in detail:



PART 2:

# Paranoia & Delusional Thinking

**Delusions** are fixed false beliefs. **Paranoia** is the belief that others intend harm. Check any that apply:

## Paranoid Beliefs

**Believes people are following them, watching them, or tracking them**

Date first noticed:

Severity:    Mild concern    Moderate fear    Extreme terror

**Believes family members or friends are "against them" or plotting harm**

Date first noticed:

**Fears being poisoned or drugged**

Date first noticed:

**Believes their thoughts are being read or controlled**

Date first noticed:

**Believes hidden messages are being sent through TV, radio, or social media**

Date first noticed:

**Believes they're under surveillance (cameras, listening devices, etc.)**

Date first noticed:

## Other Delusional Beliefs

**Grandiose delusions (believes they have special powers, are famous, have a special mission)**

Date first noticed:



**Religious delusions (believes they're receiving messages from God, are a prophet, etc.)**

Date first noticed:

**Somatic delusions (believes something is wrong with their body that isn't)**

Date first noticed:

**Referential delusions (believes random events have personal significance)**

Date first noticed:

## Insight Level

How much awareness do they have that these beliefs might not be real?

**Full insight** - "I know this doesn't make sense, but I can't stop believing it"

**Partial insight** - "Maybe it's not real, but it feels real"

**No insight** - "This is absolutely real, and you're wrong"

## NOTES SECTION:

Describe any paranoid or delusional thinking:



PART 3:

# Behavioral & Personality Changes

Check any sudden changes in behavior or personality:

## **Social Withdrawal & Isolation**

### **Withdrawn from family and friends**

Date first noticed:

### **Stops attending social events, church, or activities they once enjoyed**

Date first noticed:

### **Isolates in their room for extended periods**

Date first noticed:

### **Refuses to leave the house**

Date first noticed:

## **Bizarre or Disorganized Behavior**

### **Talks to themselves or responds to voices**

Date first noticed:

### **Laughs or cries inappropriately**

Date first noticed:

### **Engages in unusual rituals or repetitive behaviors**

Date first noticed:

### **Wears inappropriate clothing (e.g., winter coat in summer)**

Date first noticed:

### **Neglects personal hygiene (stops bathing, brushing teeth, etc.)**

Date first noticed:

**Sleep schedule completely disrupted (awake all night, asleep all day)**

Date first noticed:

## **Aggression & Agitation**

**Increased irritability, anger, or aggression**

Date first noticed:

**Verbal outbursts or threatening language**

Date first noticed:

**Physical aggression toward others or property**

Date first noticed:

**Extreme agitation or restlessness**

Date first noticed:

## **Emotional Changes**

**Flat affect (shows little to no emotion)**

Date first noticed:

**Rapid mood swings (happy to angry to sad quickly)**

Date first noticed:

**Intense anxiety or panic attacks**

Date first noticed:

**Depression or suicidal thoughts**

Date first noticed:

## IMMEDIATE ACTION REQUIRED:

If your young adult is expressing suicidal thoughts, threatening violence, or is in immediate danger:

**CALL 911** or go to the nearest emergency room immediately.

**988 Suicide & Crisis Lifeline:** Call or text 988



PART 4:

# Cognitive & Communication Changes



Check any changes in thinking, speech, or cognitive function:

## Speech & Communication Problems

**Disorganized or incoherent speech (sentences don't make sense)**

Date first noticed:

**Jumping between unrelated topics (loose associations)**

Date first noticed:

**Making up words (neologisms)**

Date first noticed:

**Speaking very little or not at all (alogia)**

Date first noticed:

**Repeating words or phrases over and over**

Date first noticed:

## Concentration & Memory Issues

**Can't focus or concentrate**

Date first noticed:

**Difficulty following conversations**

Date first noticed:

**Memory problems (forgetting recent events, appointments, etc.)**

Date first noticed:

**Confusion about time, place, or people**

Date first noticed:

## Thought Process Problems

**Thoughts racing or mind feeling "flooded"**

Date first noticed:

**Thoughts stopping mid-sentence (thought blocking)**

Date first noticed:

**Belief that thoughts are being inserted or removed from their mind**

Date first noticed:

**Difficulty making decisions or planning**

Date first noticed:

## NOTES SECTION:

Describe any cognitive or communication changes:



PART 5:  
**Cannabis Use  
History**

**This section is critical for diagnosis.** Be as specific as possible.

## When Did Cannabis Use Begin?

Age when first used marijuana:

Never used

Occasional use (few times a year)

Regular use (monthly)

Frequent use (weekly)

Daily or near-daily use

Date regular use began:

## Type of Cannabis Products Used

Check all that apply:

**Traditional marijuana/flower** (smoking joints, blunts, pipes)

**Vape cartridges** (oil pens, THC vapes)

**Concentrates/dabs** (wax, shatter, budder)

**Edibles** (gummies, brownies, etc.)

**Synthetic cannabinoids** (K2, Spice, etc.)

**Other:**

**Most commonly used product:**

## Timeline: Cannabis Use and Symptom Onset

When did you first notice symptoms appearing?

Date:

**How long after cannabis use began or increased did symptoms appear?**

Within days

Within weeks

Within 1-3 months

Within 3-6 months

More than 6 months

Not sure

**Has your young adult stopped using cannabis?**

Yes, completely abstinent since:

No, still using

Reduced use but not stopped

Don't know

**If they stopped, did symptoms improve?**

Yes, significantly

Yes, somewhat

No change

Symptoms worsened

Not sure

## Other Substance Use

Check any other substances used:

Alcohol

Prescription medications (not as prescribed)

Cocaine

Methamphetamine

Hallucinogens (LSD, mushrooms)

Other:

## NOTES SECTION:

Additional details about cannabis use:





PART 6 -  
**Functional  
Impact**

Check all areas where functioning has declined:

## Education

### **Dropped out of school or college**

Date:

### **Failing grades or academic decline**

Date first noticed:

### **Stopped attending classes**

Date first noticed:

### **Unable to complete assignments or focus on schoolwork**

Date first noticed:

## Employment

### **Lost job**

Date:

### **Unable to maintain employment**

Date first noticed:

### **Frequent absences or performance issues**

Date first noticed:

### **Quit working without explanation**

Date:

## Relationships

### **Withdrawn from family**

Date first noticed:

### **Lost friendships**

Date first noticed:

### **Conflict with family members**

Date first noticed:

### **Romantic relationship problems or breakup**

Date:

## Self-Care & Daily Living

### **Difficulty performing basic hygiene**

Date first noticed:

### **Can't manage daily tasks (cooking, cleaning, laundry)**

Date first noticed:

### **Sleep/wake cycle completely disrupted**

Date first noticed:

### **Eating habits drastically changed (not eating or binge eating)**

Date first noticed:

## Living Situation

Current living situation:

Living independently

Living with parents/family

Homeless or unstable housing

Other:

### **Are they able to live independently?**

Yes, fully independent

Partially (needs some support)

No, requires full support

## NOTES SECTION:

Describe impact on daily functioning:



PART 7:

# Scoring & Interpretation

# Understanding Your Results

Count the number of symptoms checked in each section:

**PART 1 - Hallucinations:** \_\_\_\_\_ symptoms checked

**PART 2 - Paranoia & Delusions:** \_\_\_\_\_ symptoms checked

**PART 3 - Behavioral Changes:** \_\_\_\_\_ symptoms checked

**PART 4 - Cognitive Changes:** \_\_\_\_\_ symptoms checked

**PART 5 - Cannabis Use:** Yes \_\_\_\_\_ No (recent or current use) \_\_\_\_\_

**PART 6 - Functional Impact:** \_\_\_\_\_ areas impacted

## URGENT - Take immediate action if:

You checked symptoms in 3 or more sections

- Symptoms appeared shortly after marijuana use began or increased
- Symptoms have been present for less than 6 months
- Functional abilities are significantly impaired
- Previous treatment hasn't addressed marijuana use

→ **Call Sanctuary Clinics for a consultation: (850) 828-0440**



# IMPORTANT - Schedule evaluation within 1 month if:

- You checked symptoms in 1-2 sections
- You're concerned but not yet in crisis
- You're seeing early warning signs
- You want a professional assessment

→ Register for Ask The Specialist Q&A to learn more

## Why Early Intervention Matters

**Research shows that 50% of untreated CIP cases progress to schizophrenia.**

**BUT - there is a window of 6-12 months where proper intervention can prevent this progression.**

The earlier you act, the better the outcomes.



PART 8:  
**What To  
Do Next**

## Your Next Steps

# Step 1: Document Everything

Keep this checklist updated and add notes about:

- When symptoms worsen or improve
- Any connection to marijuana use
- Responses to any treatments tried
- Emergency room visits or hospitalizations
- This timeline is crucial for accurate diagnosis.

# Step 2: Have the Conversation

If you haven't already, talk to your young adult about what you're observing.

## Do say:

- "I'm worried about the changes I'm seeing in you"
- "I love you and I'm scared for you"
- "I've learned that today's marijuana can affect the brain in ways we didn't know"

## Don't say:

- "You're crazy"
- "Just stop using drugs"
- "This is your fault"

# Step 3: Seek Specialized Help

**Not all treatment is created equal.** Cannabis-Induced Psychosis requires:

- ✓ **Integrated treatment** (addressing addiction AND psychosis simultaneously)
- ✓ **Adequate time** (60-90 days minimum for brain healing)
- ✓ **Specialized expertise** in substance-induced psychotic disorders
- ✓ **Family involvement** in the treatment process
- ✓ **Holistic approach** addressing mind, body, and spirit

**Standard rehabs and psychiatric hospitals are not equipped to treat CIP effectively.**

# Step 4: Connect with Sanctuary Clinics

**We specialize in Cannabis-Induced Psychosis.**

## Free Resources:

### Ask The Specialist Q&A

Every Wednesday at 11am ET

Get your questions answered live by our clinical team

**Register:** [SanctuaryClinics.com/ask-specialist](https://SanctuaryClinics.com/ask-specialist)

## Free Consultation

Discuss your child's specific situation

Call: **(850) 828-0440**

## 5-Day Video Series

Complete education on CIP, diagnosis, and treatment

**Get it:** [SanctuaryClinics.com/cip-videos](https://SanctuaryClinics.com/cip-videos)

## Questions to Ask Any Treatment Program

Before choosing a program for your child, ask:

Do you specialize in Cannabis-Induced Psychosis?

Do you treat addiction and psychosis simultaneously?

What is your typical program length? (Look for 60-90 days minimum)

What is your staff-to-patient ratio?

Do you use evidence-based neuroscience (brain mapping, neurofeedback)?

How do you involve family in treatment?

What does aftercare look like?

What are your outcomes for CIP specifically?



PART 9:

# Understanding Cip



# Cannabis-Induced Psychosis: What Parents Need to Know

## Why Is This Happening Now?

**Today's marijuana is not the marijuana of previous generations.**

**THC levels have increased dramatically:**

- 1990s: 2-3% THC
- 2000s: 4-5% THC
- Today: 20-30% THC average
- Vape cartridges: 70-90% THC
- Concentrates/dabs: 80-95% THC

**This is 10-30x more potent** than the marijuana parents may remember.

## How Does Marijuana Cause Psychosis?

THC (the psychoactive compound in marijuana) binds to cannabinoid receptors in the brain. At high concentrations:

- Brain chemistry is disrupted
- The brain can't distinguish reality from hallucination
- Paranoid and delusional thinking emerges
- Normal functioning breaks down

For vulnerable individuals, this can trigger a full psychotic break.

## Who Is at Risk?

### **Risk factors for CIP include:**

- ✓ Starting marijuana use in teens/early 20s (developing brain)
- ✓ Using high-potency products (vapes, concentrates, dabs)
- ✓ Daily or near-daily use
- ✓ Family history of mental illness
- ✓ History of trauma
- ✓ Male gender (slightly higher risk)

**But CIP can happen to anyone, even occasional users.**

## Can CIP Be Reversed?

Yes - IF:

- ✓ It's diagnosed correctly
- ✓ Treatment begins early (within 6-12 months)
- ✓ Treatment addresses both addiction and psychosis
- ✓ The young adult achieves sustained abstinence from marijuana
- ✓ Integrated treatment lasts long enough for brain healing (60-90 days minimum)

**Without proper treatment, 50% of CIP cases progress to permanent schizophrenia.**

**With proper treatment, we've seen hundreds of young adults achieve complete recovery.**

## What Makes Sanctuary Different?

At Sanctuary Clinics, we treat Cannabis-Induced Psychosis differently because we understand it requires:



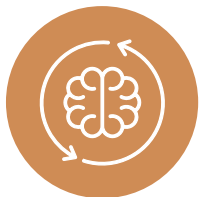
### 1. Truly Integrated Care

We treat the addiction, the psychosis, the trauma, and the spiritual crisis - all at once, with one coordinated team.



### 2. Adequate Time for Brain Healing

Our programs run 60-90 days because that's how long it takes for a brain recovering from cannabis psychosis to genuinely heal.



### 3. State-of-the-Art Neuroscience

We use brain mapping and neurofeedback to see what's happening in your child's brain and help retrain it.



### 4. Christ-Centered Community

Healing doesn't happen in isolation. Our staff lives on campus, sharing life with patients in authentic Christian community.



### 5. Family Involvement

Your child didn't get here alone. We involve families in treatment because lasting recovery happens in restored relationships.

Learn more: [SanctuaryClinics.com](https://www.SanctuaryClinics.com)

Call for consultation: (850) 828-0440



You Don't Have  
To Figure This  
Out Alone

# ASK THE SPECIALIST

## Live Q&A About Cannabis-Induced Psychosis

Every Thursday's • 7pm ET

Our clinical team answers YOUR questions:

- "Is it too late for my child?"
- "How do I know if it's really CIP?"
- "Will insurance cover treatment?"
- "What if they refuse help?"

**FREE • NO OBLIGATION**

Register: [SanctuaryClinics.com/ask-specialist](https://SanctuaryClinics.com/ask-specialist)

## SCHEDULE A FREE CONSULTATION

Call: **(850) 828-0440**

Discuss your child's specific situation with our admissions team.



## SANCTUARY CLINICS

Christ-Centered Treatment for Cannabis-Induced Psychosis

984 Boston Highway  
Monticello, FL 32344

(850) 828-0440  
SanctuaryClinics.com

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*Your child's story doesn't have to end with "schizophrenia."  
Cannabis-Induced Psychosis is treatable when you get  
the right diagnosis and the right care.*

**There is hope..**