Questions to Ask an Ibogaine Clinic

Top Ibogaine Clinics · topibogaineclinics.com · July 2026. Information, not medical advice; talk to a physician first.

Medical screening

☐ **1. Do you require a 12-lead EKG before dosing, and who reads it?**

A good answer: Always, reviewed by a physician, with a stated QTc cutoff, typically in the 430 to 450 millisecond range. A clinic that will dose you without an EKG should end the call.

☐ **2. What bloodwork do you require?**

A good answer: At minimum a metabolic panel including potassium and magnesium, plus liver function tests, done before travel or on arrival before dosing.

☐ **3. How do you handle my current medications?**

A good answer: A full medication review before booking, with supervised tapers for SSRIs and other QT-prolonging or interacting drugs, on a stated timeline. Not "just stop taking them."

☐ **4. Who do you refuse to treat?**

A good answer: A real list: certain cardiac conditions, uncontrolled psychiatric conditions, some medication profiles. A clinic with no exclusion criteria is not screening.

Staff

☐ **5. Who is your medical director, and can I verify their credentials?**

A good answer: A name, a license, and a jurisdiction you can check. Titles without names are marketing.

☐ **6. How many ACLS-certified staff are present during dosing?**

A good answer: At least two trained attendants through the acute window, per the GITA guidelines, with advanced cardiac life support certification they can document.

☐ **7. Is a physician physically present or on call during dosing?**

A good answer: Physically present at the higher tier of clinics, immediately reachable at minimum, and they should say which.

Monitoring and emergencies

☐ **8. What cardiac monitoring runs while I am dosed?**

A good answer: Continuous monitoring, at least 3-lead, through dosing and after, not periodic checks by a sitter.

☐ **9. How long am I monitored after the flood dose?**

A good answer: Until cardiac readings normalize, typically well past the acute experience, and someone stays with you.

☐ **10. Do you administer magnesium before treatment?**

A good answer: Yes, as pre-treatment loading; it protects against the arrhythmia ibogaine can trigger.

☐ **11. How far is the nearest 24-hour hospital, in minutes?**

A good answer: A number, not a neighborhood. The GITA guidelines say emergency responders within 15 minutes and ideally a hospital within 30.

☐ **12. What exactly happens if I have a cardiac event?**

A good answer: A rehearsed plan: who resuscitates, what equipment is on site, who transports, which hospital receives. Hesitation here matters.

☐ **13. What resuscitation equipment do you keep on site?**

A good answer: A defibrillator and emergency medications at minimum, and staff trained to use them.

The program

☐ **14. What program length do you recommend for my substance, and why?**

A good answer: Fentanyl, methadone and Suboxone need longer stays and pre-treatment stabilization, often 12 to 30 days. A one-week quote for a methadone detox is a warning sign.

☐ **15. What form of ibogaine do you use, and how do you dose it?**

A good answer: Ibogaine HCl, dosed in milligrams per kilogram of body weight, often with a test dose first. Vagueness about form or dose is disqualifying.

☐ **16. What is included in the price, and what costs extra?**

A good answer: A written answer: lodging, meals, labs, the medicine, transfers, aftercare. Surprise add-ons show up in complaint records.

☐ **17. What does aftercare actually consist of?**

A good answer: Something structured: integration sessions, coaching, follow-up calls on a schedule. "We are always available" is not a program.

Business red flags

☐ **18. Is your pricing published anywhere I can read it?**

A good answer: Yes, or they send a written quote immediately. About half the industry hides pricing behind a phone call; the transparent half exists.

☐ **19. Can I speak to former patients or read verified reviews?**

A good answer: Platform-verified reviews (Google, Recovery.com) beat testimonials on the clinic's own site. Also search the clinic name plus the word complaint yourself.

☐ **20. Do you guarantee results?**

A good answer: No honest clinic guarantees a cure. Relapse after ibogaine is common without aftercare, and tolerance resets make early relapse dangerous. A guarantee is a red flag, not a comfort.

☐ **21. Will you take a deposit before medical screening?**

A good answer: Screening should come first. A clinic that wants payment before it knows whether it can safely treat you has told you its priority.

Every clinic profile at topibogaineclinics.com/ibogaine-clinics-in-mexico carries a safety-transparency scorecard built on these questions. Free, independent, no clinic pays for inclusion.