



## 0. Lozenge Agreement

### INSTRUCTIONS FOR LOZENGE USE

For those who have completed intensive in-office KAP sessions with us, we offer the option of a monthly prescription for ketamine sublingual lozenges to be used at home under close supervision. This protocol greatly reduces costs, and may help in maintaining benefit from your treatment.

Here are our instructions for all at-home use:

#### **Scheduling:**

- 1) Please discuss how often you will be using ketamine at home with your Healing Realms providers, as there are several considerations in choosing the frequency of use that will be best and safest for you. Generally, people start with 2 sessions per week and move toward a maintenance regimen of once every 1-3 months. (Eventually, some may not require ketamine at all, and might use ketamine as a transitional path toward independence from medication.)
- 2) Please schedule the lozenge administrations in advance. (It is better to stick to a regular dosing schedule, rather than use ketamine in response to emotional distress or the day's events.)
- 3) Set aside at least two hours for each session.

#### **Set:**

- 1) Set intentions for your inner work before dosing each time.
- 2) Cultivate a contemplative state of mind with your preferred practices (e.g. meditation, progressive muscle relaxation, deep breathing, journaling, ritual bath).
- 3) Please follow all the same physical health preparation instructions (avoiding mitigators, fasting, restrict fluids) as in our Preparation and Aftercare Guide.

#### **Setting:**

- 1) Choose a quiet, safe, and comfortable place to recline, where you will not be disturbed for a few hours. Arrange blankets and pillows as desired. Turn off your phone and minimize all potential distractions.
- 2) Use eye shades to encourage an internal focus.
- 3) Select a music playlist that will facilitate a relaxed, expansive state of mind (preferably without words); ask us if you would like playlist suggestions.

(You can also find our music and meditation selections here, including a playlist designed for lozenge sessions:  
<https://www.healingrealmscenter.com/music.html>)

4) Ensure you have water on hand and food prepared to ground your physical being upon your return.

## **Sitter:**

1) Please arrange for a support person/sitter to watch over your physical safety while under the influence, and to ensure you do not drive that day or move about before the effects have passed. (They need not stay in the room at all times, but be within earshot, and should check in on you periodically)

2) You may enlist your sitter to help time the session, and to adjust the music, temperature, or lighting if needed. They may provide a buffer against any possible distractions or interferences (such as visitors at the door or device notifications), and discourage you from messaging/calling people while under the influence.

3) Clarify with your sitter that they are not providing medical support or therapy (even if they do such work professionally), and should be free from ulterior agendas for your interior work. Please provide them with numbers to call for assistance if there are medical concerns, or if you desire mental health support.

You may direct them to the Zendo Project's excellent information about the role of a sitter during difficult psychedelic experiences: <http://www.zendoproject.org/psychedelic-harm-reduction-articles/how-to-work-with-difficult-psychedelic-experiences-2/>

## **Session:**

1) Start with one lozenge (or dosage as determined by your prescriber). Hold it in your mouth while you are sitting upright, allowing it to dissolve under your tongue.

2) Hold your saliva for 10-15 minutes, moving the fluid around to allow for more surface area coverage. (You may ask your sitter to let you know when this time has elapsed).

3) After swallowing, you may recline, and continue deep breathing/relaxation techniques to help you to stay present, allowing for a shift in your awareness after about 15-20 minutes.

4) If your prescription is for more than one lozenge per session, you may dissolve a second tablet before 30 minutes has elapsed. This will moderately heighten the effect, and prolong the experience. (If this is tolerated well, we may consider dosing both all at the same time for future sessions. Clarify your dose with your providers.)

5) Remember that this is your time to be with yourself in a deeper way than everyday life permits. Recall your intentions, and also hold them lightly, allowing and accepting whatever is present for you in this moment.

6) As the medicine wears off, allow for another 30 minutes of reintegration from this experience. Continue to rest, and have your sitter check on you, offer water, or attend to any other needs.

7) Be slow in re-engaging with your usual patterns; defer phone and media use for a few hours. Consider journaling about your experience. You may also refer to our Integration Tips handout for more guidance on getting the most benefit out of your treatment.

## **Safety:**

1) Please stay in a reclining position while you are under the influence. Ask your sitter to assist you if you need to use the restroom early in the session, and to offer a hand when you first rise. (Rise with caution: slowly sit up, with your feet touching the floor. Once the lightheadedness passes, try standing up, and wait for the lightheadedness to pass. Once you feel more steady, you may take steps forward.)

2) Please do not drive a motor vehicle or operate heavy machinery for the rest of the day following your dosing. Confirm

with your sitter that this is not advised, and to discourage you from doing so if need be.

3) Consider yourself to be in a phase of discovery and vulnerability for the rest of the day after your session. We advise against making major life decisions, signing contracts, starting or breaking off a relationship, spending substantial amounts of money, or engaging in sexual contact with a new partner during this period of time.

## **Storage:**

1) Please keep your ketamine supply in a secure location, and be cautious about who you inform about its presence in your home. We will not be able to replace lost or misplaced lozenges.

2) Your prescription is not to be shared with anyone else. Please help us protect the integrity of our practice by exercising discretion and care in this regard.

3) Please keep lozenges out of the reach of children and pets, as their fruit flavoring can be appealing to these vulnerable beings.

## **Summary:**

Please complete the Lozenge Session Log for each lozenge experience within 2 days of your journey, and send it securely to our admin (Tiena Morgan) via the Theranest Client Portal. We require these logs in order to effectively monitor your progress. We will not refill prescriptions without receiving these logs after each experience.

Please schedule a longer check-in after your first month of lozenge use via phone or Zoom. An hourly appointment with a provider at Healing Realms is required each month for us to safely provide ketamine for your use at home.

Please let us know if you have any questions about these instructions, and thank you for working with us!

## **Informed Consent for Ketamine Lozenge Treatment**

By signing this form, I acknowledge and agree to the following:

1. I have received and reviewed the Instructions for Lozenge Use.
2. I have had the opportunity to question one of the providers involved in my ketamine therapy and have received satisfactory answers.
3. I fully understand that the ketamine sessions can result in a profound change in mental state and may result in unusual psychological and physiological effects.
4. I understand that I am to have nothing in my stomach 4 hours before my ketamine lozenge session.
5. I agree not to engage in any driving or operation of machinery all day following the ketamine lozenge session.
6. I understand that I am to stay in a reclining or seated position while under the influence of the medicine, and to ask for assistance with movement during the session.
7. I agree to have a support person present to watch over my physical safety while under the influence of the medicine.
8. I agree to abide by the dosing and scheduling instructions given by my providers.
9. I understand that I am to keep my ketamine supply in a secure location, that this prescription is not to be shared with anyone, and that lost or misplaced lozenges will not be replaced.
10. I understand that should my providers have any concern about the safety of my at-home lozenge use, they reserve the right to terminate this prescription and refer me to more appropriate care.

11. I agree to send Lozenge Session Logs via the Client Portal following each lozenge session to share with my providers about the outcome of my experience.

12. I understand that an ongoing prescription is contingent on monthly check-in meetings with one of the providers in this practice.

13. I understand the risks and benefits of ketamine therapy, and I freely give my consent to participate in ketamine therapy outlined in the KAP Information sheet, under the conditions outlined.