



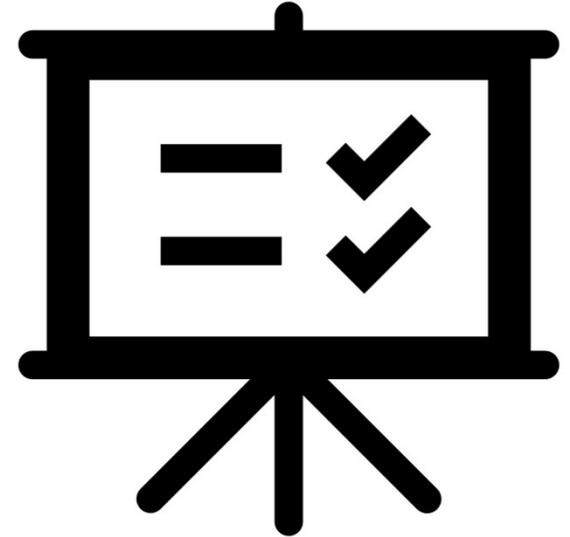
MEDICAL CANNABIS REGISTRY (MCR)

Medical Cannabis Consultant Training

Course Objectives

After this training you will be able to:

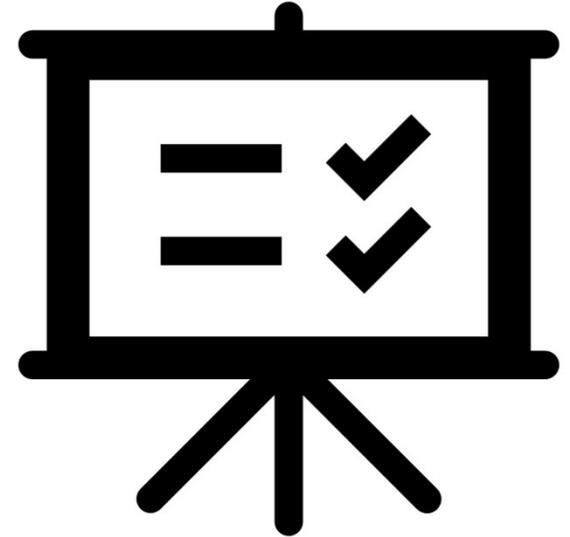
- Medical Cannabis Registry Login / Register
- Multiple Registration Select Portal
- View Personal Record
- Accessing Store / Multiple Stores
- Inactive and Reactivate Account
- View Message Notifications
- Verify Patient / DP
- Consultant Certification Expires / Renews



Course Objectives

After this training you will be able to:

- Recognition Card Actions
- Create Recognition Cards
- Replace Recognition Cards
- Renew Recognition Cards
- Correcting Recognition Cards
- Resources



Medical Cannabis Registry (MCR) Login/Register

MCR Login/Register

You must first add the MCR by clicking "Add A New Service".

Use the code **MCR2025** or search the term "cannabis". If you need further instruction, see the SAW training guide on our [website](#).

- When you are assisting Medical Cannabis patients, you must access MCR through your own SAW account.
- Navigate to the Main SAW screen to access the Medical Cannabis Registry and click "Access Now".
- SAW Link: <https://secureaccess.wa.gov/>

SecureAccess Washington

ACCOUNT GET HELP Español LOGOUT

Click here to add another contact method to your account to avoid losing access to your services.

Welcome to Secure Access Washington! To start using services from agencies around Washington, choose one from your list below or click the 'Add A New Service' button. [To see open job postings for the SAW Team, go to our jobs page.](#)

Add A New Service

Medical Cannabis Registry provided by Department of Health **Access Now**

The DOH maintains a medical cannabis authorization data system that provides recognition cards to qualifying patients and designated providers, allowing them to take advantage of legal protections offered by the law.

[Contact the help desk for MCR](#) [Remove from my list](#)

Services From: ALL OF WASHINGTON

WASHINGTON STATE AGENCIES

MCR Login/Register

You will be prompted to select the appropriate MFA type (either by email, phone call, or text).

1 — 2 — 3 — 4
Choose Method Enter Code Remember Device Access Service

Multi-Factor Authentication (MFA)

This service requires additional verification beyond username and password to prevent fraud and identity theft. You will need to enter a verification code.

Choose Method

How would you like to receive your verification code?

 *****.vv@gmail.com**
Receive the code in an email and enter it on the next screen.

1 — 2 — 3 — 4
Choose Method Enter Code Remember Device Access Service

Multi-Factor Authentication (MFA)

Enter Code

Please enter the code sent to ***ger@gmail.com

3612-104244

[Resend Code](#)

[Choose another method](#)

If you do not receive an email with the authentication code:

- Check your junk/spam folder. If the email is not there, try these troubleshooting steps:
 - Check any other folders that may have received the email.
 - Refresh/update your email application and inbox.
 - Add help@secureaccess.wa.gov as an email contact inside of your email application.
- Click Resend Code. You can click Resend Code every two minutes, but do not try this more than three times. If you do not receive the resent code:
 - You may need to contact your email service provider to allow emails from help@secureaccess.wa.gov. If you have setup an additional email or mobile number, you can click Choose another method to select a different option for receiving a code.

MCR Login/Register

- The “Remember Device” option will appear.
 - Do not click “Yes”
 - Click “Submit.”

Multi-Factor Authentication (MFA)

Remember Device?

Choose to remember this device to reduce how often you are required to enter a verification code.

If the device you are using is shared or public, we recommend you do not remember this device.

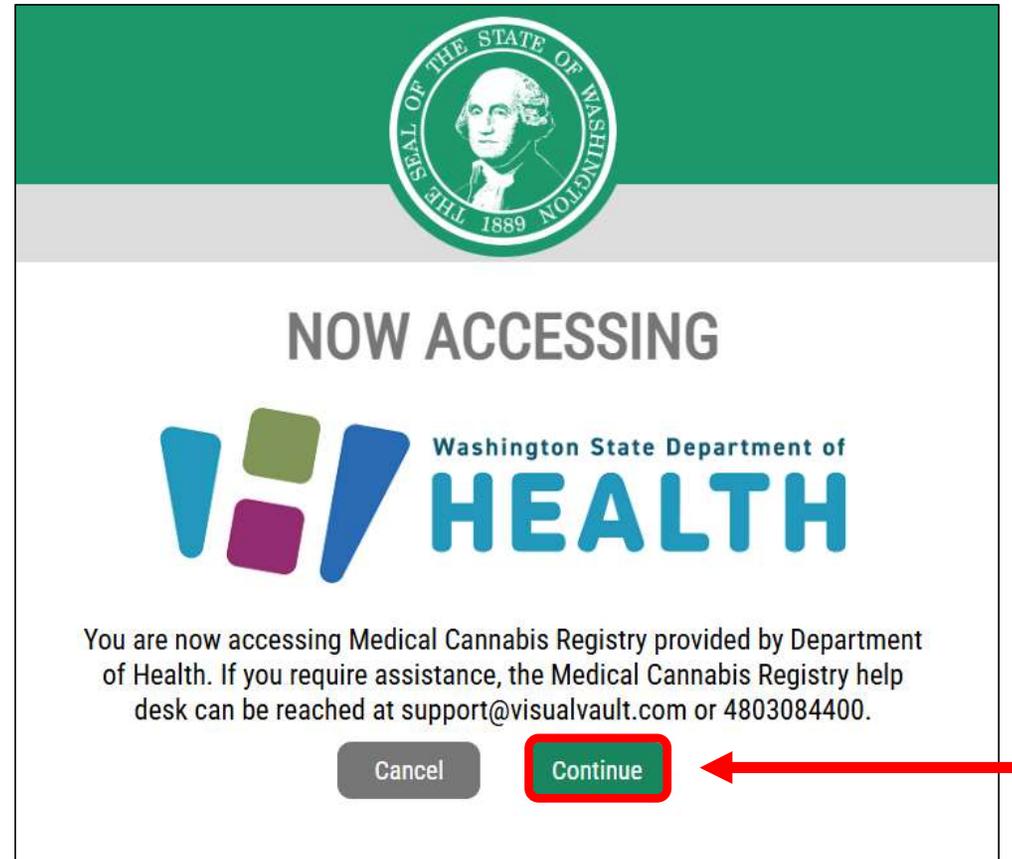
Yes, remember my device

Submit



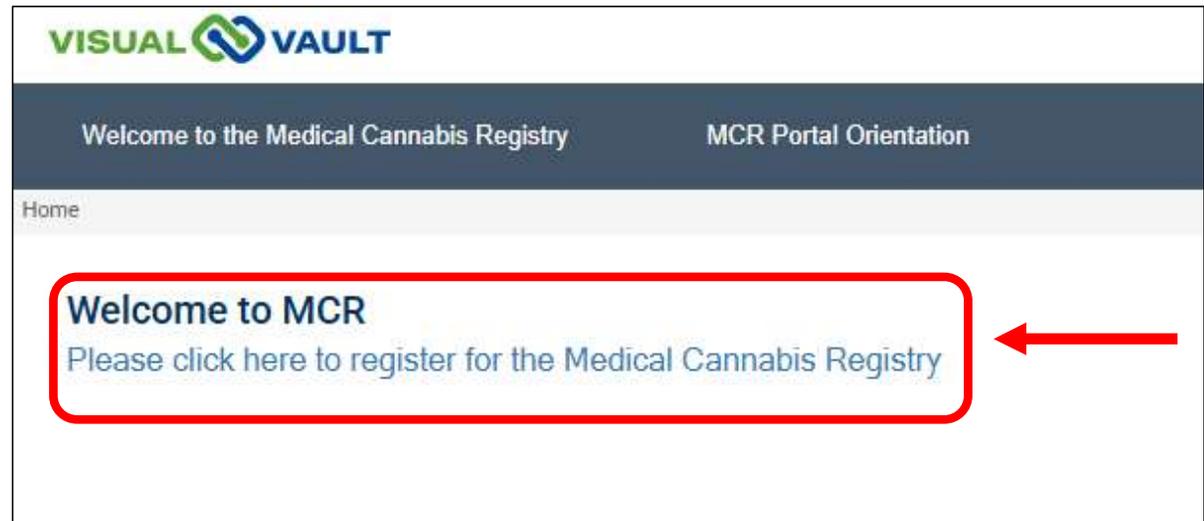
MCR Login/Register

- Click “Continue” to be directed to the Medical Cannabis Registry.



MCR Login/Register

- First-time registration will have a blank portal screen as shown here.
 - Click the link to register.
- If you are already registered, MCR will load your Retail Homepage.



MCR Login/Register

- Select “Retail Employee”

Washington State Department of Health

Washington State
AUTHORIZATION DATABASE
MEDICAL CANNABIS

Welcome to MCR Registration

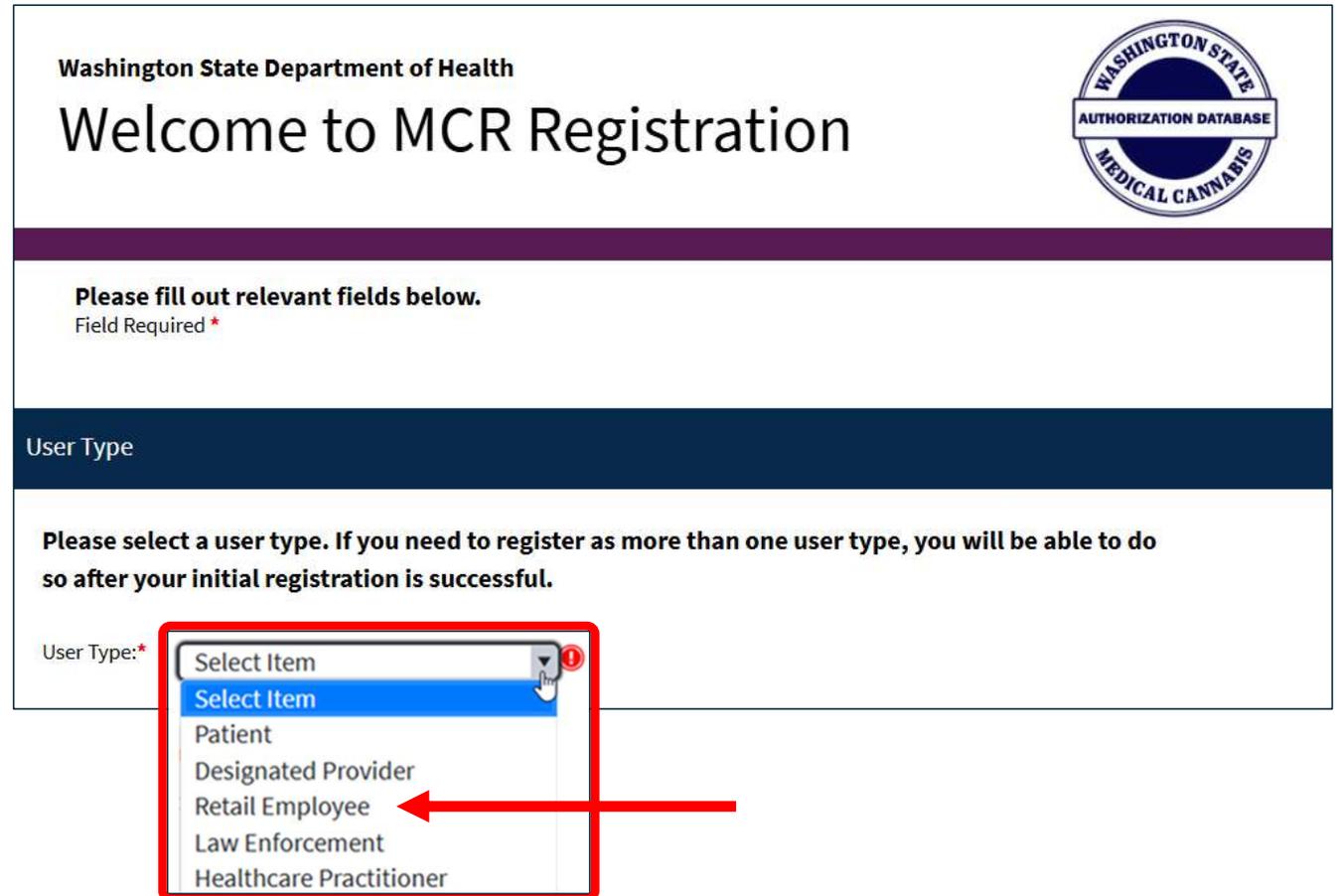
Please fill out relevant fields below.
Field Required *

User Type

Please select a user type. If you need to register as more than one user type, you will be able to do so after your initial registration is successful.

User Type:*

- Select Item
- Select Item
- Patient
- Designated Provider
- Retail Employee
- Law Enforcement
- Healthcare Practitioner



MCR Login/Register

- Enter:
 - First and Last name,
 - Email Address,
 - DOB,
 - And last 4 of your SSN
- The “Consultant Certification Number” is optional.
 - Only enter it if you have received your Cannabis Consultant Certification.

The screenshot shows a registration form with two main sections: "User Type" and "Individual Information".

User Type

Please select a user type. If you need to register as more than one user type, you will be able to do so after your initial registration is successful.

User Type:*

Individual Information

First Name:* Last Name:*

Email Address:*

Date of Birth:*

Last 4 of SSN:*

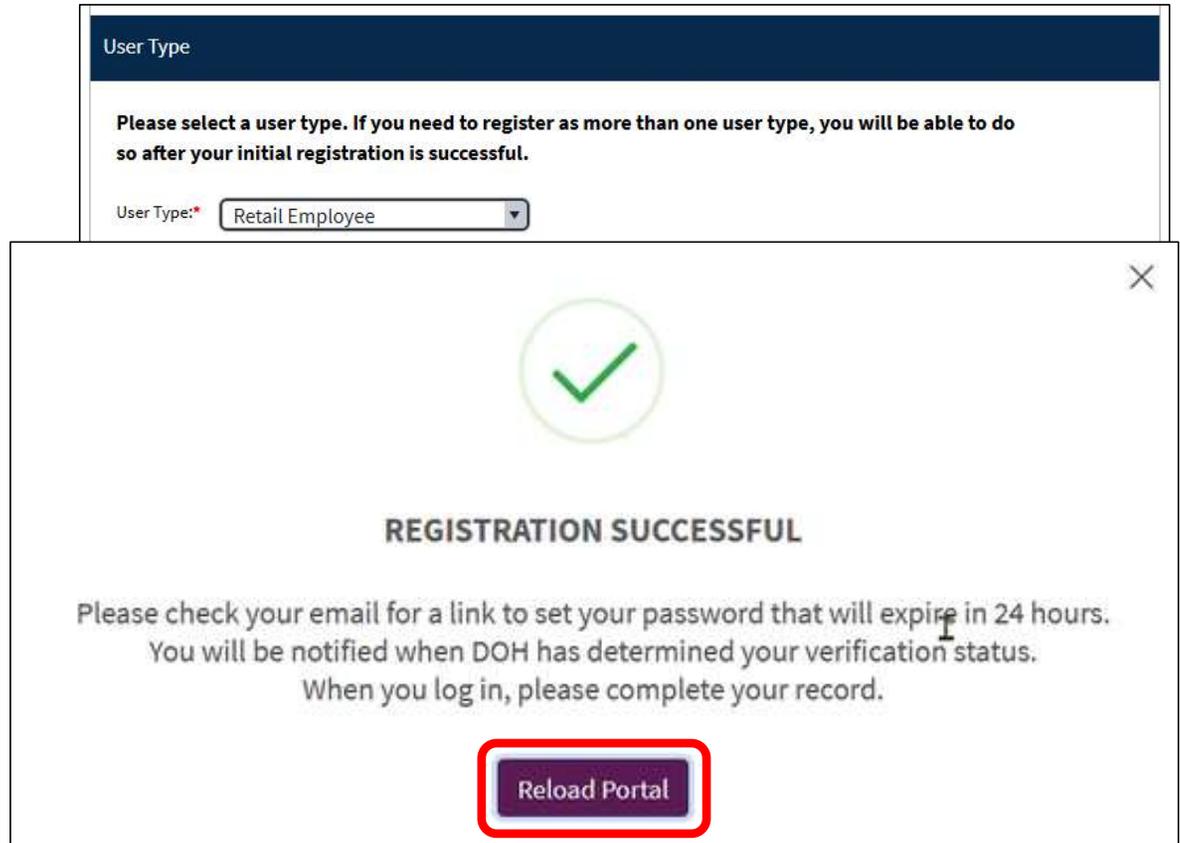
Please enter this value if you are an active certified Medical Cannabis Consultant.

Consultant Certification Number:

Red arrows point to the Last Name, Email Address, Date of Birth, Last 4 of SSN, and Consultant Certification Number fields. The Register button is highlighted with a red box.

MCR Login/Register

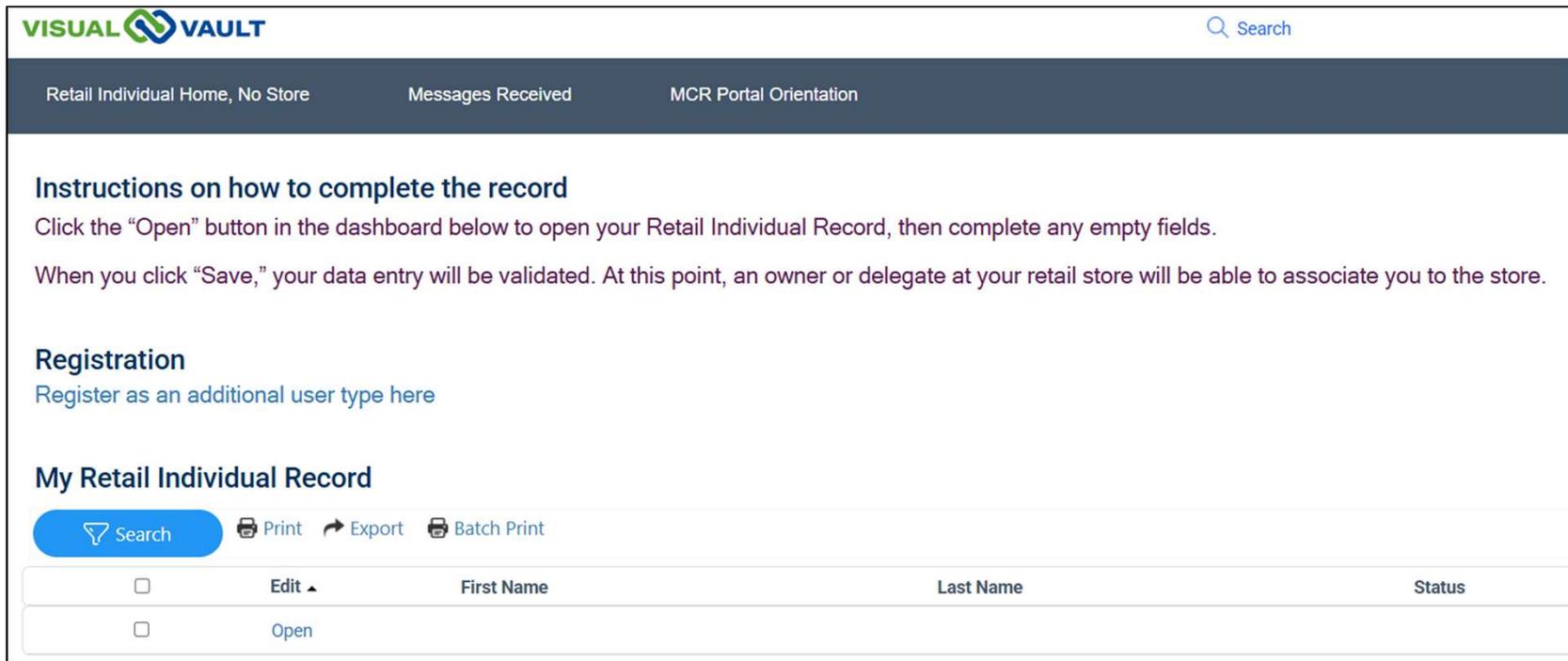
- The “Registration Successful” pop-up will appear.
 - Click “Reload Portal” to access MCR.



The image shows two overlapping windows from the MCR system. The top window is titled 'User Type' and contains the following text: 'Please select a user type. If you need to register as more than one user type, you will be able to do so after your initial registration is successful.' Below this text is a dropdown menu labeled 'User Type:*' with 'Retail Employee' selected. The bottom window is a 'Registration Successful' pop-up. It features a green checkmark icon, the text 'REGISTRATION SUCCESSFUL', and instructions: 'Please check your email for a link to set your password that will expire in 24 hours. You will be notified when DOH has determined your verification status. When you log in, please complete your record.' At the bottom of this pop-up is a button labeled 'Reload Portal', which is highlighted with a red rectangular border.

MCR Login/Register

Retail Homepage



The screenshot shows the Visual Vault MCR Retail Homepage. At the top left is the Visual Vault logo. At the top right is a search bar with a magnifying glass icon and the text "Search". Below the logo and search bar is a dark blue navigation bar with three items: "Retail Individual Home, No Store", "Messages Received", and "MCR Portal Orientation".

The main content area has a heading "Instructions on how to complete the record" followed by two paragraphs of text. Below this is a "Registration" section with a link "Register as an additional user type here".

The "My Retail Individual Record" section features a toolbar with a search button, a print icon, an export icon, and a batch print icon. Below the toolbar is a table with two rows and four columns: "First Name", "Last Name", and "Status". The first row has an "Edit" button with a dropdown arrow, and the second row has an "Open" button.

	First Name	Last Name	Status
<input type="checkbox"/> Edit ▾			
<input type="checkbox"/> Open			

MCR Login/Register

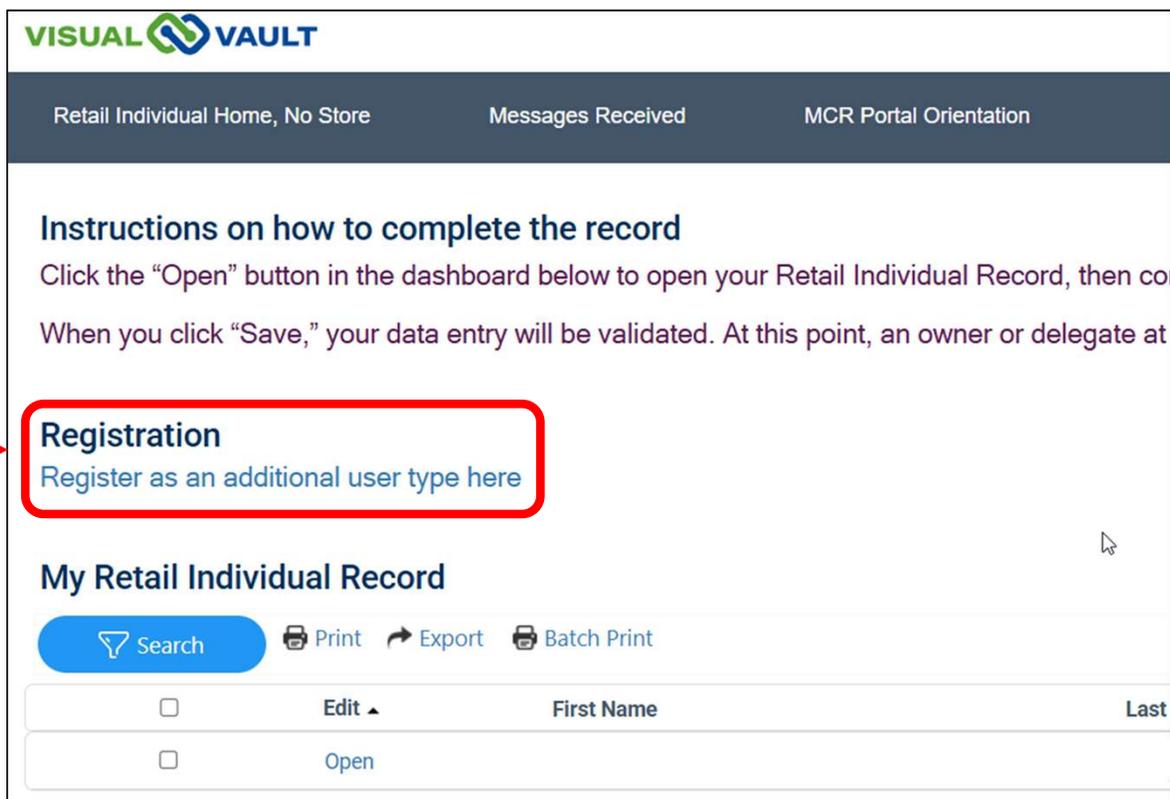
- MCR will send registration confirmation to your email.
- Access your email and locate the confirmation.
- This email also includes a link to SAW for easy access.



Multiple Registrations Select Portal

Multiple Registration/Select Portal

- From the Retail Homepage, select “Register as an additional user type here”.
- You do not need to Re-Register to become a Budtender or Owner/Delegate.



VISUAL VAULT

Retail Individual Home, No Store Messages Received MCR Portal Orientation

Instructions on how to complete the record

Click the “Open” button in the dashboard below to open your Retail Individual Record, then co
When you click “Save,” your data entry will be validated. At this point, an owner or delegate at

Registration
Register as an additional user type here

My Retail Individual Record

Search Print Export Batch Print

	Edit ▲	First Name	Last
<input type="checkbox"/>	Open		

Multiple Registration/Select Portal

- Select the appropriate user type and follow the same registration steps as previously outlined in this course.
- Once created, you will receive another confirmation email confirming that the registration.

Washington State Department of Health

Washington State
AUTHORIZATION DATABASE
MEDICAL CANNABIS

Welcome to MCR Registration

Please fill out relevant fields below.
Field Required *

User Type

Please select a user type. If you need to register as more than one user type, you will be able to do so after your initial registration is successful.

User Type: *

- Select Item
- Patient
- Designated Provider
- Retail Employee
- Law Enforcement
- Healthcare Practitioner

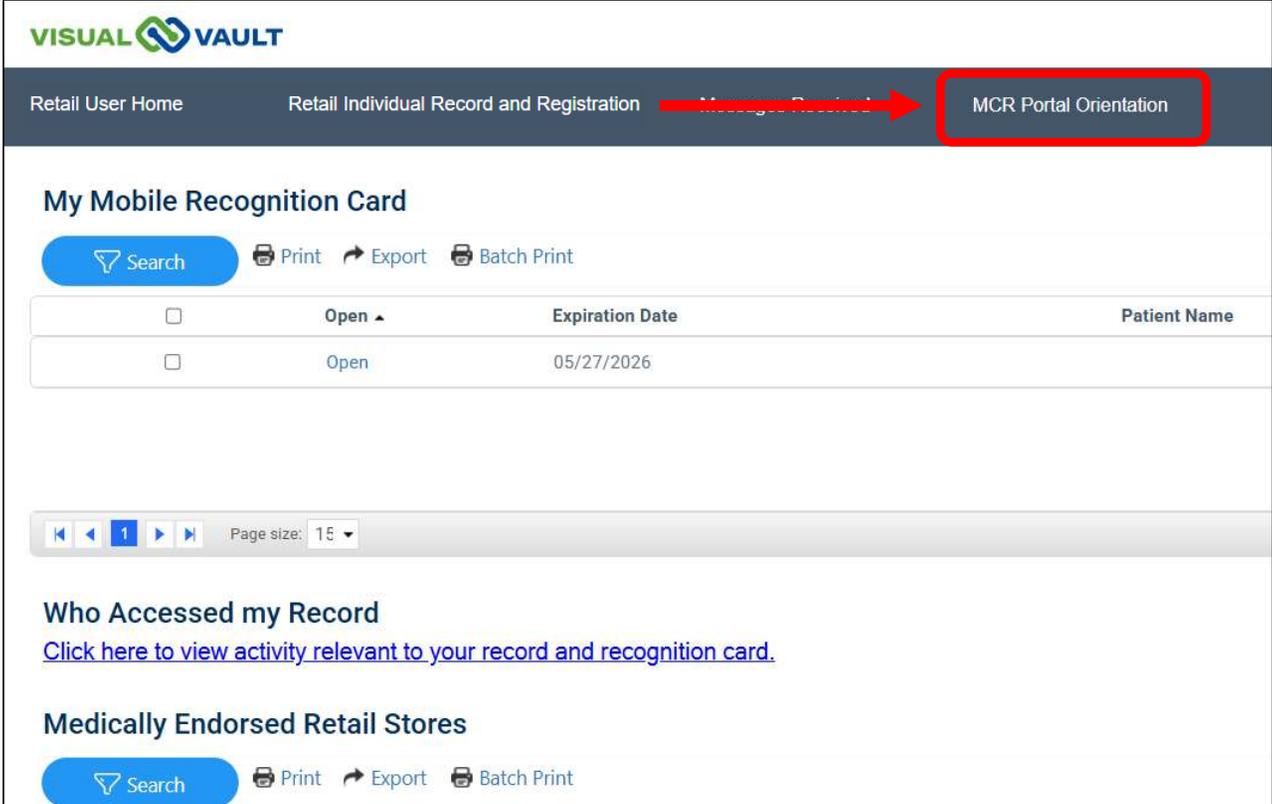
Multiple Registration/Select Portal

- MCR will send registration confirmation to your email.
- Access your email and locate the confirmation.
- This email also includes a link to SAW for easy access.



Multiple Registration/Select Portal

- To navigate to another Portal:
 - Select “MCR Portal Orientation” at the top right corner of the menu bar.



The screenshot displays the Visual Vault web application interface. At the top, the logo "VISUAL VAULT" is visible. Below the logo, there is a dark navigation bar with several menu items: "Retail User Home", "Retail Individual Record and Registration", "Manage Records", and "MCR Portal Orientation". A red arrow points from "Manage Records" to "MCR Portal Orientation", which is highlighted with a red rectangular box. Below the navigation bar, the main content area is titled "My Mobile Recognition Card". It features a search bar, "Print", "Export", and "Batch Print" buttons. A table below shows a list of cards with columns for "Open", "Expiration Date", and "Patient Name". The first row shows "Open" and "05/27/2026". Below the table, there is a pagination bar with "Page size: 15" and navigation arrows. Further down, there is a section titled "Who Accessed my Record" with a link: "Click here to view activity relevant to your record and recognition card." At the bottom, there is a section titled "Medically Endorsed Retail Stores" with a search bar, "Print", "Export", and "Batch Print" buttons.

Multiple Registration/Select Portal

- A new pop-up box will appear.
- Select which Portal you would like to access.

* Note: Clicking “Logout” will log you out of MCR completely.



View personal record

View personal record

- From the top menu of the Retail Homepage,
 - Click on “Retail Individual Record and Registration”
 - Click “Open” next to your name.

The screenshot shows the Visual Vault Retail User Home page. The top navigation bar includes the Visual Vault logo, a search icon, and three menu items: "Retail User Home", "Retail Individual Record and Registration", and "Retail Store Activity". A red arrow points from "Retail User Home" to "Retail Individual Record and Registration", which is also highlighted with a red box. Below the navigation bar, the page content includes a "Home" section with a "Registration" link and a "My Retail Individual Record" section. The "My Retail Individual Record" section contains a table with columns for "Open", "First Name", and "Last Name". A red arrow points from the "Open" button in the first row of the table to the "Open" button in the second row, which is also highlighted with a red box.

	Open ▲	First Name	Last Name
<input type="checkbox"/>			
<input type="checkbox"/>	Open	TESTOWNER	TESTOWNER

View personal record

- The Retail Individual Record page will load showing your Individual Information.
- You can update your information on the Retail Individual Record here.
 - Make any updates as needed.
 - Click “Save”
 - A pop-up message will confirm the changes made were successful.

* Note: Updates made in MCR will not change your SAW login information. Consultants will need to update their record with the DOH Licensing system (HELMs) separately.

Washington State Department of Health

Retail Individual Record

WASHINGTON STATE
AUTHORIZATION DATABASE
MEDICAL CANNABIS

Field Required *

Individual Information

Individual Information

First Name:* Middle Initial:

Last Name:* Date of Birth:* 01/01/1981

Last 4 digits of SSN:*

Contact Information

Email Address:*

Retype Email Address:*

Personal Phone Number:

Save

View personal record

- From your Retail Individual Record, you can access your retail stores.
 - Click the “Retail Stores” tab.
 - Click “Open” next to the store information you would like to access.

* Note: An Owner/Delegate would need to add you to a store before that store will show in this list.

Washington State Department of Health
Retail Individual Record

Field Required *

Individual Information **Related Stores**

Associated Stores

Open	Store Name ↑	Status	WSLCB Number
Open	Prism Wellness	Active	RETAIL-RECORD-0000363
Open	Tribal Store Training 2	Active	RETAIL-RECORD-0000373
Open	Wookiee Weed	Active	RETAIL-RECORD-0000367

1 items per page 1 - 3 of 3 items

Accessing Store / Multiple Stores

Accessing Store / Multiple Stores

Another way to access your Associated Stores is through your Individual Record.

- From the top menu of the Retail Homepage,
 - Click the “Retail Individual Record and Registration” link.
 - Click “Open” next to your name.
- This opens your individual record which shows all your associated stores.

(see next slide)

The screenshot shows the Visual Vault Retail User Home page. The top navigation bar includes the Visual Vault logo, a search bar, and user information (@gmail.com, English). The main navigation menu has links for 'Retail User Home', 'Retail Individual Record and Registration' (highlighted with a red box and a red arrow), 'Retail Store Activity', and 'Messages Received'. Below the navigation bar, there is a 'Home' section with a 'Registration' link and a 'My Retail Individual Record' table. The table has columns for 'First Name', 'Last Name', and 'Status'. The first row of the table has a checkbox, a dropdown menu with 'Open' selected (highlighted with a red box and a red arrow), and the columns for 'First Name', 'Last Name', and 'Status'. The second row has a checkbox and a link labeled 'Open' (highlighted with a red box and a red arrow).

Accessing Store / Multiple Stores

- This provides a different view from your dashboard to see what other stores you are associated with, without having to change Portals.
- From the “Retail Individual Record” page:
 - Click the “related Stores” tab at the top of the page.
 - View all associated stores in the window below.
 - To access the store, click “Open” and the Retail Store Record will open in a new page.

Washington State Department of Health

WASHINGTON STATE
AUTHORIZATION DATABASE
MEDICAL CANNABIS

Retail Individual Record

Field Required *

Individual Information **Related Stores**

Associated Stores

Open	Store Name ↑	Status	WSLCB Number
Open	Prism Wellness	Active	RETAIL-RECORD-0000363
Open	Tribal Store Training 2	Active	RETAIL-RECORD-0000373
Open	Wookiee Weed	Active	RETAIL-RECORD-0000367

1 20 items per page 1 - 3 of 3 items

Accessing Store / Multiple Stores

- To change stores, you must first:

- Select “MCR Portal Orientation” at the top right corner of the menu bar.
- A new pop-up box will appear.
- Select “Retail User.”

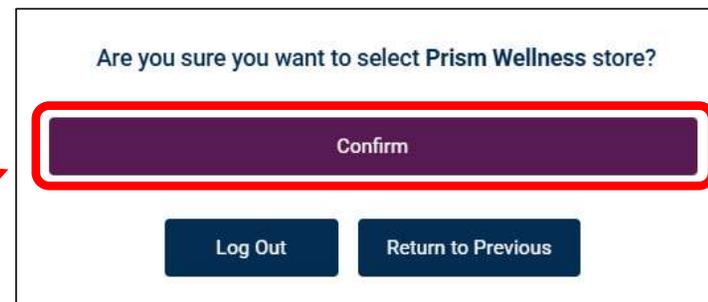
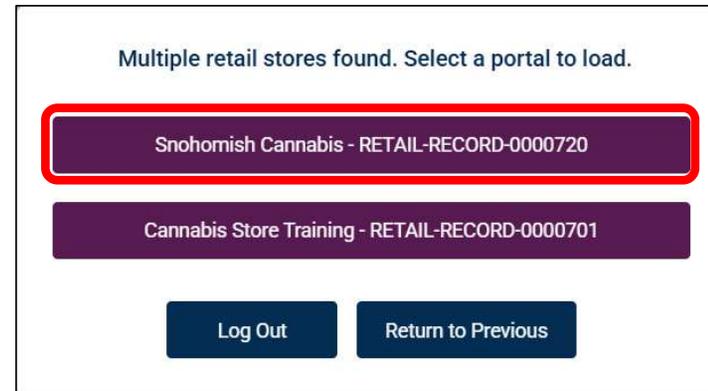
* Note: Clicking “Logout” will log you out of MCR completely.

* Note: If you are only registered as a Budtender, this “Multiple user groups found” pop-up message will not appear.

The screenshot shows the Visual Vault interface. At the top, the logo 'VISUAL VAULT' is displayed. Below it, the text 'Retail Individual Home, No Store' is visible. A red arrow points to a 'Messages Received' notification, and another red arrow points to a red-bordered box containing the text 'MCR Portal Orientation'. A pop-up box is centered on the screen with the title 'Multiple user groups found. Select a portal to load.' Inside the pop-up, there are four buttons: 'Retail User' (highlighted with a red box), 'Patient', 'LE User', and 'Healthcare Practitioner'. Below these buttons is a 'Log Out' button. In the background, there is a table with columns for 'First Name' and 'Last', and a row with an 'Open' button. At the bottom of the page, there is a search bar and buttons for 'Print', 'Export', and 'Batch Print'.

Accessing Store / Multiple Stores

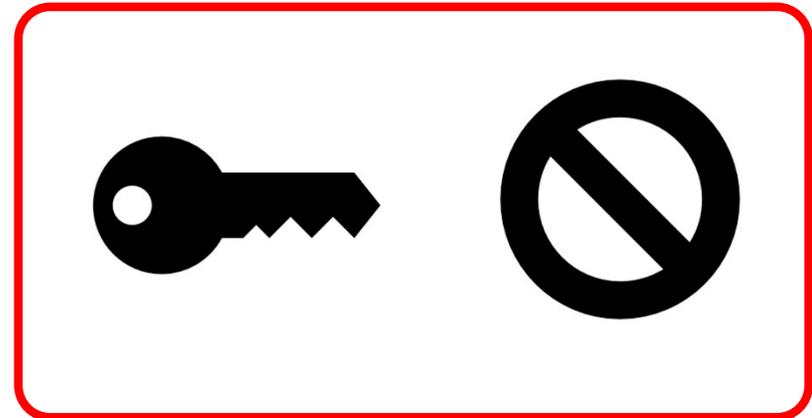
- A pop-up message will appear displaying multiple stores,
 - Click the store button you would like to access.
 - Click “Confirm.”
- This makes the store active on your portal (see next slide) so that you can access activity, messages, and store data.



Inactive and Reactivate Account

Inactive and Reactivating Account

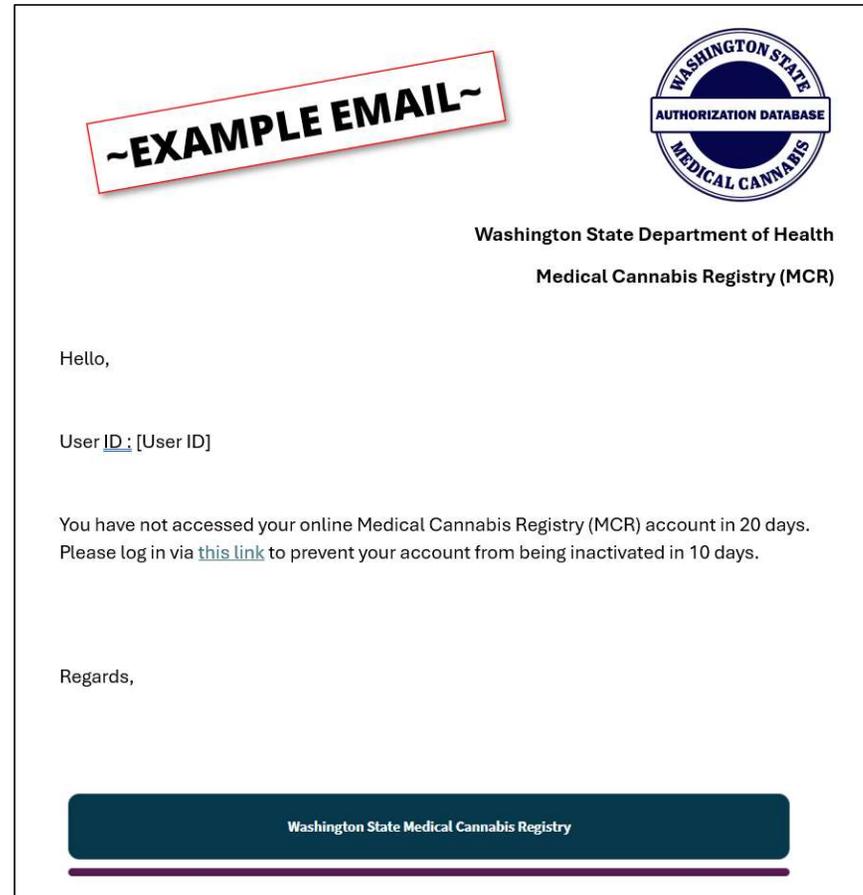
- Your MCR Account will remain active as long as you log in every 30 days.
- For Security reasons, your MCR account will change to an “Inactive” if it has been 30 days or more.
- You will be notified if your account is approaching inactivity or is inactive.
- If your account is inactive, you will need to “Reactivate” your account manually.
- After 1 year of no use, you must contact DOH to have your account “Reactivated.”



Inactive and Reactivating Account

- After 20 days of inactivity, you will receive a notification.
- Subject: “Your MCR account will be inactivated in 10 days”
- Click the link within the email to log in. This will keep your account “Active.”

* Note: Inactive accounts are still in the system.



Inactive and Reactivating Account

- If after 30 days of inactivity, you will receive a notification.
- Subject: “Your MCR account has been inactivated.”
- Click the link to log in and “Reactivate” your account. A new “MCR Reactivate Account” page will open.



Inactive and Reactivating Account

- Enter:
 - First name,
 - Last name,
 - Email Address,
 - And DOB
- Click the “Reactivate Account” button.

Washington State Department of Health

MCR Account Reactivation



Please fill out relevant fields below as they appear on your authorization form and click "Reactivate Account"
Field Required*

Individual Information

First Name:* Middle Name:

Last Name:* Suffix:

Email Address:* Date of Birth*

Reactivate Account

The form contains several red arrows pointing to the input fields for First Name, Middle Name, Last Name, Suffix, and Date of Birth, and a red arrow pointing to the 'Reactivate Account' button, which is also enclosed in a red rectangular box.

Inactive and Reactivating Account

- After 1 year of inactivity, you will receive a notification.
- Subject: “MCR Account Inactive for [Time Period].”
- After 1 year of no use, you must contact DOH to have your account “Reactivated.”



View Message Notifications

View Message Notifications

Medical Cannabis Consultants may receive messages from the Medical Cannabis Program or from the MCR System.

- How to view your messages:
 - Click on “Messages Received” from the top menu of the Homepage.
 - View your messages from this dashboard.
- These can be Email messages or Dashboard messages.

Visual Vault Messages Received dashboard screenshot. The 'Messages Received' menu item is highlighted with a red box and an arrow. A message is highlighted with a red box, showing details for an email received on 4/22/2025 at 12:08 PM. The message content includes the Washington State Department of Health logo and text: 'Washington State Department of Health [No Title] Medical Cannabis Registry', 'Hello [First Name] [Last Name],', 'Email Text', and 'Washington State Medical Cannabis Registry'.

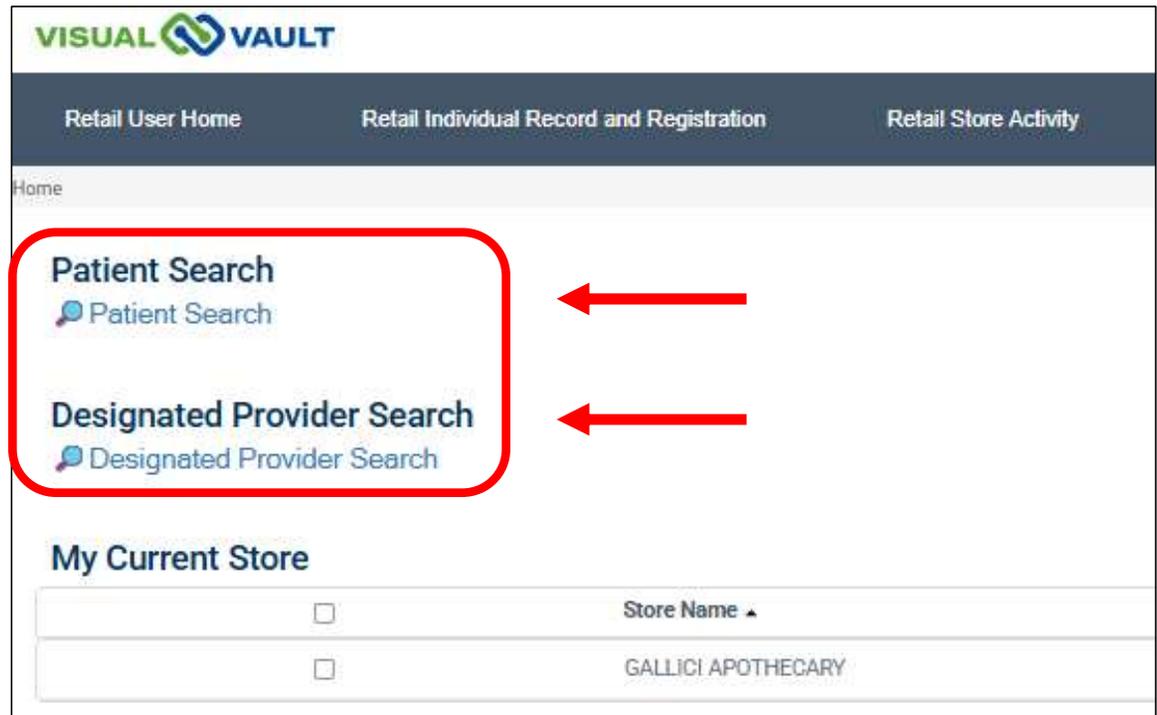
Date	Communication	Subject	Message
4/22/2025 12:08 PM	Email	Testing-- Budtender added to the store	 Washington State Department of Health [No Title] Medical Cannabis Registry Hello [First Name] [Last Name], Email Text Washington State Medical Cannabis Registry

Verify Patient / Designated Provider (DP)

Verify Patient / DP

- To view a Recognition card for either a Patient or Designated Provider.
 - Click Patient or Designated Provider search from the Retail Home page.

* Note: It is important, for every transaction, to verify the Patient or Designated Provider's Recognition Card.



Verify Patient / DP

- Here you can search by either,
 - The Recognition Card Number or,
 - Name and DOB.
- Click “Verify Card.”

* Note: The Designated Provider Search operates the same as a Patient Search.

Washington State Department of Health

Patient Search

WASHINGTON STATE AUTHORIZATION DATABASE MEDICAL CANNABIS

To search, enter card number OR name and date of birth.
Field Required *

Card Number Search

Card Number:*

Name and Date of Birth Search

First Name:* Middle Name:

Last Name:* Date of Birth:*

Verify Patient / DP

- A new window will open to confirm your search results.
- It is important the Patient's or DP's name and DOB matches the Patient or Designated Provider's information exactly or you could be accessing the wrong record.
- Select "Click to Open" to open the record.

Washington State Department of Health

Patient Search

WASHINGTON STATE AUTHORIZATION DATABASE MEDICAL CANNABIS

To search, enter card number OR name and date of birth.
Field Required *

Card Number Search

Card Number:*

Search for Record Verify Card

Results Found

Patient Name	Patient DOB	HCP	Actions
	10/09/1992		Click to Open

Verify Patient / DP

- The Recognition Card will be displayed.

Washington State Department of Health
Recognition Card: Retail



Recognition Card Details: Patient

First Name:	<input type="text"/>	Expiration Date:	<input type="text" value="05/08/2026"/>
Middle Name:	<input type="text"/>	Date Issued:	<input type="text" value="05/08/2025"/>
Last Name:	<input type="text"/>	Print Reason:	<input type="text" value="Initial Printing"/>
Card Number:	<input type="text"/>	Card Printed:	<input type="checkbox"/>

Washington State Medical Cannabis Recognition Card

Card#: 1746 8213 29cl 6w72

Patient:



Effective Date: 05/08/2025
Expiration Date: 05/08/2026
Plant Limit: 6
Authorizing Healthcare Practitioner:



Card#: 1746 8213 29cl 6w72



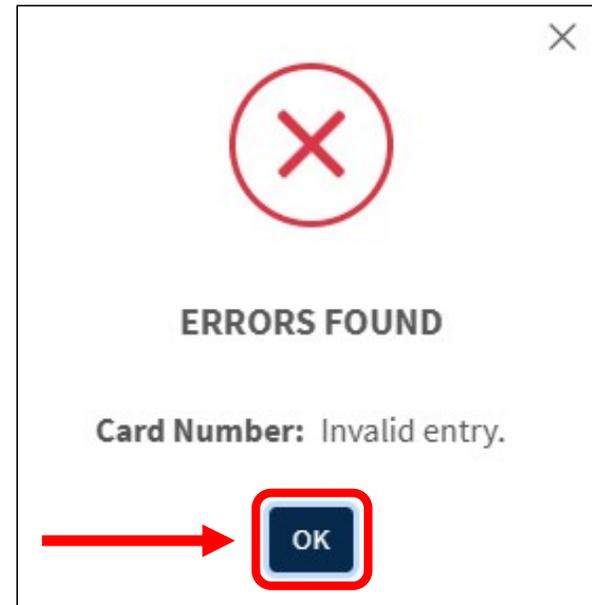
TRANSACTION AMOUNTS:
Usable Cannabis: 5 ounces maximum
Solid Infusion: 40 ounces maximum
Liquid Infusion: 20 ounces maximum
Concentrates: 21 grams maximum

NOT FOR IDENTIFICATION PURPOSES
Warning: It is illegal to duplicate this card except when allowed by law.

QUESTION? Call the Washington State Department of Health Medical Cannabis Program (509) 555-4210 Return to the Department of Health if found.

Verify Patient / DP

- If the Patient / DP's information or Recognition Card number is not found:
 - A pop-up message will appear.
 - Click "OK" to try again.



Consultant Certification Expires / Renews

Consultant Certification Expires / Renews

- Consultant certifications expire on your birthday each year. A courtesy renewal notice will be mailed to your address on record, or you can visit [Washington State DOH Renewals Online](#) for more information.
- Also, MCR will automatically send an email notification warning that the Consultant's Certification is close to expiring.
 - Instructions are provided in the email to complete the recertification before the expiration date to avoid losing your Consultant privileges.
- When the Consultant's Certification expires, MCR automatically sends another email notification signifying that their certification has expired.
 - Instructions are provided to complete the recertification to restore consultant privileges.

* Note: this is not the same as "reactivate" or "inactive" account.
See [slides 22-27](#) for more information

Recognition Card Actions

- A Medical Cannabis Consultant can complete card actions for Patients and Designated Providers.
- This section explains how to create, replace, renew, and correct a recognition card.

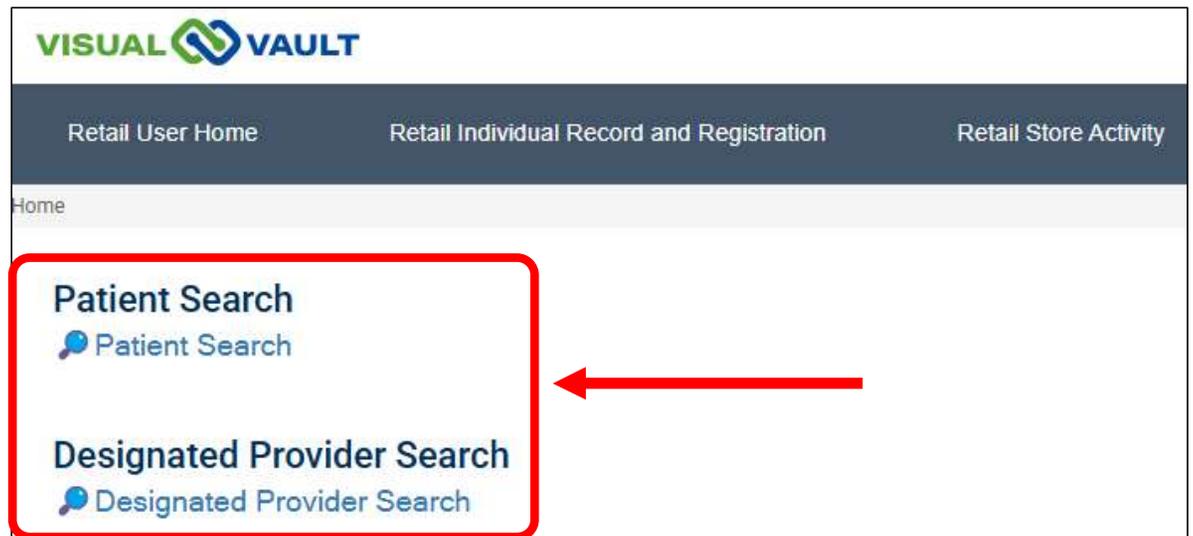


Recognition Card Actions

** For the following actions (Create, Replace, Renew or Correct a Recognition Card)**

** Always start with a new Patient or DP Search. **

- To Create, Replace, Renew or Correct a Recognition Card:
 - Click Patient or Designated Provider search from the Retail Home page.
 - The following slides will explain how to complete the Recognition Card Actions in MCR.



Create Recognition Cards

Create Recognition Cards

- When creating a card for the first time, the person receiving the card must be physically present. For the "first-time card generation, the Patient and DP must come in together.
- After the initial card printing, a DP can complete purchases on behalf of the Patient.
- Minor patients, under the age of 18, and their designated provider (parent/legal guardian) are required to take their authorization to a medically endorsed retail store to enroll in the Medical Cannabis Registry (MCR).

Create Recognition Cards

- After clicking either “Patient Search” or Designated Provider” search:
 - Enter the Patient’s or Designated Provider’s, First and Last name, and DOB
- Click “Search for Record.”

* Note: This example shows “Patient Search.” Selecting “Designated Provider Search” this would change accordingly.

Washington State Department of Health

Patient Search

WASHINGTON STATE
AUTHORIZATION DATABASE
MEDICAL CANNABIS

To search, enter card number OR name and date of birth.
Field Required *

Card Number Search

Card Number:*

Search for Record Verify Card

Name and Date of Birth Search

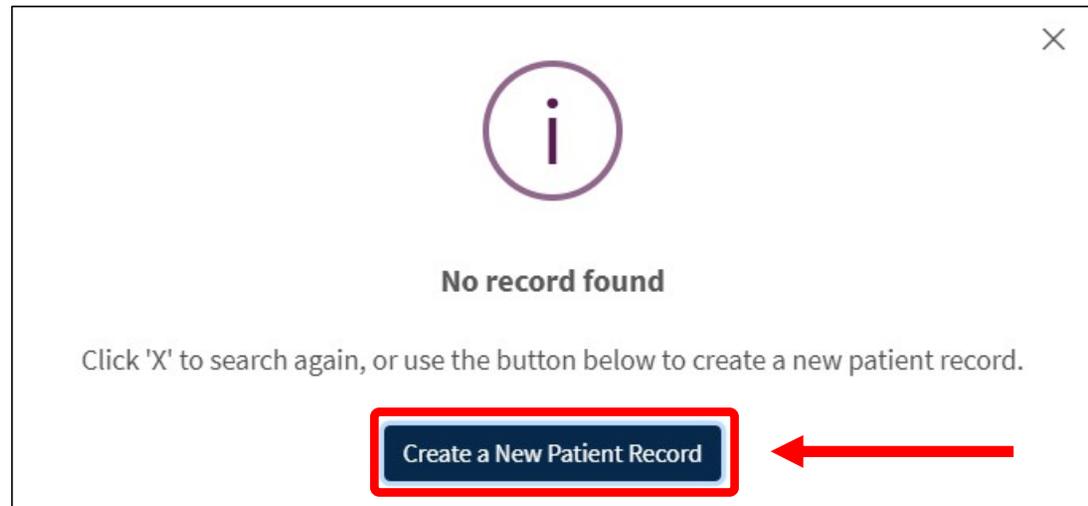
First Name:* Middle Name:

Last Name:* Date of Birth:*

Search for Record Verify Card

Create Recognition Cards

- If the Patient or Designated Provider hasn't registered before, no record will be found.
- Select "Create a New Patient Record."



* Note: If the patient HAS registered in MCR before, their record will be found, and you will have the opportunity to follow the same prompts to verify the information in the system.

Create Recognition Cards

- Follow the prompts and enter in the new Patient or Designated Provider's information.
- Click "Save and Continue"

Washington State Department of Health

Patient Record

WASHINGTON STATE
AUTHORIZATION DATABASE
MEDICAL CANNABIS

Required fields: *

Patient ID Check

Please enter the ID Type and ID Number that the individual has presented:

Is the patient present? *

ID Type: * ID Number: *

Save and Continue

* Note: Patients under the age of 18, they will be verified through their DP's valid ID. A person cannot be entered into the database without valid photographic identification. per RCW 69.51A.030

Create Recognition Cards

- As a Medical Cannabis Consultant, you must ensure the Authorization Form meets all the required criteria.
- If you cannot verify all the requirements:
 - Do not proceed with creating a recognition card
 - Refer the patient back to their Healthcare Practitioner.

[Click here to view the Washington State Medical Cannabis Authorization Form.](#)



Washington State Medical Cannabis Authorization

This form must be completed and signed by the authorizing practitioner or delegate. This authorization form is not a prescription and does not provide protection from arrest unless the qualifying patient and their designated provider is also entered in the medical cannabis authorization database by a certified consultant and receives a recognition card.

Clear Form

I. Patient and Designated Provider Information Issue Type (check one): Initial Renewal

1	Patient's Full Name: <small>(same as state-issued ID)</small>	Date of Birth:	
2	Street address: <small>(No P.O. Box)</small>	City:	State: WA Zip:
3	Does the patient have a designated provider (DP)? (check one below) <input type="checkbox"/> Yes, patient sign's item 6 below, unless they are a minor (under age 18) <input type="checkbox"/> No, continue to Section II		
4	DP or Parent/Legal Guardian's Name:	Date of Birth:	
5	Street address: <small>(No P.O. Box)</small>	City:	State: WA Zip:
6	I am an adult patient (18 and older) and agree the person named above will serve as my designated provider. Patient Signature: _____ Date: _____ (RCW69.51A.010(11))		

II. Healthcare Practitioner Information

7	Healthcare Practitioner's Name (as it appears on license):	WA License Number: (Example: MD000011110)
8	Office/Clinic Address (No P.O. Box) City:	State: Zip: Phone:

III. In signing this form, I certify and recommend the following:

9. I am a Washington State licensed healthcare practitioner and allowed to authorize my patients to use cannabis for medical purposes under RCW 69.51A.010. In my professional opinion, as the treating healthcare practitioner, the above named patient may benefit from the medical use of cannabis for the qualifying condition(s) below (check all that apply):

<input type="checkbox"/> Cancer	<input type="checkbox"/> Chronic Renal Failure Requiring Hemodialysis	<input type="checkbox"/> Crohn's Disease
<input type="checkbox"/> Epilepsy/Other Seizure Disorder	<input type="checkbox"/> Glaucoma	<input type="checkbox"/> Hepatitis C
<input type="checkbox"/> HIV	<input type="checkbox"/> Intractable Pain	<input type="checkbox"/> Multiple Sclerosis
<input type="checkbox"/> Posttraumatic Stress Disorder	<input type="checkbox"/> Spasticity Disorder	<input type="checkbox"/> Traumatic Brain Injury
<input type="checkbox"/> A disease that results in nausea, vomiting, wasting, appetite loss, cramping, seizures, muscle spasms or spasticity		

10. In my professional opinion, the above named patient is eligible for a compassionate care renewal of their authorization form and registration in the medical cannabis authorization database per RCW 69.51A.030 (check one):
 Yes, is eligible (Patient's DP may renew database registration on the their behalf) No, is not eligible

11. By issuing this authorization, I understand a patient or their designated provider on the patient's behalf, may grow up to four plants within their domicile. If entered into the database, the patient (or designated provider) may grow up to six plants within their domicile. In my professional opinion, I have determined the patient's medical needs exceed the amounts provided and recommend additional plants (check one below):
 Yes, I recommend _____ number of plants (enter 6-15) No recommendations

12. This authorization was issued _____ (today's date) and needs to be renewed before _____ (expiration date*)
*Adult patient authorizations may be valid for up to one year from issue date; up to six months for minor patients.

13. Practitioner's Signature _____ Date signed _____

Medical Cannabis Program | 360-236-4819 DCH 623-123 June 2024

To request this document in another format, call 1-800-425-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email chd.nrgts@ish.wa.gov.



Create Recognition Cards

- Enter all the Healthcare Practitioner Data from the Authorization Form.
- Click “Save and Continue”
- These fields are required and will be verified by the DOH Licensing File.

Washington State Department of Health
Patient Record

WASHINGTON STATE
AUTHORIZATION DATABASE
MEDICAL CANNABIS

Required fields: *

Healthcare Practitioner Information

Patient Date of Birth: * 01/01/1933 [calendar icon] Authorization Date: * MM/dd/yyyy [calendar icon] Expiration Date: * MM/dd/yyyy [calendar icon]

Healthcare Practitioner License Number: * [text input]

Office Street Address: * [text input] Zip Code: * [text input]
Address Line 2 [text input] State: * Select Item [dropdown]
City: * [text input] County: * Select Item [dropdown]
Phone Number: * [text input]

Cancel Back Save and Continue

Create Recognition Cards

- Using the Authorization Form, complete the Patient Record information.
- Check the “Check Box” to signify you have verified the qualifying conditions from the Authorization Form.
- Select “Yes” or “No” for Compassionate Care.

Washington State Department of Health
Patient Record

Required fields: *

Authorization Information

A Washington State licensed healthcare practitioner has authorized this patient to use cannabis for medical purposes under RCW 69.51A.010. In their professional opinion, as the treating healthcare practitioner, the above-named patient may benefit from the medical use of cannabis with qualifying condition(s).

- Cancer
- Chronic Renal Failure Requiring Hemodialysis
- Crohn's Disease
- Epilepsy/Other Seizure Disorder
- Glaucoma
- Hepatitis C
- HIV
- Intractable Pain
- Multiple Sclerosis
- Post-traumatic Stress Disorder
- Spasticity Disorder
- Traumatic Brain Injury
- A disease that results in nausea, vomiting, wasting, appetite loss, cramping, seizures, muscle spasms or spasticity

I verify that the authorization form indicates the patient has qualifying conditions? *

Consultant Signature

Has the healthcare practitioner indicated that this patient is eligible for a compassionate care renewal of their recognition card? *

Select Item

This patient may grow up to four plants within their domicile. If entered into the database, the patient (or designated provider) may grow up to six plants within their domicile. In my professional opinion, I have determined the patient's medical needs exceed the amounts provided and recommend additional plants: *

Practitioner recommends number of plants (6-15)

Save and Continue

Create Recognition Cards

- Complete the additional Patient or DP information from the Authorization form.
- Physical and Mailing address may be the same or different. However, the physical address must match the Authorization Form, and may be different from the Patient or DP's ID.
- If Applicable, complete the Designated Provider section.
- Click "Save and Continue."

* Note: The physical address cannot be a PO BOX

The screenshot shows a web form titled "Required fields:" with the following sections:

- Individual Information:** Fields for First Name (HARRY), Middle Name, Last Name (HENDERSON), Suffix, Date of Birth (01/01/1933), Email Address, and Retype Email Address.
- Patient Physical Address:** Fields for Address Line 1, Address Line 2, State (Washington), Zip Code, City, and County. A checkbox for "Mailing address same as physical address" is present.
- Patient Mailing Address:** Fields for Address Line 1, Address Line 2, State (Washington), Zip Code, City, and County.
- Designated Provider:** A question "Does the patient have a designated provider (DP)?" with a "Yes" dropdown. Below it, a question "Is the Designated Provider present?" with a "Select Item" dropdown.

At the bottom right, there are three buttons: "Cancel", "Back", and "Save and Continue". The "Save and Continue" button is highlighted with a red box. Red arrows point to the "Save and Continue" button and the "Designated Provider" section.

Create Recognition Cards

If you are adding a Designated Provider, follow the steps below.

- Enter the Designated Provider information from the Authorization Form,
 - Click “Search”
- MCR will search for their information.
 - If found, their information will pop-up in a new window.
 - If not found in MCR, their information can be added just as in the previous slide for the patient.

Designated Provider Details

Please fill out all required information and click "Search":

First Name: *

Middle Name:

Last Name: *

Suffix:

Date of Birth: *

Email Address:

Retype Email Address:

Create Recognition Cards

- You can now save the Patient or DPs record or go back and make any changes.
 - Click “Edit” to go back and make any changes if necessary.
- You can also assist the Patient and or the DP by registering them into MCR by clicking “Register Patient”.
 - Their email address is required for registration.
 - Registration allows for Mobile Card access.

Washington State Department of Health
Patient Record

WASHINGTON STATE
AUTHORIZATION DATABASE
MEDICAL CANNABIS

Required fields: *

Patient Card Information

First Name: *	<input type="text" value="JOJO"/>	Middle Name:	<input type="text"/>
Last Name: *	<input type="text" value="SQUARED"/>	Suffix:	<input type="text"/>
Patient DOB: *	<input type="text" value="01/01/1950"/>	Patient Date Issued: *	<input type="text" value="05/27/2025"/>
Practitioner First Name:	<input type="text" value="WITH"/>	Patient Expiration Date: *	<input type="text" value="05/27/2026"/>
Practitioner Last Name:	<input type="text" value="DEA"/>	Number of Plants:	<input type="text" value="6"/>

Cancel

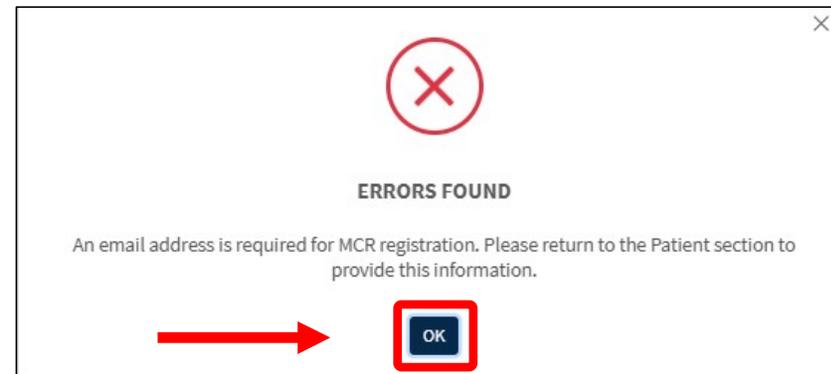
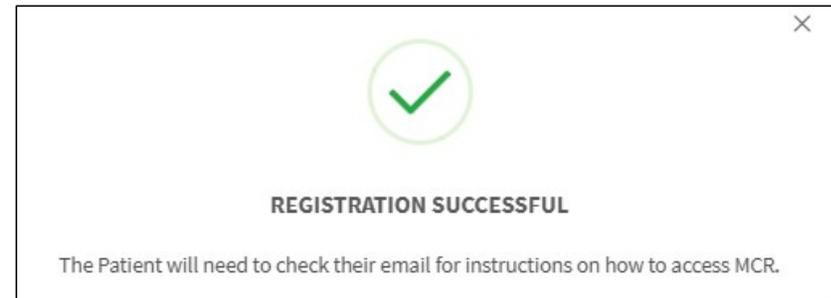
If you need to make updates before printing the card, click the Edit button

If the patient agrees, please click here to register this individual online with MCR. (Email Required):

Click the appropriate button to upload your card picture:

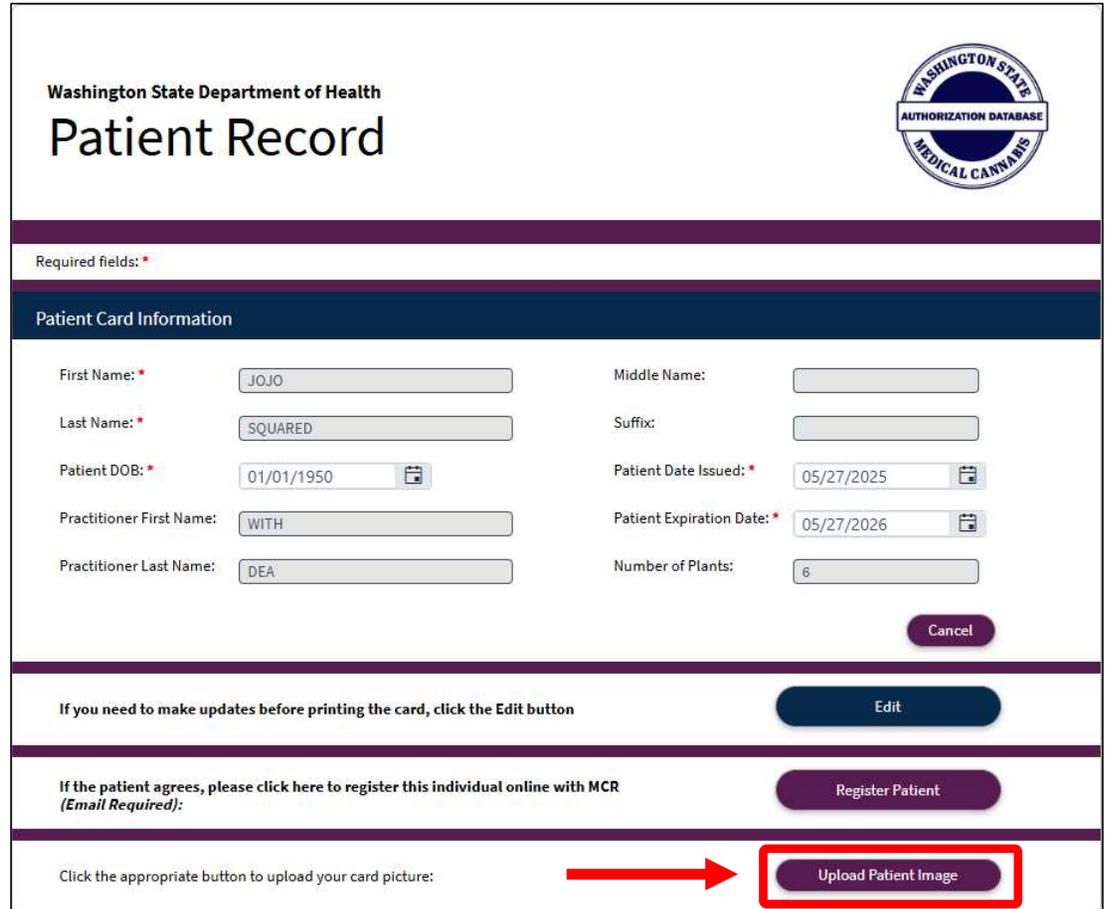
Create Recognition Cards

- By Clicking “Register Patient” MCR will check to see if an email address has been added to the Patient or DPs record.
- If yes, a pop-up message will appear indicating a confirmation email has been sent to the Patient/DP and that registration was successful.
- If No, a pop-up will indicate that an email address is required for registration. Click “OK” and go back to enter a valid email address for the Patient or DP.



Create Recognition Cards

- If you need to add the email address:
 - Click “Edit” to edit the record and add the email.
- You can now add the photos for the Patient or Designated Provider.
- Click “Upload Patient Image.”
 - Correct file type: [.jpeg](#)



Washington State Department of Health
Patient Record

WASHINGTON STATE
AUTHORIZATION DATABASE
MEDICAL CANNABIS

Required fields: *

Patient Card Information

First Name: *	<input type="text" value="JOJO"/>	Middle Name:	<input type="text"/>
Last Name: *	<input type="text" value="SQUARED"/>	Suffix:	<input type="text"/>
Patient DOB: *	<input type="text" value="01/01/1950"/>	Patient Date Issued: *	<input type="text" value="05/27/2025"/>
Practitioner First Name:	<input type="text" value="WITH"/>	Patient Expiration Date: *	<input type="text" value="05/27/2026"/>
Practitioner Last Name:	<input type="text" value="DEA"/>	Number of Plants:	<input type="text" value="6"/>

Cancel

If you need to make updates before printing the card, click the Edit button [Edit](#)

If the patient agrees, please click here to register this individual online with MCR (Email Required): [Register Patient](#)

Click the appropriate button to upload your card picture: [Upload Patient Image](#)

Create Recognition Cards

- Click “Generate Patient/DP Card” to generate the Recognition Card.

Patient: JOJO SQUARED



Required fields: *

Patient Card Information

First Name: *	<input type="text" value="JOJO"/>	Middle Name:	<input type="text"/>
Last Name: *	<input type="text" value="SQUARED"/>	Suffix:	<input type="text"/>
Patient DOB: *	<input type="text" value="01/01/1950"/>	Patient Date Issued: *	<input type="text" value="05/27/2025"/>
Practitioner First Name:	<input type="text" value="WITH"/>	Patient Expiration Date: *	<input type="text" value="05/27/2026"/>
Practitioner Last Name:	<input type="text" value="DEA"/>	Number of Plants:	<input type="text" value="6"/>

[Cancel](#)

If you need to make updates before printing the card, click the [Edit](#) button

If the patient agrees, please click here to register this individual online with MCR (Email Required): [Register Patient](#)

Click the appropriate button to upload your card picture: [Upload Patient Image](#)

Click the appropriate button to generate your card: [Generate Patient Card](#)

Create Recognition Cards

- The recognition card has been generated.
- Select “Print” to print the card.
- Select “Correct Data” to correct any information.

Washington State Department of Health
Recognition Card: Retail



Recognition Card Details: Patient

First Name:

Middle Name:

Last Name:

Card Number:

Expiration Date: 04/08/2026 

Date Issued: 04/08/2025 

Print Reason: Initial Printing 

Card Printed

Washington State Medical Cannabis Recognition Card

Card#: 12345678901234567890

Patient: 

Effective Date: 04/08/2025

Expiration Date: 04/08/2026

Plant Limit: 6

Authorizing Healthcare Practitioner: 

Barcode

Card#: 12345678901234567890

TRANSACTION AMOUNTS:
Usable Cannabis: 2 ounces maximum
Solid Infusion: 48 ounces maximum
Liquid Infusion: 24 ounces maximum
Concentrates: 21 grams maximum

NOT FOR IDENTIFICATION PURPOSES
Warning: It is illegal to duplicate this card except when allowed by law.

QUESTION? Call the Washington State Department of Health Medical Cannabis Program (360) 236-4519. Return to the Department of Health if found.



Replace Recognition Cards

Replace Recognition Cards

- To view a Recognition card for either a Patient or Designated Provider.
 - Click Patient or Designated Provider search from the Retail Home page.
 - Enter the “Recognition Card” number or their First/Last/DOB
 - Click “Search for Record”

Washington State Department of Health

Patient Search

WASHINGTON STATE
AUTHORIZATION DATABASE
MEDICAL CANNABIS

To search, enter card number **OR** name and date of birth.
Field Required *

Card Number Search

Card Number: *

Search for Record Verify Card

Name and Date of Birth Search

First Name: * Middle Name:

Last Name: * Date of Birth: *

Search for Record Verify Card

Replace Recognition Cards

- A pop-up box will display the Patient record.
- It is important that the name and DOB matches the Patient or Designated Provider information exactly or you could be accessing the wrong record.
- Click “Replacement.”



*Note: You will then be directed back to the Patient Record screen to generate a new card.

Replace Recognition Cards

- Click “Generate Patient Card” (or “Generate Designated Provider Card” if applicable) to create a new recognition card for the Patient/Designated Provider.

Patient: JOJO SQUARED

Required fields: *

Patient Card Information

First Name: *	<input type="text" value="JOJO"/>	Middle Name:	<input type="text"/>
Last Name: *	<input type="text" value="SQUARED"/>	Suffix:	<input type="text"/>
Patient DOB: *	<input type="text" value="01/01/1950"/>	Patient Date Issued: *	<input type="text" value="05/27/2025"/>
Practitioner First Name:	<input type="text" value="WITH"/>	Patient Expiration Date: *	<input type="text" value="05/27/2026"/>
Practitioner Last Name:	<input type="text" value="DEA"/>	Number of Plants:	<input type="text" value="6"/>

Cancel

If you need to make updates before printing the card, click the Edit button

Edit

Click the appropriate button to generate your card:

Generate Patient Card

Click the appropriate button to generate your card:

Generate Patient Card

Replace Recognition Cards

- The recognition card has been generated.
- Select “Print” to print the card.
- Select “Correct Data” to correct any information.

Washington State Department of Health
Recognition Card: Retail



Recognition Card Details: Patient

First Name:

Middle Name:

Last Name:

Card Number:

Expiration Date: 04/08/2026 

Date Issued: 04/08/2025 

Print Reason: Initial Printing 

Card Printed

Washington State Medical Cannabis Recognition Card

Card#: 12345678901234567890

Patient: 

Effective Date: 04/08/2025

Expiration Date: 04/08/2026

Plant Limit: 6

Authorizing Healthcare Practitioner: 

Barcode

Card#: 12345678901234567890

TRANSACTION AMOUNTS:
Usable Cannabis: 2 ounces maximum
Solid Infusion: 48 ounces maximum
Liquid Infusion: 24 ounces maximum
Concentrates: 21 grams maximum

NOT FOR IDENTIFICATION PURPOSES
Warning: It is illegal to duplicate this card except when allowed by law.

QUESTION? Call the Washington State Department of Health Medical Cannabis Program (360) 236-4519 Return to the Department of Health if found



Renew Recognition Cards

Renew Cards - No Changes

- Renewing a Recognition Card with no changes:
 - Click Patient or Designated Provider search from the Retail Home page.
 - Enter the “Recognition Card” number Or their First/Last/DOB
 - Click “Search for Record”

Washington State Department of Health

Patient Search

To search, enter card number **OR** name and date of birth.
Field Required *

Card Number Search

Card Number:*

Search for Record Verify Card

Name and Date of Birth Search

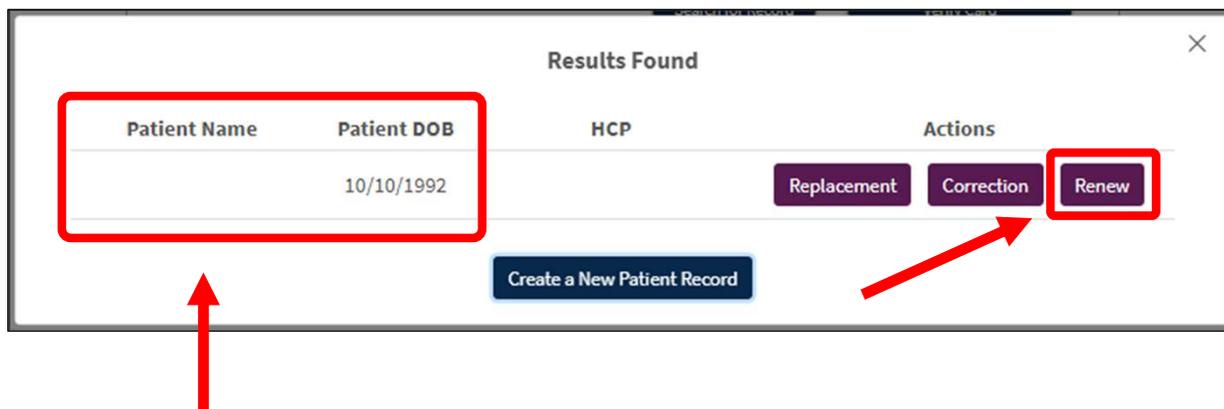
First Name:* Middle Name:

Last Name:* Date of Birth:* MM/dd/yyyy

Search for Record Verify Card

Renew Cards - No Changes

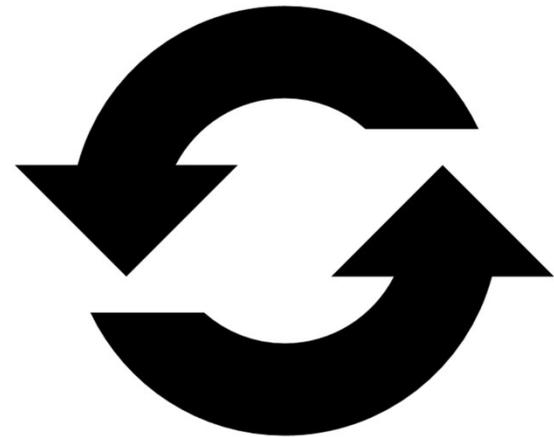
- A pop-up box will display the Patient or DP's information.
- It is important that this matches the Patient or Designated Provider information exactly or you could be accessing the wrong record
- Click "Renew."



Renew Cards - No Changes

- Without changing any information on the record,
 - Continue as if creating the card for the first time.

* Reference [slides 52-62](#) for initial card generation steps



Renew Cards - With Changes

- Renewing a Recognition Card with changes:
 - Click Patient or Designated Provider search from the Retail Home page.
 - Enter the “Recognition Card” number or their First/Last/DOB
 - Click “Search for Record”

Washington State Department of Health

Patient Search

WASHINGTON STATE
AUTHORIZATION DATABASE
MEDICAL CANNABIS

To search, enter card number **OR** name and date of birth.
Field Required *

Card Number Search

Card Number:*

Search for Record Verify Card

Name and Date of Birth Search

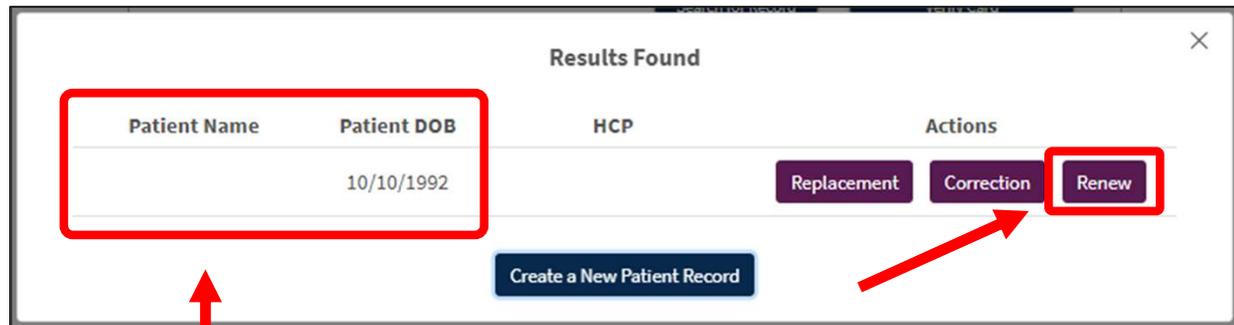
First Name:* Middle Name:

Last Name:* Date of Birth:* MM/dd/yyyy

Search for Record Verify Card

Renew Cards - With Changes

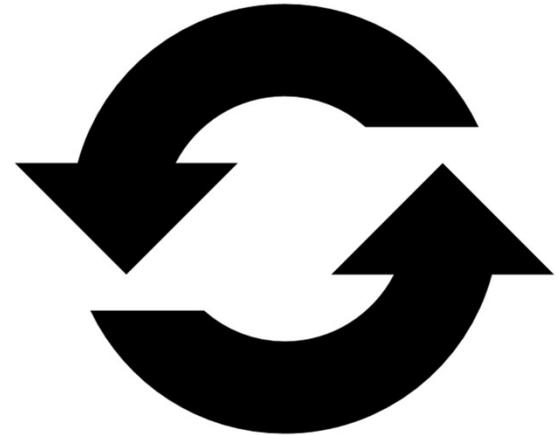
- A pop-up box will display the Patient or DP's information,
- It is important that this matches the Patient or Designated Provider information exactly or you could be accessing the wrong record.
- Click "Renew."



Renew Cards - With Changes

- Continue as if creating the card for the first time and make any changes necessary.

* Reference [slides 52-62](#) for initial card generation steps



Correcting Recognition Cards

Correcting Recognition Cards

- Click Patient or Designated Provider search from the Retail Home page.
- Enter the “Card Number” number or their First/Last/DOB
- Click “Search for Record”

*Note: Card Corrections can only happen within 30 days of initial printing, and the Health Care Practitioner Information can not be updated.

Washington State Department of Health

Patient Search

WASHINGTON STATE
AUTHORIZATION DATABASE
MEDICAL CANNABIS

To search, enter card number **OR** name and date of birth.
Field Required *

Card Number Search

Card Number:*

Search for Record Verify Card

Name and Date of Birth Search

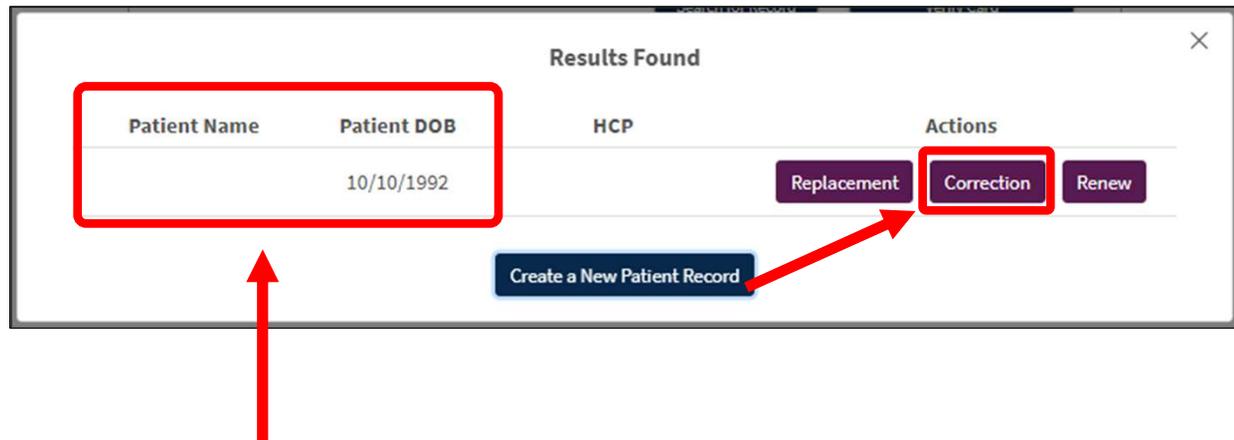
First Name:* Middle Name:

Last Name:* Date of Birth:*

Search for Record Verify Card

Correcting Recognition Cards

- A pop-up box will display the Patient or DP's information.
- It is important that this matches the Patient or Designated Provider information exactly or you could be accessing the wrong record.
- Click "Correction."



Correcting Recognition Cards

- You will need to go through the steps of verifying the Patient/Designated Provider.
 - Select which “ID Type” is used for verification of identity.
 - Enter the ID Number
 - Click “Save and Continue.”

Washington State Department of Health
Patient Record

WASHINGTON STATE
AUTHORIZATION DATABASE
MEDICAL CANONAS

Patient: JEANNE HALBERT
DP: HOUSTON DUFFY

Required fields: *

Patient ID Check

Please enter the ID Type and ID Number that the individual has presented:

Is the patient present? * Yes

ID Type: * Select Item

ID Number: *

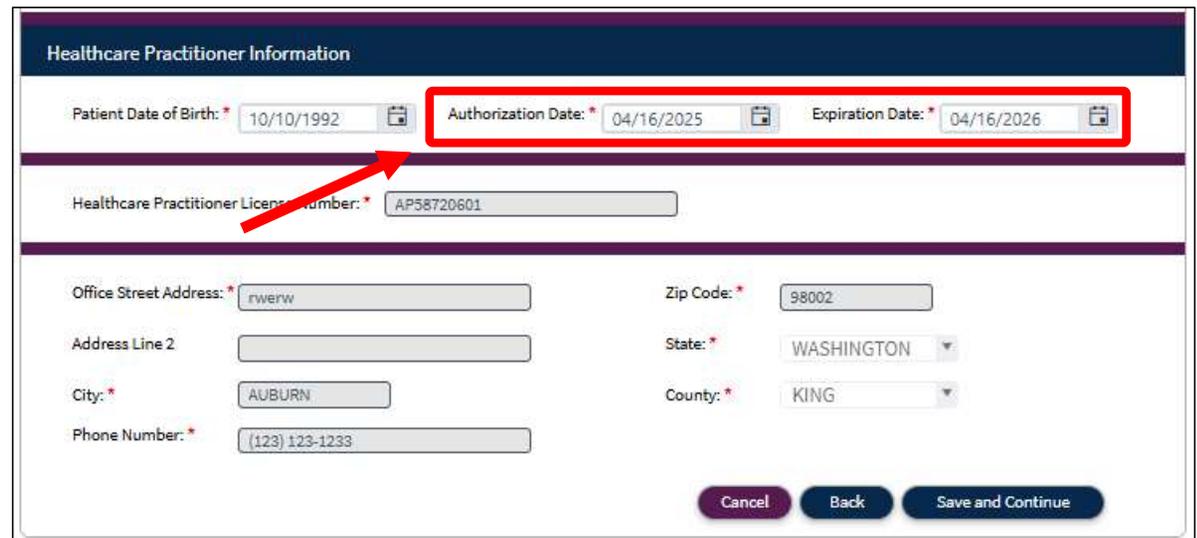
Save and Continue

Correcting Recognition Cards

- Update the HCP's Authorization dates (if needed).
- Follow the remainder screens and update the appropriate information.
- Follow the same steps as creating a card for the first time.

* Reference [slides 52-62](#) for initial card generation steps

* Note: you cannot update the Healthcare Provider's information.

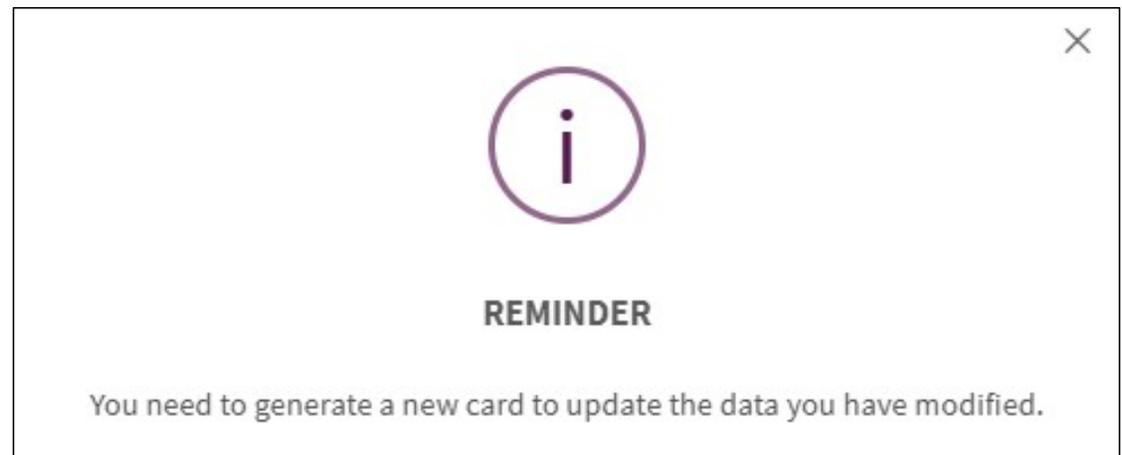


The screenshot shows a web form titled "Healthcare Practitioner Information". The form contains several input fields and dropdown menus. The "Authorization Date" and "Expiration Date" fields are highlighted with a red box. A red arrow points to the "Authorization Date" field. The form also includes fields for "Patient Date of Birth", "Healthcare Practitioner License Number", "Office Street Address", "Address Line 2", "City", "Phone Number", "Zip Code", "State", and "County". At the bottom right, there are three buttons: "Cancel", "Back", and "Save and Continue".

Field	Value
Patient Date of Birth	10/10/1992
Authorization Date	04/16/2025
Expiration Date	04/16/2026
Healthcare Practitioner License Number	AP58720601
Office Street Address	rwerw
Address Line 2	
City	AUBURN
Phone Number	(123) 123-1233
Zip Code	98002
State	WASHINGTON
County	KING

Correcting Recognition Cards

- When all the information is updated:
 - A pop-up will remind you to generate a new card with the updated data.



Correcting Recognition Cards

To save the recorded changes, you must check the checkbox, indicating that the information you entered matched the new authorization form.

I verify that the corrections I have made to this record match the data on the authorization form:*

@gmail.com 04/16/2025 17:54:18



Correcting Recognition Cards

- Click “Generate Patient Card” (or “Generate Designated Provider Card” if applicable) to create a new recognition card for the Patient/Designated Provider.

Patient: JOJO SQUARED

Required fields: *

Patient Card Information

First Name: *	<input type="text" value="JOJO"/>	Middle Name:	<input type="text"/>
Last Name: *	<input type="text" value="SQUARED"/>	Suffix:	<input type="text"/>
Patient DOB: *	<input type="text" value="01/01/1950"/>	Patient Date Issued: *	<input type="text" value="05/27/2025"/>
Practitioner First Name:	<input type="text" value="WITH"/>	Patient Expiration Date: *	<input type="text" value="05/27/2026"/>
Practitioner Last Name:	<input type="text" value="DEA"/>	Number of Plants:	<input type="text" value="6"/>

Cancel

If you need to make updates before printing the card, click the Edit button

Edit

Click the appropriate button to generate your card:

Generate Patient Card

Correcting Recognition Cards

- After the Recognition Card has been generated, you can:
 - Choose to print the card, or
 - Correct any data that had been entered.

Washington State Department of Health
Recognition Card: Retail



Recognition Card Details: Patient

First Name:	<input type="text"/>	Expiration Date:	04/08/2026 
Middle Name:	<input type="text"/>	Date Issued:	04/08/2025 
Last Name:	<input type="text"/>	Print Reason:	Initial Printing 
Card Number:	<input type="text"/>	Card Printed	<input type="checkbox"/>

Washington State Medical Cannabis Recognition Card

Card#: 

Patient: 

Effective Date: 04/08/2025

Expiration Date: 04/08/2026

Plant Limit: 6

Authorizing Healthcare Practitioner: 

Card#: 

TRANSACTION AMOUNTS:
Usable Cannabis: 2 ounces maximum
Solid Infusion: 48 ounces maximum
Liquid Infusion: 24 ounces maximum
Concentrates: 21 grams maximum

NOT FOR IDENTIFICATION PURPOSES
Warning: It is illegal to duplicate this card except when allowed by law.

QUESTION? Call the Washington State Department of Health Medical Cannabis Program (360) 236-4433. Return to the Department of Health if found.

 Correct Data Print

Resources

Utilize the following resources:

[Click here: Washington State DOH Medical Cannabis Program Overview Homepage](#)

[Click here: Washington State DOH Medical Cannabis Consultants Certification Homepage](#)

[Click here: Washington State DOH Medically Endorsed Retail Store Homepage](#)

[Click here: Washington State DOH Medical Cannabis Laws and Rules Homepage](#)

[Click here: Washington State DOH Medical Cannabis Program Updates Homepage](#)



Support

Contacting Tech Support & Help Desk:

Support portal: <https://mcr.freshdesk.com/>

Email: mcr@visualvault.freshdesk.com

Phone (Both): 480-308-4400 extension 2 or (844) 769-8285 extension 2

Standard Operating Hours:

Standard operating hours are between 8:00 AM and Midnight, US Pacific Time, Sunday through Saturday, excluding VisualVault's published holidays or holidays as observed locally by VisualVault.

VisualVault Holidays:

New Year's Day

Labor Day

Memorial Day

Thanksgiving

American Independence Day

Christmas Day



Questions?





To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov.